

<b>Case Number:</b>	CM13-0040403		
<b>Date Assigned:</b>	03/21/2014	<b>Date of Injury:</b>	04/10/2005
<b>Decision Date:</b>	05/15/2014	<b>UR Denial Date:</b>	10/16/2013
<b>Priority:</b>	Standard	<b>Application Received:</b>	10/29/2013

### 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 Board Certified in Clinical 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:

According to the medical records provided for this independent review, this patient is a 56 year old female who reported an occupational injury April 10 2005. The accident occurred during her normal course of work when she slipped and fell on a highly polished floor landing on her left hand and left leg, injuring both, as well as multiple body areas. She subsequently had surgery on her left knee and conventional pain management treatments and medications. In addition to her medical diagnoses, she has been diagnosed with the following psychiatric clinical disorders: Major Depressive Disorder; Psychological factors affecting a general medical condition, and "Possible pain disorder associated with both psychological factors in a general medical condition." She reports continued low back pain radiating down the left leg and pain in her left knee which may require replacement, she reports pain in her left shoulder, elbow, wrist, and neck. In addition she has had 22 sessions of cognitive behavioral therapy and is being treated with anti-depressant Cymbalta. She describes profound a depression and diminished physical capacity and loss of ability to engage in her nursing career. Symptoms of sleep disorder, poor energy and difficulty with emotional control, stress tolerance, concentration and memory were noted by her treatment provider. A request for 12 sessions of cognitive behavioral therapy was made and not certified; this review will be focused on request to overturn that decision.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**TWELVE COGNITIVE BEHAVIORAL THERAPY (CBT) PSYCHOTHERAPY SESSIONS:** Upheld

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Psychological Treatment..

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Cognitive Behavioral Therapy Page(s): 23.

**Decision rationale:** The Expert Reviewer's decision rationale: According to the medical records provided, this patient has already had a total of 24 sessions of cognitive behavioral therapy with two of those sessions being in an individual format and 22 in a group format. The guidelines for the number of sessions allowed is a maximum of 10 for cognitive behavioral therapy, if objective functional improvement has been documented adequately. Even under the more generally psychotherapy guidelines provided in the official disability guidelines the maximum number of sessions permitted would be 20 with objective functional improvement. At this point patient having already had 22 sessions would be consider to have had more than two sessions over what the guidelines suggest. Based on this it is not possible to overturn the denial of treatment as it was accurately following the stated guidelines, the non-certification is upheld.