

<b>Case Number:</b>	CM13-0030780		
<b>Date Assigned:</b>	12/11/2013	<b>Date of Injury:</b>	09/29/2011
<b>Decision Date:</b>	01/21/2014	<b>UR Denial Date:</b>	09/11/2013
<b>Priority:</b>	Standard	<b>Application Received:</b>	09/03/2013

### 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 Psychiatry, 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:

This is a 46 year old female who was struck by a door at work. She has had post concussive syndrome and neck pain requiring injections for pain. She has been treated with a number of psychiatric medications including valium, Elavil, Depakote, Topamax, buspar, Namenda, Neurontin, Lyrica and others. At issue is whether it is medically necessary for her to have 12 psychiatric medication managements sessions over a year.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Psychiatric medication management x 12 over the next year:** Overturned

**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 Page(s): s 27, 107. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Mental Illness and Stress, office visits, and the American Psychiatric Association Practice Guidelines.

**Decision rationale:** The CA MTUS does not specifically address office visits for psychiatric medication management. The ODG does address office visits as follows: ODG, Mental Illness & Stress, Office Visits: Recommended as determined to be medically necessary; Evaluation and management (E&M) outpatient visits to the Offices of medical doctor(s) play a critical role in the

proper diagnosis and return to function of an injured worker, and they should be encouraged. This patient's presentation is complex. She has been tried on a large number of a variety of categories of psychiatric medication. Due to the complexity of her presentation it is entirely reasonable and in fact prudent to have psychiatric medication management services for this patient monthly over the next year.