

Case Number:	CM14-0193608		
Date Assigned:	12/01/2014	Date of Injury:	04/11/2012
Decision Date:	01/15/2015	UR Denial Date:	11/18/2014
Priority:	Standard	Application Received:	11/19/2014

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 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 66 year old female who reported neck pain from injury sustained on 04/11/12. Patient tripped over the equipment bag and fell head first into the classroom door and hit the left side of the head and left elbow. X-rays of the cervical spine revealed multilevel cervical spondylosis with severe disc height loss. Patient is diagnosed with cervical spondylosis. Patient has been treated with medication, physical therapy and acupuncture. Per medical notes dated 11/04/14, she has improved in terms of her vertigo and headaches; however, she has persistent neck pain and interscapular back pain. She describes her neck pain as an aching with pins and needles. 80% of her pain is in the posterior neck. Pain increases with frequent movement of her neck. Pain is improved with acupuncture and medication. Pain is rated at 4-8/10. Examination revealed tenderness to palpation of the left posterior scalp. Provider requested additional 18 acupuncture treatments which were non-certified 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:

Additional acupuncture 3 times a week for 6 weeks 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 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 11/4/14, patient complains of persistent neck pain and interscapular back pain; pain is improved with acupuncture and medication. Provider requested additional 3X6 acupuncture treatments for neck pain which were non-certified by the utilization review. There is no assessment in the provided medical records of functional efficacy with prior acupuncture visits. Medical reports reveal little evidence of significant changes or improvement in findings, revealing a patient who has not 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. 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, 3x6 acupuncture treatments are not medically necessary.