

Case Number:	CM15-0137246		
Date Assigned:	07/27/2015	Date of Injury:	11/15/2013
Decision Date:	08/27/2015	UR Denial Date:	07/09/2015
Priority:	Standard	Application Received:	07/15/2015

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:

The injured worker is a 64 year old male, who sustained an industrial injury on 11/15/13. Initial complaints were not reviewed. The injured worker was diagnosed as having disorders of the bursae/tendons shoulder region. Treatment to date has included physical therapy; acupuncture; chiropractic therapy; shoulder injections (12/2013; 2/2014); medications. Diagnostics studies included MRI right shoulder (3/12/14); X-ray left shoulder (11/23/13); EMG/NCV upper extremities (4/22/14). Currently, the PR-2 notes dated 6/3/15 indicated the injured worker complains of pain in neck, upper back, both shoulders and both shoulder blades with radiation to both arms. The pain is associated with numbness, tingling and weakness in the arms and hands. The pain is described as frequent and moderate in intensity with complaints of difficulty sleeping due to pain. The injured worker is requesting additional acupuncture. Requests for authorization of a surgical consult regarding the MRI findings and additional physical therapy, chiropractic therapy and acupuncture is pending. On physical examination, the provider documents the injured worker has a normal gait and sits comfortably. Examination of the cervical spine reveals range of motion is full in all planes. Exam of the right shoulder reveals range of motion to forward flexion is 100 degrees, abduction 110 degrees, external rotation 50 degrees and internal rotation is 55 degrees with extension 15 degrees. There is tenderness to palpation over the posterior aspect of the shoulder. He has a positive Hawkin's and crossed arm adduction tests. There is a negative Yergason's test. A random urine drug screening test notes he is compliant and no aberrant behavior noted. He has received shoulder injections in the past. There is no documentation submitted indicating any surgical intervention. The provider is requesting authorization of acupuncture for the bilateral shoulders 6 sessions.

IMR ISSUES, DECISIONS AND RATIONALES

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

Acupuncture, bilateral shoulders QTY: 6.00: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 9 Shoulder Complaints, Acupuncture Treatment Guidelines.

MAXIMUS guideline: Decision based on MTUS Acupuncture Treatment Guidelines.

Decision rationale: The patient complained of neck, upper back, and bilateral shoulder pain. The Acupuncture Medical Treatment guideline states that acupuncture may be extended with documentation of functional improvement. Records indicate that the patient would like more visits with acupuncture. However, there was no documentation of functional improvement from prior acupuncture sessions. Based on the lack of functional improvement from prior acupuncture therapy, the provider's request for 6 acupuncture session is not medically necessary and appropriate at this time.