

Case Number:	CM14-0192868		
Date Assigned:	11/26/2014	Date of Injury:	05/20/2011
Decision Date:	01/15/2015	UR Denial Date:	11/18/2014
Priority:	Standard	Application Received:	11/18/2014

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 and 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 58 year old female who reported neck and low back pain from injury sustained on 05/20/11. Mechanism of injury was not documented in the provided medical records. X-rays of the cervical spine dated 10/14/14 revealed status post Anterior Cervical Discectomy and Fusion (ACDF) C5-7 were stable. Patient is diagnosed with cervical spine strain, lumbar spine strain, cervical spondylosis C5-7 with myeloradiculopathy, status post ACDF C5-7. Patient has been treated with cervical fusion surgery, medication, physical therapy. Per utilization review dated 11/18/14, patient has been certified 8 acupuncture sessions previously. Per medical notes dated 11/06/14, patient states the pain is about the same; pain without medication is rated at 9/10 and with medication rated at 6/10. She completed physical therapy and will be starting acupuncture. Provider requested acupuncture two times four for cervical and lumbar spine which was non-certified by the utilization review on 11/18/14. 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 2 x 4 to lumbar and cervical spine: Upheld

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

MAXIMUS guideline: Decision based on MTUS Acupuncture Treatment Guidelines.

Decision rationale: Per California 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". Per utilization review dated 11/18/14, patient has been certified 8 acupuncture sessions previously. Per medical notes dated 11/06/14, patient states the pain is about the same; she completed physical therapy and will be starting acupuncture. Provider requested acupuncture 2X4 for cervical and lumbar spine which was non-certified by the utilization review on 11/18/14. There is no assessment in the provided medical records of functional efficacy with prior acupuncture visits. 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. Additionally requested visits exceed the quantity supported by cited guidelines. Furthermore Official disability guidelines do not recommend acupuncture for neck pain. Per review of evidence and guidelines, 8 acupuncture treatments are not medically necessary.