

Case Number:	CM14-0122449		
Date Assigned:	08/06/2014	Date of Injury:	03/07/2013
Decision Date:	11/14/2014	UR Denial Date:	07/28/2014
Priority:	Standard	Application Received:	08/04/2014

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 Board Certified in Chiropractic, has a subspecialty in Acupuncture and is licensed to practice in California. 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:

The injured worker is a 55 year old female who reported neck pain from injury sustained on 03/07/13. Mechanism of injury was not documented in the provided medical records. X-rays of the cervical spine dated 07/09/14 revealed instrumentation at C5-7 was intact. Patient is diagnosed with cervical strain with C5-6 degenerative disc disease, right shoulder severe impingement syndrome, bilateral wrist flexor tendinitis, and early degenerative carpal metacarpal joint disease. Patient has been treated with anterior cervical discectomy and fusion at C5-6 and C6-7; medication; physical therapy and acupuncture. Per medical notes dated 04/28/14, patient is status post anterior cervical decompression and fusion (ACDF), initially noticed improvement. Patient complains of increased neck pain to bilateral trapezius. Per medical notes dated 07/21/14, patient complains of neck pain and stiffness. Patient has pain and spasm of cervical spine with decreased range of motion. Patient reported that 6 acupuncture visits helped. Provider is requesting additional 2X4 acupuncture treatments for cervical spine. There is no assessment in the provided medical records of functional efficacy with prior acupuncture visits. Medical reports reveal little evidence of significant changes or improvement in findings, revealing a patient who has not achieved significant objective functional improvement to warrant additional treatment.

IMR ISSUES, DECISIONS AND RATIONALES

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

Acupuncture 2 x 4 for the cervical spine: Upheld

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

MAXIMUS guideline: Decision based on MTUS Acupuncture Treatment Guidelines.

Decision rationale: The injured worker is a 55 year old female who reported neck pain from injury sustained on 03/07/13. Mechanism of injury was not documented in the provided medical records. X-rays of the cervical spine dated 07/09/14 revealed instrumentation at C5-7 was intact. Patient is diagnosed with cervical strain with C5-6 degenerative disc disease, right shoulder severe impingement syndrome, bilateral wrist flexor tendinitis, and early degenerative carpal metacarpal joint disease. Patient has been treated with anterior cervical discectomy and fusion at C5-6 and C6-7; medication; physical therapy and acupuncture. Per medical notes dated 04/28/14, patient is status post ACDF, initially noticed improvement. Patient complains of increased neck pain to bilateral trapezius. Per medical notes dated 07/21/14, patient complains of neck pain and stiffness. Patient has pain and spasm of cervical spine with decreased range of motion. Patient reported that 6 acupuncture visits helped. Provider is requesting additional 2X4 acupuncture treatments for cervical spine. There is no assessment in the provided medical records of functional efficacy with prior acupuncture visits. Medical reports reveal little evidence of significant changes or improvement in findings, revealing a patient who has not achieved significant objective functional improvement to warrant additional treatment.