

<b>Case Number:</b>	CM14-0102626		
<b>Date Assigned:</b>	07/30/2014	<b>Date of Injury:</b>	02/20/2009
<b>Decision Date:</b>	10/15/2014	<b>UR Denial Date:</b>	05/30/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	07/02/2014

### 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. The expert reviewer is licensed in Acupuncture and is licensed to practice in New York & Connecticut. 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/services. He/she is familiar with governing laws and regulations, including the strength of evidence hierarchy that applies to Independent Medical Review determinations.

### CLINICAL CASE SUMMARY

The expert reviewer developed the following clinical case summary based on a review of the case file, including all medical records:

According to the records made available for review, this is a 61 year old male patient sustained a lower back injury with a 2/20/2009 date of injury resulting from sweeping trash. The patient is status post L4/5 laminectomy 2010 with residual lower back symptoms of pain. Based on the PR-2s and records in this file, at the time of this request for authorization of acupuncture there is documentation of main subjective pain complaints of the lumbar spine, with objective positive findings including limited range of motion and positive objective findings. He continues to take oral medication. IT's mentioned that the patient had no benefit from his prior acupuncture which was of an unknown amount and over an unknown amount of time. No acupuncture SOAP/progress notes were provided in this file.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Acupuncture for the low back; 6 sessions:** Upheld

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

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

**Decision rationale:** Based on the MTUS Acupuncture Guidelines, acupuncture may be warranted in the presence of positive objective findings from the acupuncturist as an initial trial

of 3-6 treatments up to 1-2 months with a maximum duration of 14 sessions. Beyond 3-6 treatment sessions, the acupuncturist is obligated to document functional improvement which was absent in this file (as a request for continuing acupuncture). There is no documentation of the number of previous acupuncture treatments and objective/functional improvement. It is unknown if patient exceeded the maximum recommended amount of up to 14 sessions. It is also unknown if there was any functional improvement from prior 3-6 sessions of acupuncture. As such, the request is not medically necessary and appropriate.