

Case Number:	CM14-0193911		
Date Assigned:	12/01/2014	Date of Injury:	10/18/2001
Decision Date:	01/16/2015	UR Denial Date:	10/22/2014
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 Occupational 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:

The applicant is a represented [REDACTED] employee who has filed a claim for chronic neck, shoulder, wrist, low back, and knee pain reportedly associated with an industrial injury of October 18, 2001. The Utilization Review report dated October 22, 2014 denied a prospective request for 12 sessions of acupuncture. It was noted that the applicant had had 24 prior sessions of acupuncture approved and had failed to demonstrate any improvement with the same. The Utilization Review stated that the decision was based on a report dated October 7, 2014 and a Request for Authorization form received on October 17, 2014. The applicant's attorney subsequently appealed. In a handwritten note dated November 17, 2014, the applicant was given diagnoses of hypertension, possible sleep apnea, umbilical hernia status post umbilical hernia repair, sexual dysfunction, and chronic hearing loss. The applicant was given refills of Dilantin, Hydrochlorothiazide, and Viagra. The applicant's work status was not furnished on this occasion. In a November 6, 2014 progress note, the applicant reported ongoing complaints of neck, shoulder, wrist, and ankle pain. The applicant was placed off of work, on total temporary disability and Ambien and Lidoderm patches were renewed. The attending provider stated that he was appealing previously denied acupuncture but acknowledged that the applicant's disability status was unchanged. The applicant was also using Relafen for pain relief, it was acknowledged. On September 25, 2014, the attending provider stated that he was seeking authorization for 12 additional sessions of acupuncture on the grounds that acupuncture had reportedly helped the applicant's low back and leg pain. Ambien, Norflex, Relafen, and Prilosec were renewed while the applicant was placed off of work, on total temporary disability.

IMR ISSUES, DECISIONS AND RATIONALES

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

12 Acupuncture visits: Upheld

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

MAXIMUS guideline: Decision based on MTUS Acupuncture Treatment Guidelines.

Decision rationale: As both the attending provider and claims administrator have acknowledged, the request in question does represent a renewal request for acupuncture as the applicant has had 24 prior sessions of acupuncture. While the Acupuncture Medical Treatment Guidelines in MTUS 9792.24.1.d acknowledge that acupuncture treatments may be extended if there is evidence of functional improvement as defined in Section 9792.20f. In this case, however, there has been no such demonstration of functional improvement with earlier treatment. The applicant remains off of work, on total temporary disability, despite having had 24 prior sessions of acupuncture. The applicant remains dependent on several different analgesic and adjuvant medications, including Relafen, Ambien, Norflex, Lidoderm, etc., despite having had extensive prior acupuncture. All of the foregoing, taken together, strongly suggests a lack of functional improvement as defined in MTUS 9792.20f, despite completion of 24 prior sessions of acupuncture. Therefore, the request for 12 additional sessions of acupuncture is not medically necessary.