

Case Number:	CM14-0161434		
Date Assigned:	10/06/2014	Date of Injury:	07/02/2008
Decision Date:	11/07/2014	UR Denial Date:	09/17/2014
Priority:	Standard	Application Received:	10/01/2014

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 Psychiatry, 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:

Injured worker is a 55 year old female with date of injury 07/02/2008. Date of the UR decision was 09/17/2014. Mechanism of injury was described as work-related cumulative trauma orthopedic injury resulting in chronic pain in her cervical spine, shoulders and pain radiating to her upper extremities. She also suffered from work related stress resulting in psychological injury. She has been diagnosed with pain disorder related to psychological factors, major depressive effective disorder, single episode, severe degree, without mention of psychotic behavior Report dated 4/23/2014 indicated that she took Prozac and another unnamed psychotropic medication prescribed by a Psychiatrist and has undergone psychotherapy treatment in the past. It was suggested that the most recent psychotropic medications she had been prescribed were Zoloft 100 mg and Elavil 50 mg.

IMR ISSUES, DECISIONS AND RATIONALES

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

Medication Management 1-3 months for at least 2-3 years: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Treatment Index, 11th Edition (web), 2014, Mental Illness & Stress, Office Visits

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Mental illness, Office visits Stress related conditions

Decision rationale: Evaluation and management (E&M) outpatient visits to the offices of medical doctor(s) play a critical role in the proper diagnosis and return to function of an injured worker, and they should be encouraged. The need for a clinical office visit with a health care provider is individualized based upon a review of the patient concerns, signs and symptoms, clinical stability, and reasonable physician judgment. The determination is also based on what medications the patient is taking, since some medicines such as opiates, or medicines such as certain antibiotics, require close monitoring. As patient conditions are extremely varied, a set number of office visits per condition cannot be reasonably established. The determination of necessity for an office visit requires individualized case review and assessment, being ever mindful that the best patient outcomes are achieved with eventual patient independence from the health care system through self care as soon as clinically feasible. "The injured worker has been diagnosed with pain disorder related to psychological factors, major depressive effective disorder, single episode, severe degree, without mention of psychotic behavior. Report dated 4/23/2014 indicated that she took Prozac and another unnamed psychotropic medication prescribed by a Psychiatrist and has undergone psychotherapy treatment in the past. It was suggested that the most recent psychotropic medications she had been prescribed were Zoloft 100 mg and Elavil 50 mg. the injured worker is not on any psychotropic medications that would require close monitoring or lengthy treatment with a specialist. The request for Medication Management 1-3 months for at least 2-3 years is excessive and not medically necessary at this time.