

<b>Case Number:</b>	CM13-0069446		
<b>Date Assigned:</b>	01/03/2014	<b>Date of Injury:</b>	08/14/2007
<b>Decision Date:</b>	05/21/2014	<b>UR Denial Date:</b>	12/13/2013
<b>Priority:</b>	Standard	<b>Application Received:</b>	12/20/2013

### 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 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:

The claimant is a 55 year-old female (DOB 5/12/59) with a date of injury of 8/14/07. The claimant sustained injuries to her right hand, fingers, and right shoulder due to the repetitive nature of her job duties while working as an [REDACTED]. The claimant also developed psychiatric symptoms secondary to her work-related orthopedic injuries. In his "Doctor's First Report of Occupational Injury or Illness" dated October 2013 and his "Psychological Consultation Report/Request for Treatment Authorization" dated 10/2/13, [REDACTED] diagnosed the claimant with: (1) Depressive disorder, NOS; (2) Anxiety disorder, NOS; and (3) Insomnia related to anxiety disorder NOS.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**INITIAL TRIAL OF MEDICAL HYPNOTHERAPY/RELAXATION (FOR 12 VISITS):**  
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-TWC 2013), PAIN CHAPTER, HYPNOSIS

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Disability Guidelines (ODG) Mental Illness and Stress Chapter

**Decision rationale:** Based on the review of the medical records, the claimant completed an initial psychological evaluation with [REDACTED] on 10/2/13. This request represents the initial request for hypnotherapy sessions following that evaluation. According to the ODG, the "number of visits should be contained within the total number of psychotherapy visits." Because this is the initial request, the request for 12 hypnotherapy sessions exceeds the total number of initial psychotherapy sessions set forth by the ODG. As a result, the request for "Initial Trial of Medical Hypnotherapy/Relaxation (For 12 Visits)" is not medically necessary.

**INITIAL TRIAL (12 VISITS) OF MEDICAL GROUP PSYCHOTHERAPY:** Upheld

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

**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

**Decision rationale:** Based on the review of the medical records, the claimant completed an initial psychological evaluation with [REDACTED] on 10/2/13. This request represents the initial request for psychotherapy sessions following that evaluation. According to the ODG it is recommended that there be "an initial trial of 6 visits over 6 weeks" and "with evidence of objective functional improvement, total of 13-20 visits over 13-20 weeks (individual sessions)" may be needed. Because this is the initial request, the request for 12 psychotherapy sessions exceeds the total number of initial psychotherapy sessions set forth by the ODG. As a result, the request for "Initial Trial (12 Visits) of Medical Group Psychotherapy" is not medically necessary.