

Case Number:	CM13-0005928		
Date Assigned:	12/11/2013	Date of Injury:	08/31/2009
Decision Date:	01/13/2014	UR Denial Date:	07/02/2013
Priority:	Standard	Application Received:	08/01/2013

HOW THE IMR FINAL DETERMINATION WAS MADE

MAXIMUS Federal Services sent the complete case file to a physician reviewer. He/she has no affiliation with the employer, employee, providers or the claims administrator. The physician reviewer is Board Certified in Psychology, 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 physician 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 physician reviewer developed the following clinical case summary based on a review of the case file, including all medical records: The claimant is a 33 year-old male with a date of injury of 8/31/09. He sustained medical injuries as well as injuries to his psyche. He has been diagnosed by his treating psychologist, [REDACTED], with pain disorder associated with psychological factors and a general medical condition and Depressive Disorder NOS.

IMR ISSUES, DECISIONS AND RATIONALES

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

4 additional sessions of individual psychotherapy: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines (May 2009).

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Behavioral interventions Page(s): 23.

Decision rationale: The claimant has been receiving psychological services from [REDACTED] since his initial psychological evaluation dated 11/27/12. Based on the review of the medical records, it appears that the claimant has completed at least 17 psychotherapy sessions which included relaxation training, CBT, behavioral management, and biofeedback. There is no documentation of sessions completed in February of 2013. Both the CA MTUS guidelines and

the Official Disability Guidelines apply to this case. The CA MTUS references the treatment of pain, whereas, the ODG references the treatment of depression. Given that the claimant has been given both diagnoses, both sets of guidelines can apply. The CA MTUS recommends for the use of behavioral interventions for the treatment of pain an "Initial trial of 3-4 psychotherapy visits over 2 weeks" and "with evidence of objective functional improvement, total of up to 6-10 visits over 5-6 weeks (individual sessions)." In regards to the cognitive behavioral treatment of depression, the ODG recommends "an initial trial of 6 visits over 6 weeks" and "with evidence of objective functional improvement, total of 13-20 visits over 13-20 weeks". Lastly, the CA MTUS recommends the use of biofeedback in conjunction with CBT and follows the same guidelines as the management of pain which is an "initial trial of 3-4 psychotherapy visits over 2 weeks" and "with evidence of objective functional improvement, total of up to 6-10 visits over 5-6 weeks (individual sessions)". Given all of these guidelines, the claimant has already received an appropriate number of sessions. The request for an additional 4 sessions of individual psychotherapy including relaxation training, cognitive therapy, behavioral management, and biofeedback exceeds the recommended total number of sessions put forth by all of the guidelines cited above. As a result, the request for an additional 4 sessions of individual psychotherapy, relaxation training, cognitive training, behavioral management, and biofeedback is not medically necessary.

Relaxation training: Upheld

Claims Administrator guideline: The Claims Administrator did not cite any medical evidence for its decision.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Behavioral interventions Page(s): 23.

Decision rationale: The claimant has been receiving psychological services from [REDACTED] since his initial psychological evaluation dated 11/27/12. Based on the review of the medical records, it appears that the claimant has completed at least 17 psychotherapy sessions which included relaxation training, CBT, behavioral management, and biofeedback. There is no documentation of sessions completed in February of 2013. Both the CA MTUS guidelines and the Official Disability Guidelines apply to this case. The CA MTUS references the treatment of pain, whereas, the ODG references the treatment of depression. Given that the claimant has been given both diagnoses, both sets of guidelines can apply. The CA MTUS recommends for the use of behavioral interventions for the treatment of pain an "Initial trial of 3-4 psychotherapy visits over 2 weeks" and "with evidence of objective functional improvement, total of up to 6-10 visits over 5-6 weeks (individual sessions)." In regards to the cognitive behavioral treatment of depression, the ODG recommends "an initial trial of 6 visits over 6 weeks" and "with evidence of objective functional improvement, total of 13-20 visits over 13-20 weeks". Lastly, the CA MTUS recommends the use of biofeedback in conjunction with CBT and follows the same guidelines as the management of pain which is an "initial trial of 3-4 psychotherapy visits over 2 weeks" and "with evidence of objective functional improvement, total of up to 6-10 visits over 5-6 weeks (individual sessions)". Given all of these guidelines, the claimant has already received an appropriate number of sessions. The request for an additional 4 sessions of individual psychotherapy including relaxation training, cognitive therapy, behavioral management, and

biofeedback exceeds the recommended total number of sessions put forth by all of the guidelines cited above. As a result, the request for an additional 4 sessions of individual psychotherapy, relaxation training, cognitive training, behavioral management, and biofeedback is not medically necessary.

Cognitive therapy: Upheld

Claims Administrator guideline: The Claims Administrator did not cite any medical evidence for its decision.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines.

