

<b>Case Number:</b>	CM14-0128396		
<b>Date Assigned:</b>	08/15/2014	<b>Date of Injury:</b>	08/26/2011
<b>Decision Date:</b>	10/28/2014	<b>UR Denial Date:</b>	07/23/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	08/12/2014

### 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 Emergency Medicine and is licensed to practice in Texas. 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 27-year-old female with a reported date of injury on 08/26/2011. The mechanism of injury was not submitted within the medical records. Her diagnoses were noted to include chronic pain due to trauma, chronic pain, and degenerative lumbar/lumbosacral intervertebral disc. Her previous treatments were noted to include physical therapy, surgery, massage therapy and medications. The progress note dated 03/06/2014 revealed complaints of pain to the low back that was constant, aching, sharp and throbbing. The injured worker indicated her pain rated at 7/10 and it was better by lying flat, taking medications and resting. The physical examination was not submitted within the medical records. The massage therapy progress note dated 04/30/2014 revealed massage visits to date was number 6. The injured worker indicated that her pain fluctuated between 4/10 and 7/10. The examination revealed inflammation and scar tissue. The provider indicated the pain decreased by 70% from regular massages and that the injured worker had completed 6/18 massages. The massage therapy noted dated 05/02/2014 revealed complaints of discomfort to the lumbar spine. The examination revealed pain to the lumbar spine, sacroiliac joint, and gluteal muscles. The provider indicated the injured worker's pain decreased from 5/10 to 2/10 after a 1 hour massage. The provider indicated the injured worker had completed 6/18 massage sessions. The Request for Authorization form was not submitted within the medical records. The request was for massage therapy 2 times a week x6 weeks for the lumbar spine; however, the provider's rationale was not submitted within the medical records.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Massage therapy two times a week times six weeks for the lumbar spine:** Upheld

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Massage therapy Page(s): 60.

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Massage therapy Page(s): 60.

**Decision rationale:** The request for massage therapy two times a week times six weeks for the lumbar spine is not medically necessary. The injured worker had participated in previous massage therapy sessions. The California Chronic Pain Medical Treatment Guidelines recommend massage therapy as an adjunct to other recommended treatment such as exercise and these should be limited to 4 to 6 visits in most cases. Scientific studies show contradictory results. Furthermore, many studies lack long term followup. Massage is beneficial in attenuating diffuse musculoskeletal symptoms. Beneficial effects were registered only during treatment. Massage is a passive intervention and treatment dependence should be avoided. This lack of long term benefits could be due to the short treatment period or treatment such as these do not address the underlying causes of pain. A very small pilot study showed that massage can be at least as effective as standard medical care in chronic pain syndromes. The strongest evidence for benefits of massage is for stress and anxiety reduction, although research for pain control and management of other symptoms including pain, is promising. The documentation provided indicated the injured worker had been approved for 16 sessions of massage therapy and the documentation noted up to 8 sessions. There is lack of documentation regarding the number of massage therapy sessions completed and the guidelines state massage therapy should be limited to 4 to 6 visits. There is a lack of documentation regarding objective functional improvement with massage therapy sessions and for massage therapy to be used as an adjunct to other recommended treatments such as exercise. The guidelines recommend active therapy and state treatment dependence should be avoided. Additionally, the request for 12 sessions of massage therapy exceeds guideline recommends. Therefore, the request is not medically necessary.