

<b>Case Number:</b>	CM14-0151938		
<b>Date Assigned:</b>	09/22/2014	<b>Date of Injury:</b>	08/15/2013
<b>Decision Date:</b>	10/21/2014	<b>UR Denial Date:</b>	08/23/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	09/17/2014

### 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 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 53 year-old male (DOB) with a date of injury of 8/15/13. The claimant sustained injuries to his left knee, left ankle, right knee, right hip, head, and low back as the result of a motor vehicle accident while driving the company truck. The claimant sustained these injuries while working as a driver for TBT Express. In his "Primary Treating Physician's Initial Report" dated 7/3/14, [REDACTED] diagnosed the claimant with: (1) Probable post-traumatic headaches/head injury syndrome; (2) Lumbosacral strain/arthrosis; (3) Right hip arthrosis; (4) Status post open reduction internal fixation, right femur, 12/10/13; (5) Left knee strain/sprain; (6) Status post left ankle fracture, healed; (7) Status post bilateral leg lacerations; and (8) Psychiatric complaints. It is further reported that the claimant developed symptoms of depression and anxiety secondary to his work-related orthopedic injuries. In a PR-2 report dated 8/13/14, [REDACTED] diagnosed the claimant with: (1) Adjustment disorder with mixed anxiety and depressed mood; (2) Pain disorder associated with psychological factors and a general medical condition; and (3) Other acute reaction to stress.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**(8) Weekly group Psychotherapy session:** Upheld

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Cognitive Therapy for General Stress.

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Behavioral interventions Page(s): 23. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Mental Illness and Stress Chapter

**Decision rationale:** The CA MTUS guideline regarding the use of behavioral interventions in the treatment of chronic pain as well as the Official Disability Guideline for the cognitive treatment of depression will be used as references for this case. Based on the review of the medical records, the claimant has continued to experience pain since his injury in August 2013. He has also been struggling with psychiatric symptoms including depression and anxiety for which he has not had any prior treatment. The claimant completed an evaluation with [REDACTED] on 8/1/14 and it was recommended that the claimant receive follow-up psychological services. The request under review is for an initial trial of group psychotherapy sessions. The CA MTUS recommends an "initial trial of 3-4 visits over 2 weeks" for the treatment of chronic pain. The ODG recommends an "initial trial of 6 visits over 6 weeks" for the cognitive treatment of depression. Utilizing these guidelines, the request for 8 Psychotherapy Sessions exceeds the cited recommendations. As a result, the request for (8) Weekly Group Psychotherapy Sessions is not medically necessary.