Decision rationale: The claimant has been receiving psychological services from [REDACTED] since his initial psychological evaluation dated 11/27/12. Based on the review of the medical records, it appears that the claimant has completed at least 17 psychotherapy sessions which included relaxation training, CBT, behavioral management, and biofeedback. There is no documentation of sessions completed in February of 2013. Both the CA MTUS guidelines and the Official Disability Guidelines apply to this case. The CA MTUS references the treatment of pain, whereas, the ODG references the treatment of depression. Given that the claimant has been given both diagnoses, both sets of guidelines can apply. The CA MTUS recommends for the use of behavioral interventions for the treatment of pain an "Initial trial of 3-4 psychotherapy visits over 2 weeks" and "with evidence of objective functional improvement, total of up to 6-10 visits over 5-6 weeks (individual sessions)." In regards to the cognitive behavioral treatment of depression, the ODG recommends "an initial trial of 6 visits over 6 weeks" and "with evidence of objective functional improvement, total of 13-20 visits over 13-20 weeks". Lastly, the CA MTUS recommends the use of biofeedback in conjunction with CBT and follows the same guidelines as the management of pain which is an "initial trial of 3-4 psychotherapy visits over 2 weeks" and "with evidence of objective functional improvement, total of up to 6-10 visits over 5-6 weeks (individual sessions)". Given all of these guidelines, the claimant has already received an appropriate number of sessions. The request for an additional 4 sessions of individual psychotherapy including relaxation training, cognitive therapy, behavioral management, and biofeedback exceeds the recommended total number of sessions put forth by all of the guidelines cited above. As a result, the request for an additional 4 sessions of individual psychotherapy, relaxation training, cognitive training, behavioral management, and biofeedback is not medically necessary.

Behavioral management: Upheld

Claims Administrator guideline: The Claims Administrator did not cite any medical evidence for its decision.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Behavioral interventious Page(s): 23.

Decision rationale: The claimant has been receiving psychological services from [REDACTED] since his initial psychological evaluation dated 11/27/12. Based on the review of the medical records, it appears that the claimant has completed at least 17 psychotherapy sessions which included relaxation training, CBT, behavioral management, and biofeedback. There is no documentation of sessions completed in February of 2013. Both the CA MTUS guidelines and the Official Disability Guidelines apply to this case. The CA MTUS references the treatment of pain, whereas, the ODG references the treatment of depression. Given that the claimant has been given both diagnoses, both sets of guidelines can apply. The CA MTUS recommends for the use of behavioral interventions for the treatment of pain an "Initial trial of 3-4 psychotherapy visits over 2 weeks" and "with evidence of objective functional improvement, total of up to 6-10 visits over 5-6 weeks (individual sessions)." In regards to the cognitive behavioral treatment of depression, the ODG recommends "an initial trial of 6 visits over 6 weeks" and "with evidence of objective functional improvement, total of 13-20 visits over 13-20 weeks". Lastly, the CA MTUS recommends the use of biofeedback in conjunction with CBT and follows the same guidelines as the management of pain which is an "initial trial of 3-4 psychotherapy visits over 2 weeks" and "with evidence of objective functional improvement, total of up to 6-10 visits over 5-6 weeks (individual sessions)". Given all of these guidelines, the claimant has already received an appropriate number of sessions. The request for an additional 4 sessions of individual psychotherapy including relaxation training, cognitive therapy, behavioral management, and biofeedback exceeds the recommended total number of sessions put forth by all of the guidelines cited above. As a result, the request for an additional 4 sessions of individual psychotherapy, relaxation training, cognitive training, behavioral management, and biofeedback is not medically necessary.

Biofeedback: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation biofeedback therapy.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Biofeedback Page(s): 24-25.

Decision rationale: The claimant has been receiving psychological services from [REDACTED] since his initial psychological evaluation dated 11/27/12. Based on the review of the medical records, it appears that the claimant has completed at least 17 psychotherapy sessions which included relaxation training, CBT, behavioral management, and biofeedback. There is no documentation of sessions completed in February of 2013. Both the CA MTUS guidelines and the Official Disability Guidelines apply to this case. The CA MTUS references the treatment of pain, whereas, the ODG references the treatment of depression. Given that the claimant has been given both diagnoses, both sets of guidelines can apply. The CA MTUS recommends for the use of behavioral interventions for the treatment of pain an "Initial trial of 3-4 psychotherapy visits over 2 weeks" and "with evidence of objective functional improvement, total of up to 6-10 visits over 5-6 weeks (individual sessions)." In regards to the cognitive behavioral treatment of depression, the ODG recommends "an initial trial of 6 visits over 6 weeks" and "with evidence of objective functional improvement, total of 13-20 visits over 13-20 weeks". Lastly, the CA MTUS recommends the use of biofeedback in conjunction with CBT and follows the same

guidelines as the management of pain which is an "initial trial of 3-4 psychotherapy visits over 2 weeks" and "with evidence of objective functional improvement, total of up to 6-10 visits over 5-6 weeks (individual sessions)". Given all of these guidelines, the claimant has already received an appropriate number of sessions. The request for an additional 4 sessions of individual psychotherapy including relaxation training, cognitive therapy, behavioral management, and biofeedback exceeds the recommended total number of sessions put forth by all of the guidelines cited above. As a result, the request for an additional 4 sessions of individual psychotherapy, relaxation training, cognitive training, behavioral management, and biofeedback is not medically necessary.