

<b>Case Number:</b>	CM13-0017482		
<b>Date Assigned:</b>	10/11/2013	<b>Date of Injury:</b>	04/10/2012
<b>Decision Date:</b>	02/14/2014	<b>UR Denial Date:</b>	08/18/2013
<b>Priority:</b>	Standard	<b>Application Received:</b>	08/27/2013

### 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 Occupational Medicine 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 applicant has filed a claim for chronic low back pain, anxiety and depression reportedly associated with an industrial injury of April 10, 2012. Thus far, the applicant has been treated with the following: Analgesic medications; prior right knee arthroscopy on May 12, 2012; prior microlumbar decompression surgery at L5-S1 on July 9, 2013; subsequent repeat lumbar decompression surgery on July 9, 2013, extensive periods of time off of work, on total temporary disability; and psychotropic medications. In June 19, 2013 questionnaire, the applicant acknowledges that he is not working and is having issues with insomnia, depression and anxiety. Progress note of the same date is notable for comments that the applicant is having increased anxiety due to ongoing pain. He is given refills of Medrox, Norflex and Elavil. He is placed off of work, on total temporary disability, and asked to follow up with a pain psychiatric, a pain psychologist and a general practitioner. He is asked to consult a pain psychiatrist, consult a pain psychologist and follow up with a general practitioner. It is stated that pain psychiatrist and pain psychologist are consultants while the general practitioner is apparently treating the applicant.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**A follow up with a general practitioner for anxiety and depression:** Overturned

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines, Mental Illness and Stress Chapter

**MAXIMUS guideline:** Decision based on MTUS ACOEM Chapter 15 Stress Related Conditions.

**Decision rationale:** As noted in the ACOEM Guidelines in Chapter 15, the frequency of followup visits should be dictated by the applicant's work status. In this case, the applicant is off of work. As suggested by ACOEM, more frequent followup visits are indicated in this context. In this case, it is further noted that the requesting provider has suggested the pain psychologist and pain psychiatrist, whom the applicant is seeing will act as consultants, while a general practitioner/primary treating physician (PTP) will continue to remain responsible for his overall care, both medical and physical. A followup visit with said general practitioner is indicated and appropriate. Accordingly, the request is certified, on Independent Medical Review.