

Case Number:	CM14-0160879		
Date Assigned:	10/06/2014	Date of Injury:	03/03/2014
Decision Date:	11/21/2014	UR Denial Date:	09/22/2014
Priority:	Standard	Application Received:	09/30/2014

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 Occupational Medicine 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 applicant is a represented [REDACTED] employee who has filed a claim for anxiety, depression, sleep disturbance, nightmares, social withdrawal, and poor concentration reportedly associated with an industrial injury of March 3, 2014. In a Utilization Review Report dated September 19, 2014, the claims administrator partially approved a request for 20 sessions of psychotherapy as four sessions of the same, approved a request for six psychotropic medication visits, and denied an internal medicine evaluation/internal medicine referral. The claims administrator invoked non-MTUS 2008 ACOEM Guidelines in its decision to approve the follow-up visits, mislabeling the same as originating from the MTUS. Non-MTUS ODG guidelines were apparently employed to deny the internal medicine evaluation. In several of its decisions, the claims administrator did not incorporate cited guidelines into its rationale. The applicant's attorney subsequently appealed. In a progress note dated September 15, 2014, the applicant was placed off of work, on total temporary disability, from a mental health perspective. In an August 18, 2014 psychology note, the applicant apparently presented for the first time. It was stated that the applicant had not received prior psychiatric treatment. The applicant was reportedly quite frightened. The applicant had developed deterioration in her medical and mental health issues. The applicant was having symptoms as diffuse as fatigue, malaise, dizziness, and palpitations, it was noted. The applicant had a Global Assessment of Function at 50. Twenty sessions of psychotherapy were sought, along with six psychotropic medication consultations. It was stated that the applicant should consult a specialist in HIV/Infectious Disease/Internal Medicine to address her issues with alleged exposure to an HIV-positive patient.

IMR ISSUES, DECISIONS AND RATIONALES

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

Internal medicine specialist evaluation and treatment: Overturned

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation ODG, Pain Chapter-Office visits

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 5 Cornerstones of Disability Prevention and Management Page(s): 92.

Decision rationale: As noted in the MTUS-adopted ACOEM Guidelines in Chapter 5, page 92, referral may be appropriate when a practitioner is uncomfortable with treating a particular cause of delayed recovery. In this case, the requesting provider is a psychologist. The applicant has apparently alleged an HIV exposure while at work. Obtaining the added expertise of a physician better-equipped to address these allegations, such as an internist, is indicated. Therefore, the request is medically necessary.

Psychotherapy 20 sessions/weekly/4 initial session: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation CA MTUS-Behavioral Interventions, ODG, Cognitive Behavioral Therapy (CBT) guidelines

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

Decision rationale: As noted in the MTUS-adopted ACOEM Guidelines in Chapter 15, page 405, an applicant's failure to improve may be due to an incorrect diagnosis, an unrecognized medical or psychological condition, and unrecognized psychosocial stressors. By implication, then, ACOEM does not support the lengthy, 20-session course of psychotherapy proposed here as said 20-session course of psychotherapy does not contain proviso to evaluate the applicant in the midst of treatment to ensure that said treatment is effective. Therefore, the request is not medically necessary.