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| Case Number: | CM15-0004601 | | |
| Date Assigned: | 01/15/2015 | Date of Injury: | 01/08/2013 |
| Decision Date: | 03/24/2015 | UR Denial Date: | 12/22/2014 |
| Priority: | Standard | Application Received: | 01/08/2015 |

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. 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/Service. He/she is familiar with governing laws and regulations, including the strength of evidence hierarchy that applies to Independent Medical Review determinations.

The Expert Reviewer has the following credentials:

State(s) of Licensure: California

Certification(s)/Specialty: Chiropractor, Oriental Medicine

CLINICAL CASE SUMMARY

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

This 43-year-old female sustained a work-related left knee and foot injury on 1/8/2013. According to the progress notes dated 8/27/2014, the injured worker's (IW) diagnoses are contusion of left foot, left knee strain, left chondromalacia, metatarsalgia, left knee patellofemoral syndrome, synovitis and tenosynovitis unspecified and tear: knee, lateral cartilage/meniscus. She reports continuing left knee pain. Previous treatment includes medications, physical therapy, cortisone injection and chiropractic. The treating provider requests acupuncture twice weekly for six weeks without stimulation (15 min) left knee and a left knee brace. The Utilization Review on 12/22/14 non-certified acupuncture twice weekly for six weeks without stimulation (15 min) left knee and a left knee brace, citing California MTUS Acupuncture Medical Treatment guidelines and Official Disability Guidelines-Knee and Leg.

IMR ISSUES, DECISIONS AND RATIONALES

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

Acupuncture 2xwk X 6wks Without Stimulation (15 Min) Left Knee 97810: Upheld

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

MAXIMUS guideline: Decision based on MTUS Acupuncture Treatment Guidelines.

Decision rationale: Upon reviewing the submitted records, there was no evidence that the patient had received acupuncture care in the past. The Acupuncture Medical Treatment guideline recommends a trial of 3-6 visits with a frequency of 1-3 times a day over 1 to 2 months. It states that acupuncture may be extended if there is documentation of functional improvement. The provider's request for 12 acupuncture sessions to the left knee exceeds the guidelines recommendation for an initial trial. The patient failed to meet the guidelines recommendation for acupuncture and the provider's request is not medically necessary at this time.

Left Knee Brace: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 13 Knee Complaints.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 13 Knee Complaints Page(s): 340.

Decision rationale: The ACOEM guidelines states that knee brace can be used for patellar instability, anterior cruciate ligament, or medial collateral ligament and that the benefits may be more emotional than medical. It states that usually a brace is necessary only if the patient is going to be stressing the knee under load such as climbing ladders or carrying boxes. The provider prescribed the knee brace for prophylactic purposes to avoid exacerbation of current injury. There was no evidence that the patient will be putting the knee under load and no evidence of instability in the patellar, ACL, or ACL. Based on the guidelines, the provider's request for a knee brace is not medically necessary at this time.