

Case Number:	CM13-0023896		
Date Assigned:	11/15/2013	Date of Injury:	08/19/2011
Decision Date:	01/21/2014	UR Denial Date:	08/29/2013
Priority:	Standard	Application Received:	09/12/2013

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 request is for (1) a psychiatric/medication follow-up; and (2) hypnotherapy sessions. The Official Disability Guidelines regarding office visits indicate that, "The need for a clinical office visit with a health care provider is individualized based upon a review of the patient concerns, signs and symptoms, clinical stability, and reasonable physician judgment. The determination is also based on what medications the patient is taking, since some medicines such as opiates, or medicines such as certain antibiotics, require close monitoring. As patient conditions are extremely varied, a set number of office visits per condition cannot be reasonably established. The determination of necessity for an office visit requires individualized case review and assessment, being ever mindful that the best patient outcomes are achieved with eventual patient independence from the health care system through self care as soon as clinically feasible." Based on these guidelines, a request for continued psychiatric sessions once a month for six months appears to be too long of a period of time. Continued sessions should be based upon the medications being prescribed and a thorough assessment of the claimant's concerns, symptoms, and stability during each session. Additionally, the request for hypnotherapy does not apply to a typical psychiatric/medication visit. The Official Disability Guidelines indicate that the use of hypnosis "should be contained within the total number of Psychotherapy visits." This request does not specifically address the use of psychotherapy in connection to hypnotherapy. The request for continued psychological/psychiatric sessions, pharmacology management including prescription/medical hypnotherapy, once a month for six months" is not medically necessary.

IMR ISSUES, DECISIONS AND RATIONALES

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

Continued Psychological/psychiatric sessions, pharmacology management including prescription/medical hypnotherapy, once a month for six months: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Mental Illness and Stress Chapter

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Mental Illness and Stress Chapter.

Decision rationale: The request is for (1) a psychiatric/medication follow-up; and (2) hypnotherapy sessions. The Official Disability Guidelines regarding office visits indicate that, "The need for a clinical office visit with a health care provider is individualized based upon a review of the patient concerns, signs and symptoms, clinical stability, and reasonable physician judgment. The determination is also based on what medications the patient is taking, since some medicines such as opiates, or medicines such as certain antibiotics, require close monitoring. As patient conditions are extremely varied, a set number of office visits per condition cannot be reasonably established. The determination of necessity for an office visit requires individualized case review and assessment, being ever mindful that the best patient outcomes are achieved with eventual patient independence from the health care system through self care as soon as clinically feasible." Based on these guidelines, a request for continued psychiatric sessions once a month for six months appears to be too long of a period of time. Continued sessions should be based upon the medications being prescribed and a thorough assessment of the claimant's concerns, symptoms, and stability during each session. Additionally, the request for hypnotherapy does not apply to a typical psychiatric/medication visit. The Official Disability Guidelines indicate that the use of hypnosis "should be contained within the total number of Psychotherapy visits." This request does not specifically address the use of psychotherapy in connection to hypnotherapy. The request for continued psychological/psychiatric sessions, pharmacology management including prescription/medical hypnotherapy, once a month for six months" is not medically necessary.