MAXIMUS Federal Services

Case Number:	CM13-0071618		
Date Assigned:	01/08/2014	Date of Injury:	02/15/2011
Decision Date:	07/03/2014	UR Denial Date:	12/17/2013
Priority:	Standard	Application Received:	12/28/2013

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 Physical Medicine and Rehabilitation 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 injured worker is a 44-year-old male who reported an injury on 02/15/2011 due to robbery at gunpoint and being detained. The psychological evaluation dated 08/21/2013 revealed diagnoses of Post-traumatic stress disorder (PTSD), a GAF score of 63 which translates to a WPI score of 11, experiencing depression, anxiety, difficulty sleeping, feelings of terror, anxiety, worried, anger, irritability and mood changes. The Beck Anxiety Inventory score was 7, the Beck Depression Inventory score was 8. He also reported self-doubt, fear of death or dying, confused thoughts, and poor self-esteem. Prior treatment include medication, physical therapy, psychiatric treatment, psychological treatment, psychotherapy, psychotropic medication, biofeedback, x-rays, and CT scans. The provider is recommending a follow-up office visit, the provider's rationale was not included. The request for authorization form was not included in the medical documents for review.

IMR ISSUES, DECISIONS AND RATIONALES

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

FOLLOW-UP OFFICE VISIT: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation (ODG) Official Disability Guidelines/Integrated Treatment Index, 11th Edition, (web), 2013, Chronic Pain, Office Visits.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 15 Stress Related Conditions Page(s): 405.

Decision rationale: The ACOEM/California MTUS Guidelines state that frequency of followup visits may be determined by the severity of symptoms, whether the injured worker was referred for further testing and/or psychotherapy, and whether the injured worker is missing work. These visits allow the injured worker to reassess all aspects of the stress model and to reinforce the injured worker's supports and positive coping mechanisms. Generally, injured workers with stress related complaints can be followed by a practitioner every few days for counseling about coping mechanism, medication use, activity modifications, and other concerns. These interactions may be conducted either on site or by telephone to avoid interfering with modified or full duty work if the injured worker has returned to work. Follow-up by a physician can occur when a change in duty status is anticipated or at least once a week if the injured worker is missing work. The clinical notes provided lack evidence of significant deficit that would require a follow-up. The injured worker is no longer on medication as stated in the documentation, and has a mild Becks anxiety and depression score. He was not referred for further testing, and has returned to work as stated in the clinical note. The provider's rational for the request was not provided. As such, the request is not medically necessary and appropriate.