

Case Number:	CM13-0041072		
Date Assigned:	12/20/2013	Date of Injury:	03/29/2001
Decision Date:	07/08/2014	UR Denial Date:	10/17/2013
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 Board Certified in Internal Medicine 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 patient is a 70 year old male with his w/c injury in 2001 which occurred when he fell through a pallet and suffered injury to his back, neck, leg, shoulder and psyche. He was noted to be s/p lumbar fusion, have moderate to severe spinal stenosis, s/p cervical fusion, have bilateral shoulder rotator cuff injuries, post laminectomy syndrome, right foot drop, insomnia, anxiety and depression, and restless leg syndrome. He was noted in the records to be seeing a provider for chronic pain treatment for his neck, arm, myofascial pain and radiculopathy. A note was appreciated from 7/18/13 where the psychiatrist was requesting further monthly visits for cognitive psychotherapeutic treatment. He noted that this treatment was proving beneficial and that he was less irritable and had less violent ideation and was relating better to his wife and family. However, he states that the patient was still unpredictable and emotionally labile and angry and hostile. He also notes that the patient was on zoloft, remeron, and ativan for his major depression. We note that subsequently UR denied the request in 10/13 stating that the patient had had thorough psyche treatment already and now was in a maintenance period and that no further functional improvement was noted in the past couple of months.

IMR ISSUES, DECISIONS AND RATIONALES

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

PSYCHOTHERAPY/STRESS MANAGEMENT X 1 MONTH: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 15 Stress Related Conditions Page(s): 1062-1067.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 15 Stress Related Conditions Page(s): 101-102, Chronic Pain Treatment Guidelines psychological treatment Page(s): 101-102.

Decision rationale: The chronic pain section states that in chronic pain the patient must receive education and have specific concerns identified and at times it is beneficial to have these addressed by cognitive behavior therapy and other psychological techniques. AECOM also relates that cognitive behavior psychotherapy may be beneficial in stress reduction and that the idea is to change one's perception of pain, stress, and subjective approach to his disabilities and problems. In this particular patient we note that he has been diagnosed with severe depression and was on multiple medications for depression and anxiety and insomnia. The medication regimen was complicated and needs periodic monitoring by one trained in this specialty. Also, we note that the cognitive therapy was helping the patient in his functionality but he was still very labile emotionally and needed ongoing therapy. AECOM notes that cognitive therapy is not an easy technique and is usually beyond the scope of primary care practice. In conclusion, it is deemed medically necessary for the patient to have further ongoing psychiatric consultation.