

Case Number:	CM13-0061154		
Date Assigned:	12/30/2013	Date of Injury:	10/31/2011
Decision Date:	03/27/2014	UR Denial Date:	11/12/2013
Priority:	Standard	Application Received:	12/04/2013

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 Psychiatry, has a subspecialty in Neurology 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:

40 y/o female with date of injury 10/31/2011. Date of UR decision was 11/05/2013. She started having psychological issues secondary to being harassed by her employer because she had filed for worker's compensation for the work related orthopedic injuries. The injured worker was being treated for Adjustment disorder with mixed anxiety and depression, Insomnia type sleep disorder due to pain and Major Depressive Disorder, Recurrent, Unspecified per Progress Report by Psychologist dated 10/01/2013. It states "Patient is not depressed on meds. She is tearful at times and sleeps 5-6 hrs a night. Patient is less anxious" Psychotropic medications included Prozac 20 mg and Ativan 0.5qm and afternoon. Per AME report from 9/16/13 "In early 2013 applicant reported that the harassment stopped, as a result of which her overall stress level was reduced and her psychiatric symptoms improved" The report also mentioned that the injured worker has been off her medication for a month with no adverse effects and that she was at the level of maximum medical improvement at that visit.

IMR ISSUES, DECISIONS AND RATIONALES

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

Monthly psychotropic medication management and medication approval- one (1) session per month for six (6) months: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Mental Illness & Stress, Office visits

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, Office visits

Decision rationale: ODG states office visits are recommended as determined to be medically necessary. Evaluation and Management (E & M) outpatient visits to the offices of medical doctor(s) play a critical role in proper diagnosis and return to function of an injured worker, and they should be encouraged. The determination is also based on what medications the patient is taking, since some medications such as opiates, or medicines such as certain antibiotics require close monitoring. As patient conditions are extremely varied, a set number of office visits per condition cannot be reasonably established. The determination of necessity for an office visit requires an individualized case review and assessment, being ever mindful that the best patient outcomes are achieved with eventual patient independence from health care system through self care as soon as clinically feasible. Per the report by AME on 9/16/2013, the injured worker had been off the psychotropic medications one or two months prior to that date as they were not approved by insurance company and she reported to have no side effects since she discontinued medications. In the opinion of AME the psychiatric injury reached Maximum Medical Improvement on date of exam i.e. 9/16/2013. At this point, the request for monthly psychotropic medication management and medication approval is not medically necessary. There has been no mention of what medication is being requested, for how long and the objective goals of treatment.