

Case Number:	CM15-0184434		
Date Assigned:	09/24/2015	Date of Injury:	09/01/2011
Decision Date:	11/06/2015	UR Denial Date:	08/25/2015
Priority:	Standard	Application Received:	09/18/2015

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 44 year old female with a date of injury on 09-01-2011. The injured worker is undergoing treatment for epicondylitis-medial elbow, epicondylitis-lateral, and wrist pain on the right and status-post her right wrist, and it is documented she noticed mild pain relief with acupuncture. A physician note dated 07-10-2015 documents the injured worker presented due to increased pain in her right wrist and elbow. There is tingling and numbness into the right long and ring fingers. The elbow is swollen and has tenderness to the lateral aspect. There is decreased range of motion and wrist with discomfort. Grip strength is decreased. She was started on Ibuprofen and Tramadol. A physician progress note dated 07-20-2015 documents the injured worker has complaints of pain to the right elbow that is a constant ache. She takes Ibuprofen and Tramadol as need. She is working full duty. She has minimal tenderness at the lateral epicondyle and she has full range of motion. In a physician progress note dated 08-17-2015 has continued pain to the right elbow. She is status post a cubital tunnel release. Her pain is to the medial aspect of the elbow that radiates up into the shoulder and down the forearm into her hand. She has tingling numbness to the 4th and 5th digits. Right arm strength is decreased and grip strength is decreased. There is tenderness to the medial epicondyle. Right elbow has limited and painful range of motion in all planes. Her medications include Ibuprofen and Tramadol. Treatment to date has included diagnostic studies, medications, status post acupuncture, occupational therapy, and home exercises. The Request for Authorization dated 08-17-2015 is for Acupuncture 2 x 4 to the right forearm QTY 4. On 08-25-2015 the Utilization Review modified request for Acupuncture 2x4 for the right forearm Qty: 8.00 to Acupuncture 2 x 4 to the right forearm QTY 4.

IMR ISSUES, DECISIONS AND RATIONALES

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

Acupuncture 2x4 for the right forearm Qty: 8.00: Upheld

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

MAXIMUS guideline: Decision based on MTUS Acupuncture Treatment 2007.

Decision rationale: The Acupuncture Treatment guidelines states that acupuncture may be extended with documentation of functional improvement. The patient complained of pain on the medial aspect of the elbow that radiates up into the shoulder and down the forearm into the hand. The patient reported tingling numbness to the 4th and 5th digits. The patient reported of decrease pain from prior acupuncture treatments. The patient was authorized 4 of the 8 requested acupuncture session. There was no documentation of functional improvement from the most recent authorized sessions. Therefore, the provider's request for 8 acupuncture session is not medically necessary at this time.