

<b>Case Number:</b>	CM14-0189190		
<b>Date Assigned:</b>	11/20/2014	<b>Date of Injury:</b>	08/04/2009
<b>Decision Date:</b>	01/08/2015	<b>UR Denial Date:</b>	10/13/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	11/12/2014

### HOW THE IMR FINAL DETERMINATION WAS MADE

MAXIMUS Federal Services sent the complete case file to an expert reviewer. He/she has no affiliation with the employer, employee, providers or the claims administrator. The expert reviewer is licensed in Chiropractic, has a subspecialty in Acupuncture and is licensed to practice in California. He/she has been in active clinical practice for more than five years and is currently working at least 24 hours a week in active practice. The expert reviewer was selected based on his/her clinical experience, education, background, and expertise in the same or similar specialties that evaluate and/or treat the medical condition and disputed items/services. He/she is familiar with governing laws and regulations, including the strength of evidence hierarchy that applies to Independent Medical Review determinations.

### CLINICAL CASE SUMMARY

The expert reviewer developed the following clinical case summary based on a review of the case file, including all medical records:

The injured worker is a 39 year old male who reported neck pain from injury sustained on 08/04/09 due to cumulative trauma of sitting in a chair which did not support his head. MRI of the cervical spine dated 08/05/11 revealed disc degeneration. Patient is diagnosed with neck pain and headaches. Patient has been treated with medication, physical therapy and acupuncture. Per medical notes dated 09/24/14, patient has ongoing neck pain and headaches. He has completed his acupuncture and found it beneficial. He would like to get an additional 6 visits, as this has provided him with approximately 50% relief in his pain that lasted about 2 months. Patient reports that his pain was averaging 8/10, which was brought down to about 4/10; taking approximately 50% less ibuprofen. Per UR appeal letter dated 10/20/14, patient states "acupuncture has been the only modality (active or passive) other than ibuprofen, that has resulted in significant functional improvement as well as decreased pain; additionally ibuprofen intake is minimized with acupuncture treatment". Per medical notes dated 10/27/14, with acupuncture he is able to use the computer more comfortable, gets more work done, work more days, he is able to drive with ease and safety. Provider requested additional 6 acupuncture visits which were denied by the utilization review. Therefore, the Utilization Review decision was appealed for an Independent Medical Review.

### IMR ISSUES, DECISIONS AND RATIONALES

The Final Determination was based on decisions for the disputed items/services set forth below:

**Acupuncture x 6 sessions:** Overturned

**Claims Administrator guideline:** Decision based on MTUS Acupuncture Treatment Guidelines.

**MAXIMUS guideline:** Decision based on MTUS Acupuncture Treatment Guidelines.

**Decision rationale:** Per MTUS- Section 9792.24.1 Acupuncture Medical treatment Guidelines page 8-9. "Acupuncture is used as an option when pain medication is reduced and not tolerated, it may be used as an adjunct to physical rehabilitation and/or surgical intervention to hasten functional recovery". "Time to produce function improvement: 3-6 treatments. 2) Frequency: 1-3 times per week. 3) Optimum duration: 1-2 months. Acupuncture treatments may be extended if functional improvement is documented". Patient has had prior acupuncture treatment. Per medical notes dated 09/24/14, patient reports that his pain was averaging 8/10, which was brought down to about 4/10; taking approximately 50% less ibuprofen. Per UR appeal letter dated 10/20/24, patient states "acupuncture has been the only modality (active or passive) other than ibuprofen, that has resulted in significant functional improvement as well as decreased pain; additionally ibuprofen intake is minimized with acupuncture treatment". Per medical notes dated 10/27/14, with acupuncture he is able to use the computer more comfortable, gets more work done, work more days, he is able to drive with ease and safety. Medical reports reveal evidence of significant changes or improvement in findings, revealing a patient who has achieved significant objective functional improvement to warrant additional treatment. Additional visits may be rendered if the patient has documented objective functional improvement. Per MTUS guidelines, Functional improvement means either a clinically significant improvement in activities of daily living or a reduction in work restrictions as measured during the history and physical exam or decrease in medication intake. Per review of evidence and guidelines, additional 6 acupuncture treatments are medically necessary.