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| Case Number: | CM13-0043819 | | |
| Date Assigned: | 12/27/2013 | Date of Injury: | 01/22/2012 |
| Decision Date: | 04/18/2014 | UR Denial Date: | 10/10/2013 |
| Priority: | Standard | Application Received: | 10/31/2013 |

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

Based on the medical records provided for this independent review, this patient is a 47 year old female who reported an occupational related injury on January 22nd 2012 in the course of her employment for the [REDACTED] as a caregiver. On that date she reportedly contracted scabies while working as a caregiver, with symptoms of itching and bugs under her skin, with the feeling worse at night. There is continued purities, rash and dermatitis. The patient states that the scabies causes her difficulty sleeping, emotional distress that led to problems in her marriage as well as her ability to enjoy life and function normally. Psychiatric complaints of anxiety, tension and depression were noted in several medical notes but were also stated to be reduced in a most recent follow-up psychiatric consultation. There were also indications that she was feeling better slightly mentally. The actual diagnosis provided was Depressive Disorder, not otherwise specified. Psychiatric treatment with Wellbutrin, Ambien, and Ativan have been tried. Because of a respectful fear of having others become contaminated by the scabies and infecting them she was unable to work until the scabies has been completely healed. A request for multiple types of treatment as follows: group psychotherapy once a week, medical therapy, individual therapy x1 and psychiatric treatment x6 all were non-certified, except a psychiatric treatment x6 which was approved. A request to overturn the non-certification decisions was made and is the focus of this independent medical review.

IMR ISSUES, DECISIONS AND RATIONALES

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

GROUP PSYCHOTHERAPY ONCE A WEEK: Upheld

Claims Administrator guideline: The Claims Administrator did not cite any medical evidence for its decision.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation OFFICIAL DISABILITY GUIDELINES (ODG) MENTAL ILLNESS AND STRESS CHAPTER: GROUP THERAPY KDG MENTAL ILLNESS AND STRESS: GROUP THERAPY.

Decision rationale: I reviewed the medical records that were provided for this independent medical review. There was a request for group psychotherapy to be held one time per week as well as a request for medical hypnotherapy, and individual psychotherapy that one session. Because with regards to group psychotherapy the MTUS and ACEOEM guidelines are nonspecific and silent. However the official disability guidelines mental illness and stress chapter do address group psychotherapy and state that it is an option for patients who have Post-traumatic stress disorder PTSD. Because this patient does not have PTSD the guidelines for treatment do not include its provision to offer Group Psychotherapy for other conditions. In addition, it is unclear how many psychotherapy sessions she has had in total to date and what additional benefits could be expected from further treatment what would enhance what has already been achieved, all of which make authorizing further sessions impossible.

MEDICAL HYPNOTHERAPY: Upheld

Claims Administrator guideline: The Claims Administrator did not cite any medical evidence for its decision.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation MENTAL AND STRESS CHAPTER: HYPNOTHERAPY.

Decision rationale: The MTUS Guidelines do not address the use of Hypnotherapy, however the Official Disability Guidelines mention that it is a treatment modality that can be used in cases of Post-Traumatic Stress Disorder (PTSD). This patient does not have PTSD. In addition, the ODG states that when used, the number of sessions should be contained within the total number of psychotherapy sessions, suggesting that the treatment can be used during a psychotherapy (or CBT implied) session.

INDIVIDUAL PSYCHOTHERAPY X 1: Upheld

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 BEHAVIOR INTERVENTIONS, COGNITIVE BEHAVIORAL THERAPY Page(s): 23.

Decision rationale: It is not possible to authorize 1 session of individual psychotherapy in this case because the treating provider did not specify how many sessions she has already had to date. The guidelines state that a maximum of 6-10 sessions over a period of 6-10 weeks can be offered after an initial trial of 3-4 sessions is completed and objective functional improvement is documented. Because the total number of sessions she has had was not provided for this review, it is unclear how many she has already had so this request cannot be overturned. In addition, there is insufficient information and support that documents the necessity of psychotherapy sessions based on improvements she has derived from past sessions.