

Case Number:	CM13-0037114		
Date Assigned:	12/13/2013	Date of Injury:	03/10/2011
Decision Date:	02/28/2014	UR Denial Date:	10/10/2013
Priority:	Standard	Application Received:	10/23/2013

HOW THE IMR FINAL DETERMINATION WAS MADE

MAXIMUS Federal Services sent the complete case file to an expert reviewer. He/she has no affiliation with the employer, employee, providers or the claims administrator. The expert reviewer is Licensed 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 expert 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 claimant is a 58 year-old female (██████████) with a date of injury of 3/10/11. According to medical reports, the claimant sustained injury to her hands while working for ██████████, which resulted in an initial diagnosis of bilateral carpal tunnel syndrome. She received medication, therapy, surgery, and completed a functional restoration program. Additionally, the claimant sustained injury to her psyche as a result of the work-related injury. According to the most recent visit note from the ██████████ dated 8/26/13, ██████████ and nurse, ██████████, diagnosed the claimant with the following: (1) Psychogenic Pain NEC(Not Elsewhere Classified); (2) Depressive Disorder NEC(Not Elsewhere Classified); (3) Anxiety State NOS (Not Otherwise Specified); and (4) Reflex sympathetic dystrophy, Upper Limb. It is noted that the claimant is prescribed ibuprofen, lidoderm patch, and nortriptyline. It is the claimant's psychiatric diagnoses that are relevant to this review

IMR ISSUES, DECISIONS AND RATIONALES

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

Six Additional Pain Psychology Sessions: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 23.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Behavioral interventions Page(s): 23. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Mental Illness and Stress Chapter

Decision rationale: The CA MTUS regarding the behavioral treatment of pain and the Official Disability Guidelines regarding the treatment of depression are being used as references for this case. Based on the review of the medical records, the claimant began receiving psychological services in January 2013 and has completed 20 sessions. According to the most recent psychology follow-up note by [REDACTED] and [REDACTED], dated 8/1/13, the claimant had completed 4 of the 6 additionally authorized pain psychology sessions that initially began on 7/8/13. The note stated that the claimant is "making some progress in treatment as demonstrated by her ability to speak more openly and assertively in session around her needs regarding her pain". However, there was no more mention of any objective functional improvements. The CA MTUS recommends that for the treatment of chronic 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)" may be possible. It is clear that the claimant has already far exceeded the total number of pain psychology sessions recommended by the CA MTUS. Considering that the claimant also is diagnosed with 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 (individual sessions)". Even with expanded recommendations, the claimant has completed the total number of sessions recommended. As a result, the request for "Six Additional Pain Psychology Sessions" is not medically necessary and appropriate.