

Case Number:	CM13-0026053		
Date Assigned:	11/22/2013	Date of Injury:	08/30/2012
Decision Date:	03/25/2014	UR Denial Date:	09/04/2013
Priority:	Standard	Application Received:	09/18/2013

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 Clinical Psychology, has a subspecialty in Pain Management and Health 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.

CLINICAL CASE SUMMARY

The expert reviewer developed the following clinical case summary based on a review of the case file, including all medical records:

According to the documents provided for this IMR, this 47 year old male was injured on February 12, 2012 while working as a bus operator and assisting disabled patients for [REDACTED]. The patient reported low back pain while helping to secure a wheelchair to the bus, this pain radiates to his left leg and down to the left foot and greatly limits his ability to engage in normal daily activities and tasks related to his work. He has been diagnosed with Major Depression, single episode, mild, Generalized Anxiety Disorder, Male Hypoactive Sexual Disorder due to Chronic Pain and Insomnia related to GAD and Chronic Pain, stress-related Physiological Response Affecting medical condition GA disturbances, Headache. He reports depression, frustration, and crying and loss interest in activities he use to enjoy. A request for group medical psychotherapy 1-2 times a week for 6 weeks was non-certified and is the focus of this IMR.

IMR ISSUES, DECISIONS AND RATIONALES

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

Group Medical Psychotherapy 1-2 Times Per Week X 6 Weeks: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG).

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

Decision rationale: The MTUS-CA is silent about the use of group medical psychotherapy, but it is addressed in the Official Disability Guidelines which says it is may be used for patients who been diagnosed with PTSD. This patient does not have this diagnosis based on the medical reports I received for this review. The non-certification is upheld.

Medical Hypnotherapy 1-2 Times Per Week X 6 Weeks: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG).

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

Decision rationale: The MTUS-CA is also silent about the use of Medical hypnotherapy, but it is also addressed in the Official Disability Guidelines which says it is may be used for patients who been diagnosed with PTSD. This patient does not have this diagnosis based on the medical reports I received for this review. The non-certification is upheld.

Office Visit (Unspecified Duration): Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM 2nd Edition, (2008).

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 15 Stress Related Conditions Page(s): 1068.

Decision rationale: A request for 6 visits with a Psychiatrist was certified separately, this request is unspecified as to what kind of mental health professional would be seen and what treatment would be provided. The psychiatrist can determine the patient's treatment needs, and/or adjust his medications and/or change the mental health component of his treatment at that time.