

Case Number:	CM13-0046760		
Date Assigned:	12/27/2013	Date of Injury:	06/26/2010
Decision Date:	02/25/2014	UR Denial Date:	10/14/2013
Priority:	Standard	Application Received:	11/01/2013

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 Family Practice 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:

The patient is a 41-year-old male who reported an injury on 06/26/2010. The injury was noted to have occurred when he was struck by 2 metal pieces to the back of his head, neck, left shoulder, and upper back. The patient has been diagnosed with pain disorder associated with both psychological factors and a medical condition. The recommended treatment for the patient was noted to be deep breathing type meditation, and it was noted that a meditation CD by [REDACTED] was suggested to aid him in this process.

IMR ISSUES, DECISIONS AND RATIONALES

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

1 session of deep breathing type meditation: Upheld

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

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 & Stress, Mind/body interventions (for stress relief).

Decision rationale: According to the Official Disability Guidelines, mind/body interventions are recommended for stress relief and include mindful-based stretching and deep breathing exercises, which are noted to elicit symptom relief in patients with post-traumatic stress disorder.

The patient has not been shown to have a diagnosis of post-traumatic stress disorder. Additionally, deep breathing exercises are not recommended as a standalone treatment by ODG, but may be used with other mind/body interventions for stress relief. However, the clinical information submitted for review failed to provide details regarding this treatment, which may indicate other mind/body interventions that will be provided concurrently. As such, the request is non-certified.