

Case Number:	CM14-0159097		
Date Assigned:	10/02/2014	Date of Injury:	03/15/2013
Decision Date:	11/06/2014	UR Denial Date:	09/08/2014
Priority:	Standard	Application Received:	09/29/2014

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 Orthopedic Surgery 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:

43-year-old claimant with reported industrial injury of 3/15/13. Exam note from 8/13/14 demonstrates that claimant is now 17 weeks status post bunionectomy surgery on the left foot. Claimant reports some discomfort when walking and wearing tennis shoes. Noted discomfort is seen with range of motion of the first metatarsophalangeal joint on the left. Examination demonstrates pain with dorsiflexion of the first metatarsophalangeal joint. Provider recommends psychological help due to the claimant having a difficult time dealing with everything occurring in past several years.

IMR ISSUES, DECISIONS AND RATIONALES

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

Psychological help: Upheld

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

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 15 Stress Related Conditions Page(s): 398.

Decision rationale: CA MTUS/ACOEM guideline Chapter 15, Stress Related Conditions, page 398, states, "it is recognized that primary care physicians and other non-psychological specialists commonly deal with and try to treat psychiatric conditions. It is recommended that serious

conditions such as severe depression and schizophrenia be referred to a specialist, while common psychiatric conditions, such as mild depression, be referred to a specialist after symptoms continue for more than six to eight weeks." In this case the exam note from 8/13/14 does not demonstrate evidence of severe depression or schizophrenia to warrant specialist referral. Therefore the determination is for non-certification.