MAXIMUS Federal Services

Case Number:	CM14-0153899		
Date Assigned:	09/23/2014	Date of Injury:	06/15/2005
Decision Date:	11/13/2014	UR Denial Date:	08/25/2014
Priority:	Standard	Application Received:	09/22/2014

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 45 year-old female [redacted]) with a dates of injury of 6/16/05. The claimant sustained injury to her left ankle when she twisted it and fell backwards to the ground while pulling boxes weighing over 30 pounds. The claimant sustained this injury while working as a supervisor for [redacted]. In the "Foot and Ankle Orthopaedic" report dated 6/9/14, [redacted] diagnosed the claimant with 1) Ankle sprain left; (2) No evidence of recurrent of residual tarsal tunnel possible radiculopathy; and (3) Age-related arthritis of the ankle symmetrically, She has been treated with medications, injections, physical therapy, and surgery. In his PR-2 report dated 8/12/14, [redacted] diagnosed the claimant with: (1) Post-traumatic stress disorder, chronic; (2) Pain disorder associated with both psychological factors and a general medical condition; and (3) Depressive disorder, NOS. The claimant has been treating with [redacted] and has been receiving psychotropic medications.

IMR ISSUES, DECISIONS AND RATIONALES

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

PAD x 10 sessions: Upheld

Claims Administrator guideline: The Claims Administrator did not cite any medical evidence for its decision.

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: There are no guidelines regarding "PAD" sessions therefore, the CA MTUS guideline regarding the use of behavioral interventions as well as the Official Disability Guideline regarding the use of office visits will be used as references for this case. Based on the review of the medical records, the claimant continues to experience chronic pain since her injury in June 2005. The medical records submitted for review identify orthopedic injuries involving the left ankle. It is not reported within the minimal psychiatric records submitted for review as to when and why the claimant began receiving services from [redacted]. It is also not clear from [redacted] two PR-2 reports from May 2014 and September 2014 how a diagnosis of PTSD came about as there does not appear to be any symptoms noted to substantiate the diagnosis. There was only one statement from the PR-2 report dated 5/6/14 in which [redacted] wrote, "Still some PTSD sx when approached by men of same race as assailant." There is no information within the records discussing any incident for which there was an assailant. Lastly, the request for PAD sessions is confusing and unclear. In the field of psychiatry/psychology, the acronym "PAD" typically refers to "psychiatric advance directive", which does not involve sessions. As a result, the actual treatment being requested is not known. Without clearer information regarding what is being requested as well as documentation to substantiate the request, the request for "PAD x 10 sessions" is not medically necessary.