

Case Number:	CM14-0039340		
Date Assigned:	06/27/2014	Date of Injury:	01/28/2013
Decision Date:	07/25/2014	UR Denial Date:	02/28/2014
Priority:	Standard	Application Received:	04/03/2014

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 Chiropractic and Acupuncture 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 55 year old female who reported neck, low back and left shoulder pain from an injury sustained on 1/28/13 due to a slip and fall. An MRI of the left shoulder revealed downward sloping acromion with acromioclavicular joint arthritis and sub deltoid bursitis. An MRI of the lumbar spine revealed 2 mm posterior central disc protrusion at L5-S1. Radiographs of the lumbar spine reveal mild loss of disc height at L5-S1. The patient is diagnosed with cervical disc displacement; lumbar disc displacement; myalgia; left shoulder myofascitis and left shoulder impingement syndrome. The patient has been treated with medication and therapy. Per medical notes dated 02/28/14, the patient complains of neck, low back and left shoulder pain with stiffness and weakness. The examination revealed decreased range of motion and muscle spasms. Per medical report dated 05/13/14, she complains of frequent, moderate, stabbing neck pain low back pain and shoulder pain with stiffness, heaviness and weakness. The examination revealed tenderness to palpation of the cervical and lumbar paravertebral muscles as well as bilateral Si joints and bilateral gluteal. The primary treating physician is requesting the initial course of eighteen (18) acupuncture treatments.

IMR ISSUES, DECISIONS AND RATIONALES

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

18 Sessions of Outpatient Acupuncture Treatment: Upheld

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

MAXIMUS guideline: Decision based on MTUS Acupuncture Treatment Guidelines.

Decision rationale: Per MTUS- Section 9792.24.1 Acupuncture Medical treatment Guidelines Page 8-9. "Acupuncture is used as an option when pain medication is reduced and not tolerated, it may be used as an adjunct to physical rehabilitation and/or surgical intervention to hasten functional recovery". "Time to produce function improvement: 3-6 treatments. 2) Frequency: 1-3 times per week. 3) Optimum duration: 1-2 months. Acupuncture treatments may be extended if functional improvement is documented". Patient hasn't had prior Acupuncture treatment. Primary treating physician requested initial course of 18 acupuncture sessions which were modified to 6 by the utilization reviewer. Per guidelines 3-6 treatments are sufficient for initial course of Acupuncture. Requested visits exceed the quantity of initial acupuncture visits supported by the cited guidelines. Additional visits may be rendered if the patient has documented objective functional improvement. MTUS- Definition 9792.20 (f) Functional improvement means either a clinically significant improvement in activities of daily living or a reduction in work restrictions as measured during the history and physical exam. Per guidelines and review of evidence, 18 Acupuncture visits are not medically necessary.