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| Case Number: | CM15-0036332 | | |
| Date Assigned: | 03/05/2015 | Date of Injury: | 11/01/2011 |
| Decision Date: | 04/08/2015 | UR Denial Date: | 02/09/2015 |
| Priority: | Standard | Application Received: | 02/26/2015 |

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 57 year old female, who sustained an industrial injury on 11/1/2011. She reports cumulative trauma to the neck. Diagnoses include status post reentry anterior cervical fusion above the previous cervical 5-6 fusion, cervical radiculitis and cervicgia. Treatments to date include physical therapy, acupuncture, epidural steroid injection and medication management. A progress note from the treating provider dated 10/28/2014 indicates the injured worker reported worsening neck pain radiating left posterolateral arm pain and worsening numbness and tingling in the 3rd, 4th, and 5th digits of her hand. She feels that her symptoms are progressively worsening, particularly in the past six weeks. She has had to decrease her work hours to a ten hour week and feels that she is really unable to tolerate even this. Per a prior review, the claimant had 16 authorized acupuncture visits and had temporary relief. Per an acupuncture note dated 10/27/2014, the claimant has had 5/8 acupuncture treatments has had pain relief following each treatment, faster recovery from episodes of pain, and ability to swallow better. Per a report dated 5/6/2014, the claimant has had multiple conservative therapies including epidural injections, physical therapy, acupuncture, anti-inflammatory, narcotic medications all without significant relief of her symptoms. Per an acupuncture note dated 11/11/2014, the claimant is reporting 40-50% reduction in neck pain and no numbness in the fingers. Per an acupuncture note dated 1/20/2015, the claimant is reporting the pain is mildly improved and there is a reduction of numbness in her hands. Per a PR-2 dated 12/29/2014, the claimant had a few sessions of acupuncture and has temporary relief. She is on total temporary disability.

IMR ISSUES, DECISIONS AND RATIONALES

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

Acupuncture 2 times a week for 4 weeks Cervical Spine: Upheld

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

MAXIMUS guideline: Decision based on MTUS Acupuncture Treatment Guidelines.

Decision rationale: According to evidenced based guidelines, further acupuncture after an initial trial is medically necessary based on functional improvement. Functional improvement is defined as a clinically significant improvement in activities of daily living, a reduction in work restrictions, or a reduction of dependency on continued medical treatments or medications. The claimant has had extensive prior acupuncture of unknown quantity and duration and had mild subjective benefits. However, the provider fails to document objective functional improvement associated with acupuncture treatment. In fact, the claimant appears to be getting worse. She has had to reduce work hours to total temporary disability. Acupuncture seems to be only offering temporary benefit. Prior to her surgery, acupuncture was also documented to have no significant benefit. Therefore further acupuncture is not medically necessary.