

Case Number:	CM14-0190964		
Date Assigned:	11/24/2014	Date of Injury:	02/05/2013
Decision Date:	01/31/2015	UR Denial Date:	11/05/2014
Priority:	Standard	Application Received:	11/17/2014

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 Board Certified in Family Medicine 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:

Patient had a date of injury on 2/5/2013. Patient was cleaning and was on her knees when she stood up she could not straighten her back due to intense low back pain Diagnosis includes sprain and strain of lumbosacral, displacement of lumbar intervertebral disc without myelopathy, thoracic/lumbosacral neuritis/radiculitis.

IMR ISSUES, DECISIONS AND RATIONALES

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

12 visits of physical therapy for the lumbar: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Physical Medicine. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG)

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines physical medicine Page(s): 98-99.

Decision rationale: Based on guidelines, physical medicine can provide short term relief during the early phases of pain treatment and are directed at controlling symptoms such as pain, inflammation and swelling and to improve the rate of healing soft tissue injuries. They can be used sparingly with active therapies to help control swelling, pain and inflammation during the

rehabilitation process. Based on the medical records, the patient has already had physical therapy with no documentation of improvement. Therefore, the request is not medically necessary.

12 visits of physical therapy for the bilateral legs: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Physical Medicine. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG)

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines physical medicine Page(s): 98-99.

Decision rationale: Based on guidelines physical medicine can provide short term relief during the early phases of pain treatment and are directed at controlling symptoms such as pain, inflammation and swelling and to improve the rate of healing soft tissue injuries. They can be used sparingly with active therapies to help control swelling, pain and inflammation during the rehabilitation process. Based on the medical records, the patient has already had physical therapy with no documentation of improvement. Therefore, the request is not medically necessary.

12 visits of acupuncture for the lumbar: Upheld

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

MAXIMUS guideline: Decision based on MTUS Acupuncture Treatment Guidelines.

Decision rationale: According to guidelines, acupuncture treatments can be continued if there is documentation of improved function. According to the medical records, there is no documentation of functional improvement and thus the request is not medically necessary.

12 visits of acupuncture for the bilateral legs: Upheld

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

MAXIMUS guideline: Decision based on MTUS Acupuncture Treatment Guidelines.

Decision rationale: According to guidelines, acupuncture treatments can be continued if there is documentation of improved function. According to the medical records, there is no documentation of functional improvement and thus the request is not medically necessary.

6 follow up chiropractic visits: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Manual therapy & manipulation.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 12 Low Back Complaints
Page(s): 299.

Decision rationale: According to guidelines, chiropractic manipulation in the acute phases of injury manipulation may enhance patient mobilization. If manipulation does not bring improvement in three to four weeks, it should be stopped and the patient reevaluated. Based on medical records, there is no documentation of improvement and thus the request is not medically necessary.

12 chiropractic visits for the lumbar: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines
Manual therapy & manipulation.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 12 Low Back Complaints
Page(s): 299.

Decision rationale: According to guidelines chiropractic manipulation in the acute phases of injury manipulation may enhance patient mobilization. If manipulation does not bring improvement in three to four weeks, it should be stopped and the patient reevaluated. Based on medical records, there is no documentation of improvement and thus the treatment is not medically necessary.

12 chiropractic visits for the bilateral legs: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines
Manual therapy & manipulation.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 12 Low Back Complaints
Page(s): 299.

Decision rationale: According to guidelines chiropractic manipulation in the acute phases of injury manipulation may enhance patient mobilization. If manipulation does not bring improvement in three to four weeks, it should be stopped and the patient reevaluated. Based on medical records, there is no documentation of improvement and thus the treatment is not medically necessary.