

<b>Case Number:</b>	CM15-0127084		
<b>Date Assigned:</b>	07/13/2015	<b>Date of Injury:</b>	06/30/2014
<b>Decision Date:</b>	08/11/2015	<b>UR Denial Date:</b>	06/23/2015
<b>Priority:</b>	Standard	<b>Application Received:</b>	06/30/2015

### 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: Chiropractor, Oriental 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 41 year old male who sustained an industrial injury on 6/30/14. Primary treating physician's progress report dated 6/11/15 reports persistent low back pain with radiation to the buttocks. Acupuncture treatments have improved the symptoms. Neck and shoulders have improved as well. Diagnoses include: lumbosacral sprain with radicular symptoms, small synovial cyst, right L2-3, small to moderate lumbar disc herniation with neuroforaminal stenosis, L2-3, L3-4 and L4-5. Plan of care includes: request authorization for 6 additional sessions of acupuncture in effort to provide further improvement, no refill of medications given continue as before. Work status is return to work with modified work. Follow up in 6 weeks. Per a PR-2 dated 2/5/15, the claimant remains symptomatic despite prior physical therapy and acupuncture. Per an acupuncture note dated 4/13/15 and 4/17/15, the claimant has low back, neck and shoulder pain. After the first acupuncture treatment, his low back and neck pain is less and movement is easier, but daily activities still cause pain to come back. Per an acupuncture report dated 4/21/2015, the claimant's pain is stable and pain intensity is decreased. Movement is easier but pain stays there. Per a PR-2 dated 4/23/2015, the claimant's back, neck and shoulder pain is less and range of motion is increased. Daily activities are easier than before but pain stays there. Per a PR-2 dated 4/27/15, the claimant can manage daily activities without pain but long time activity still cause the pain. Per a PR-2 dated 6/11/15 from Orthopedics, the claimant reports persistent low back pain with radiation to the buttocks. He reports improvement with completion of acupuncture sessions. He reports improvement with regard to his neck and both shoulders. He is released to modified work with no mention of modifications. Per a PR-2

from his orthopedic surgeon dated 6/18/2015, the claimant is to remain off work.

### **IMR ISSUES, DECISIONS AND RATIONALES**

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

**Acupuncture - 6 treatments (lumbar spine): Upheld**

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

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

**Decision rationale:** According to evidenced based guidelines, further acupuncture after an initial trial is medically necessary based on functional improvement. Functional improvement is defined as a clinically significant improvement in activities of daily living, a reduction in work restrictions, or a reduction of dependency on continued medical treatments or medications. The claimant has had extensive prior acupuncture of unknown quantity and duration and had subjective benefits. However, the provider fails to document objective functional improvement associated with acupuncture treatment. It is unclear whether the claimant was released to modified work on 6/11/15 or if it was a typo. Since all surrounding PR-2s including one only a week later on 6/18/2015, the claimant was not working. Therefore the claimant was not able to demonstrate a reduction or work restrictions or a return to work. Also the acupuncturist documented that the daily activities were easier to perform, but no objective measures were documented by the physician. Six further acupuncture sessions are not medically necessary since there was no demonstration of objective functional improvement.