

<b>Case Number:</b>	CM15-0133315		
<b>Date Assigned:</b>	07/21/2015	<b>Date of Injury:</b>	10/20/2014
<b>Decision Date:</b>	09/02/2015	<b>UR Denial Date:</b>	06/16/2015
<b>Priority:</b>	Standard	<b>Application Received:</b>	07/09/2015

### 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: Texas, New York, California  
 Certification(s)/Specialty: Preventive Medicine, Occupational 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:

The applicant is a represented 54-year-old who has filed a claim for chronic neck pain reportedly associated with an industrial injury of October 20, 2014. In a Utilization Review report dated June 16, 2015, the claims administrator failed to approve requests for six sessions of physical therapy and six sessions of acupuncture for the cervical spine. The claims administrator referenced an RFA form received on June 9, 2015 in its determination. Motrin was approved. A June 1, 2015 progress note was cited. The applicant's attorney subsequently appealed. On an RFA form dated June 8, 2015, the physical therapy and acupuncture at issue were ordered. In an associated handwritten progress note dated June 1, 2015, difficult to follow, not entirely legible, the applicant was asked to return to work with a 5-pound lifting limitation. It was suggested that the applicant was working with said limitation in place, albeit through preprinted checkboxes. The applicant was working on a part-time basis, at a rate of four hours a day, it was stated. The applicant was still using Motrin for pain relief. The applicant was receiving manipulative therapy, it was reported. An acupuncture note dated January 29, 2014 seemingly suggested that 12 sessions of acupuncture were ordered on that date. In an earlier note dated April 16, 2015, the same, unchanged 5-pound lifting limitation was renewed. The applicant was working more than four hours per shift. The applicant was using Motrin on that date as well, it was acknowledged.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Physical therapy 2 x 3 for cervical spine:** Upheld

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines, Physical Medicine Guidelines.

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Functional Restoration Approach to Chronic Pain Management; Physical Medicine Guidelines Page(s): 7; 99.

**Decision rationale:** No, the request for six sessions of physical therapy for the cervical spine was not medically necessary, medically appropriate, or indicated here. While page 99 of the MTUS Chronic Pain Medical Treatment Guidelines does support a general course of eight to ten sessions of therapy for radiculitis, the diagnosis reportedly present here, this recommendation is, however, qualified by commentary made on page 8 of the MTUS Chronic Pain Medical Treatment Guidelines to the effect that demonstration of functional improvement is necessary at various milestones in the treatment program in order to justify continued treatment. Here, the applicant was given a rather proscriptive 5-pound lifting limitation and an injunction to work no more than four hours per shift on January 1, 2015. The applicant remained dependent on analgesic medications to include Motrin and other forms of medical treatment to include acupuncture and manipulative therapy. It appeared, thus, that the applicant had in fact plateaued following receipt of earlier unspecified amounts of physical therapy in terms of the functional improvement parameters established in MTUS 9792.20e. Therefore, the request for six sessions of physical therapy is not medically necessary.

**Acupuncture 1 x 6 for cervical spine:** Upheld

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

**MAXIMUS guideline:** Decision based on MTUS Acupuncture Treatment Guidelines.

**Decision rationale:** Similarly, the request for six sessions of acupuncture for the cervical spine is likewise not medically necessary, medically appropriate, or indicated here. The request represents a renewal or extension request for acupuncture. While the Acupuncture Medical Treatment Guidelines in MTUS 9792.24.1d do acknowledge that acupuncture treatments may be extended if there is evidence of functional improvement as defined in Section 9792.20e, here, however, it appeared that the applicant had plateaued in terms of functional improvement measures established in Section 9792.20e with earlier acupuncture. The applicant was asked to work no more than four hours per shift as of the June 1, 2015 office visit at issue. This limitation was unchanged when contrasted against an earlier note of April 16, 2015. The same, somewhat proscriptive 5-pound lifting limitation was renewed on June 1, 2015, again unchanged from an earlier note of April 16, 2015. The applicant remained dependent on various forms of medical treatment to include Motrin, manipulative therapy, physical therapy, etc. It appeared, thus, that the applicant had, in fact, plateaued following receipt of earlier unspecified amounts of acupuncture through the date of the request. Therefore, the request is not medically necessary.

