

<b>Case Number:</b>	CM14-0145494		
<b>Date Assigned:</b>	09/12/2014	<b>Date of Injury:</b>	12/27/2013
<b>Decision Date:</b>	10/21/2014	<b>UR Denial Date:</b>	09/03/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	09/08/2014

### 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 licensed in Acupuncture and is licensed to practice in Florida. 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 patient is a 69-year-old female who sustained an industrial injury on 12/27/13. The patient tripped and fell over a rack. Body parts for this claim submitted by an adjuster are: bilateral knees, elbows, left shoulder, left hip, low back and right ribs. On 7/14/14, her treating physician diagnosed her with cervical strain, cervical radiculopathy and internal derangement, left shoulder. The patient also had an industrial injury 2 1/2 years prior with injuries to her cervical spine. The documentation provided shows that the patient has used 12 out of the 18 acupuncture sessions that had been previously certified. She has also received chiropractic care. The records show subjective statements of relief from pain with acupuncture; however, the documentation does not provide functional benefit from the previous acupuncture treatments. After reviewing the documentation provided, the records fail to demonstrate any clinical evidence of functional improvement with the prior course of acupuncture treatment provided. The medical necessity for the requested 12 acupuncture sessions for the cervical spine and left shoulder has not been established.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Acupuncture 3x4 (12) visits for the Cervical Spine and Left Shoulder:** Upheld

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

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

**Decision rationale:** The patient is a 69-year-old female who sustained an industrial injury on 12/27/13. The patient tripped and fell over a rack. Body parts for this claim as per the adjuster are: bilateral knees, elbows, left shoulder, left hip, low back and right ribs. The records provided, shows a conflict of injury. On 7/14/14, the patient's treating physician diagnosed her with: cervical strain, cervical radiculopathy and internal derangement, left shoulder. The patient also had an industrial injury 2 1/2 years prior with injuries to her neck. The patient has used 12 out of the 18 acupuncture sessions that had been previously certified. She has also received chiropractic care. The records show subjective statements of relief from pain with acupuncture; however, the documentation does not provide functional benefit from the previous acupuncture treatments. As per CA MTUS Acupuncture Medical Treatment Guidelines (9792.24.1) Acupuncture is used as an option when pain medication is reduced or not tolerated, it may be used as an adjunct to physical rehabilitation and/or surgical intervention to expedite functional recovery. Acupuncture treatments may be extended if functional improvement is documented as defined in Section 9792.20 CA MTUS Acupuncture Guidelines requires clinical evidence of functional improvement for additional care to be considered. CA Acupuncture guidelines cited, 9792.24.1 states that the time to produce significant improvement is 3-6 treatments. It also states that acupuncture may be extended if functional improvement is documented including significant improvement in activities of daily living, reduction of work restriction, and reduction of dependency on continued medical treatment. The current documentation does not provide information that the patient received any benefit from the previous acupuncture sessions, and the objective findings from the provider are unknown. Therefore, the request for acupuncture treatments 12 sessions for the cervical spine and left shoulder would not be medically necessary.