

Case Number:	CM14-0138432		
Date Assigned:	09/05/2014	Date of Injury:	11/07/2007
Decision Date:	11/12/2014	UR Denial Date:	08/14/2014
Priority:	Standard	Application Received:	08/27/2014

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 Physical Medicine and Rehabilitation, has a subspecialty in Pain Medicine 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 41 year-old female with a date of injury of November 7, 2007. The patient's industrially related diagnoses include chronic pain syndrome, myalgia and myositis. The disputed issues are aquatic therapy visits and twelve additional acupuncture visits. A utilization review determination on 8/14/2014 had non-certified these requests. The stated rationale for the denial of the aquatic therapy was: "Evidence-based guidelines recommend up to 10 sessions, and Aquatic therapy can minimize the effects of gravity, so it is specifically recommended where reduced weight bearing is desirable, such as in cases involving obesity. As stated the patient has chronic pain syndrome, but there was no evidence of functional improvement after aquatic therapy in the past." The stated rationale for the denial of additional acupuncture was: "Even though the patient noted an improvement in headaches, there was no objective evidence of functional improvements for her symptoms after acupuncture treatments in past. Without evidence of functional improvement, guidelines do not recommend extending acupuncture treatment."

IMR ISSUES, DECISIONS AND RATIONALES

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

Twelve (12) Aquatic therapy visits: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Physical Therapy and Physical Medicine Guidelines.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Aquatic Therapy and General Physical Medicine Page(s): 22, 98-99.

Decision rationale: The Chronic Pain Medical Treatment Guidelines state the following in regard to aquatic therapy: "Recommended as an optional form of exercise therapy, where available, as an alternative to land-based physical therapy. Aquatic therapy (including swimming) can minimize the effects of gravity, so it is specifically recommended where reduced weight bearing is desirable, for example extreme obesity. For recommendations on the number of supervised visits, see Physical Medicine. Water exercise improved some components of health-related quality of life, balance, and stair climbing in females with fibromyalgia, but regular exercise and higher intensities may be required to preserve most of these gains." For the diagnosis of myalgia and myositis, the physical medical guidelines recommend 9-10 visits over 8 weeks. In the supplemental report provided by the treating physician appealing the medical denial, there is no additional documentation provided to support the need for aquatic therapy. There is no information provided why reduced weight bearing is desirable. Furthermore, the guidelines recommend 9-10 visits for the injured worker's diagnosis, and the request for 12 visits exceeds the recommended amount of visits. Therefore, based on the guidelines and documentation, the request for twelve aquatic therapy visits is not medically necessary.

Twelve (12) additional acupuncture visits: Upheld

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

MAXIMUS guideline: Decision based on MTUS Acupuncture Treatment Guidelines. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Chronic Pain Chapter, Acupuncture

Decision rationale: In regard to the request for an additional 12 acupuncture visits, the California MTUS does support the use of acupuncture for chronic pain. Acupuncture is recommended as an option when pain medication is reduced and to be used as an adjunct to physical rehabilitation and/or surgical intervention to hasten functional recovery. Acupuncture treatments may be extended if functional improvement is documented, which is defined as "either a clinically significant improvement in activities of daily living or a reduction in work restrictions... and a reduction in the dependency on continued medical treatment." A trial of up to 6 sessions is recommended, with up to 24 total sessions supported when there is ongoing evidence of functional improvement. The Utilization Review denied the request because although the injured worker reported improvement in headaches with acupuncture, there was no documentation of objective evidence of functional improvements for her symptoms after acupuncture treatments in the past. As a result, a supplemental report was provided by the treating physician appealing the acupuncture denial. In the report, the treating physician documents that the injured worker has decreased her medications and is having flare-ups in her severe headaches. However, while there was documented relief of headache symptoms in the past with acupuncture, the treating physician did not provide additional information regarding functional improvement with previous acupuncture treatments. The guidelines state that functional improvement should be documented for additional acupuncture treatments. Therefore,

due to a lack of documentation and based on the guidelines, medical necessity for the additional 12 acupuncture visits is not established.