

Case Number:	CM15-0239361		
Date Assigned:	12/16/2015	Date of Injury:	10/06/1999
Decision Date:	01/25/2016	UR Denial Date:	11/11/2015
Priority:	Standard	Application Received:	12/08/2015

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 74 year old male, who sustained an industrial injury on 10-6-1999. The injured worker was being treated for right ankle and foot pain in joint, sinus tarsi syndrome in unspecified ankle, plantar fasciitis, and neuropathy or mononeuropathy unspecified. The injured worker (6-5-2015 and 8-28-2015) reported ongoing right ankle pain, which he rated 3 out of 10. The injured worker (10-30-2015) reported a flare-up of right foot pain with unsteady gait and nearly falling since he completed his last acupuncture session on 9-11-2015. He rated his current pain level as 1-none. He reported that acupuncture improved his pain level from 8 to 3, providing more than 80% pain relief, and allowed him to walk longer distances without his cane. He reported doing a home exercise program and walking regularly. The physical exam (6-5-2015, 8-2-2015, and 10-30-2015) revealed tenderness to palpation in the right ankle. Treatment has included at least 8 sessions of acupuncture (between 6-12-2015 and 9-14-2015) and topical cream. Per the treating physician (9-28-2015 report), the injured worker was deemed permanent and stationary. On 10-30-2015, the requested treatments included 8 sessions of acupuncture for the right foot. On 11-11-2015, the original utilization review non-certified a request for 8 sessions of acupuncture for the right foot.

IMR ISSUES, DECISIONS AND RATIONALES

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

8 Sessions of Acupuncture for right foot: Upheld

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

MAXIMUS guideline: Decision based on MTUS Acupuncture Treatment 2007.

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 8 prior acupuncture visits. However, the provider fails to document objective functional improvement associated with prior acupuncture treatment. Therefore, further acupuncture is not medically necessary.