MAXIMUS Federal Services

Case Number:	CM15-0107610		
Date Assigned:	06/12/2015	Date of Injury:	12/07/2010
Decision Date:	07/16/2015	UR Denial Date:	05/26/2015
Priority:	Standard	Application Received:	06/04/2015

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: Internal 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 50-year-old female, who sustained an industrial injury on December 7, 2010. She reported neck pain with bilateral upper extremity pain, weakness and tenderness into the hands and fingers. The injured worker was diagnosed as having chronic pain syndrome and pain in the hand joint. Treatment to date has included diagnostic studies, electrodiagnostic studies of the upper extremities, acupuncture, cervical steroid injections, medications and work restrictions. Currently, the injured worker complains of bilateral wrist, hand, finger and neck pain with associated radicular symptoms to bilateral upper extremities. The injured worker reported an industrial injury in 2010, resulting in the above noted pain. She was treated conservatively without complete resolution of the pain. Evaluation on December 2, 2014, revealed continued pain as noted. She was noted to have a surgical spine consultation however was noted to be having good benefit with medications and noted being more functional. Twelve massage therapy sessions were requested.

IMR ISSUES, DECISIONS AND RATIONALES

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

12 massage therapy sessions: Overturned

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Massage therapy Page(s): 67.

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

Decision rationale: The Chronic pain section addresses massage therapy. It states that it should be utilized as an adjunct to other recommended treatments such as exercise and limited to 4-6 visits in most cases. Scientific studies show contradictory results in many studies and long term follow up is lacking. Massage is noted to be beneficial in attenuating diffuse musculoskeletal symptoms but the beneficial effect is only noted during actual therapy. It is noted that this is a passive modality and that dependence should be avoided. A small pilot study showed massage can be effective as standard medical treatment in chronic pain patients. The MTUS also states that there is strong evidence of its benefit in reducing stress and anxiety. It states that an M. D. should be able to refer a patient to a qualified massage therapist when it is appropriate. One study in the Archives of Surgery, 2007, Mitcheson; demonstated that massage therapy is an effective adjunct to relieving post op pain in major surgery. The above patient has had multiple treatment protocols and still suffers from chronic neck pain and upper extremity pain. Massage therapy can be beneficial as part of the treatment protocol for chronic pain. It has no medication induced side effects and has been shown to relieve the stress and anxiety associated with chronic pain. The patient should be afforded a trial of this modality to treat her chronic pain and the UR decision is overturned.