

<b>Case Number:</b>	CM15-0168658		
<b>Date Assigned:</b>	09/09/2015	<b>Date of Injury:</b>	08/25/2005
<b>Decision Date:</b>	10/08/2015	<b>UR Denial Date:</b>	08/26/2015
<b>Priority:</b>	Standard	<b>Application Received:</b>	08/27/2015

### 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: 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 62 year old female, who sustained an industrial injury on August 25, 2005. She reported right knee pain after falling and landing on the knee. The injured worker was diagnosed as having status post right knee surgery in 2006 and 2014, right knee pain, bursitis of the right knee and extensive synovectomy in the patellofemoral compartment, medial compartment, and lateral compartment, intercondylar notch and left patellar region. Arthroscopic surgery, partial, medial and lateral meniscectomy, arthroscopic loose body removal in the popliteal height measuring 1.5 cm to 5 mm and arthroscopic microfracture of the lateral femoral condyle and lateral tibial plateau in the right. Treatment to date has included diagnostic studies, radiographic imaging, surgical interventions of the right knee, acupuncture, conservative care, medications and work restrictions. Currently, the injured worker continues to report right knee pain. The injured worker reported an industrial injury in 2005, resulting in the above noted pain. She was treated conservatively and surgically without complete resolution of the pain. Evaluation on May 12, 2015, revealed continued pain as noted. She reported the pain was improving and requested a refill of Tramadol. Evaluation on August 14, 2015, revealed continued pain as noted. She rated her pain at 6 on a 1-10 scale with 10 being the worst. She noted the average pain was 8. She noted the pain without medication is 10 on a 1-10 scale with 10 being the worst. It was noted by the physician, previous auricular acupuncture in the office resulted in the pain decreasing from 6 to 0-1 on a 1-10 scale with 10 being the worst. The RFA included a request for Acupuncture 6 visits and was modified to 3 visits on the utilization review (UR) on August 26, 2015.

## **IMR ISSUES, DECISIONS AND RATIONALES**

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

**Acupuncture 6 visits:** Overturned

**Claims Administrator guideline:** Decision based on MTUS Acupuncture Treatment 2007.

**MAXIMUS guideline:** Decision based on MTUS Acupuncture Treatment 2007.

**Decision rationale:** In reviewing the records available, it does not appear that the patient has yet undergone an acupuncture trial. As the patient continued symptomatic despite previous care the acupuncture trial requested for pain management and function improvement is supported by the MTUS. The MTUS (guidelines) note that the number of acupuncture sessions to produce functional improvement is 3-6 treatments. The guidelines also states that extension of acupuncture care could be supported for medical necessity based on function improvement obtained with the trial. Therefore the request for six acupuncture sessions is within guidelines, appropriate, and medically necessary.