

<b>Case Number:</b>	CM15-0034868		
<b>Date Assigned:</b>	03/03/2015	<b>Date of Injury:</b>	10/29/2014
<b>Decision Date:</b>	05/01/2015	<b>UR Denial Date:</b>	02/13/2015
<b>Priority:</b>	Standard	<b>Application Received:</b>	02/25/2015

### 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 (IW) is a 29-year-old female, who sustained an industrial injury on 10/29/2014 due to repetitive strain. The diagnoses have included repetitive strain injury and unspecified site of sprain and strain. Treatment to date has included medications, ice application, diagnostic studies, home exercise, physical therapy and acupuncture. Currently, the IW complains of minimal sharp pain in the right hand, which spread to the wrist. Objective findings included tenderness in multiple areas non-focally throughout both upper limbs. Tinel's positive at elbow on the right, medial elbow pain with wrist flexion and lateral elbow pain with wrist extension. Carpal compression positive for numbness in all fingers and forearms both sides. There is reduced pinprick sensation on right small pinky finger only. On 2/13/2015, Utilization Review non-certified a request for acupuncture for the left arm, right arm, right shoulder, left shoulder and right elbow (1x8) noting that the clinical information submitted for review fails to meet the evidence based guidelines for the requested service. The MTUS was cited. On 2/25/2015, the injured worker submitted an application for IMR for review of left arm, right arm, right shoulder, left shoulder and right elbow (1x8).

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Acupuncture for the left arm, right arm, right shoulder, left shoulder, left elbow, right elbow for 8 visits: Upheld**

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

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

**Decision rationale:** The guidelines note that the amount of acupuncture to produce functional improvement is 3 to 6 treatments. The same guidelines read extension of acupuncture care could be supported for medical necessity "if functional improvement is documented as either a clinically significant improvement in activities of daily living or a reduction in work restrictions and a reduction in the dependency on continued medical treatment." The patient already underwent eight prior acupuncture sessions, with no functional benefits related to such care documented. Neither a flare up of the condition, nor re-injury was reported. Based on the guidelines, without evidence of any significant, objective functional improvement (quantifiable response to treatment) obtained with previous acupuncture the additional acupuncture requested will not be supported for medical necessity. Additionally, the request is for acupuncture x 8, number that exceeds the guidelines without a medical reasoning to support such request. Therefore, the additional acupuncture x 8 is not supported for medical necessity.