

Case Number:	CM14-0164087		
Date Assigned:	10/08/2014	Date of Injury:	01/10/2008
Decision Date:	12/31/2014	UR Denial Date:	09/23/2014
Priority:	Standard	Application Received:	10/06/2014

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 52 year-old male [REDACTED] with a date of injury of 1/10/08. The claimant sustained injury to his low back when a tractor-like machine struck him while working as a warehouse stocker/truck loader for [REDACTED]. In their PR-2 report dated 5/27/14, [REDACTED] and [REDACTED] diagnosed the claimant with Post laminectomy syndrome with chronic left lumbar radiculitis. It is also reported that the claimant developed psychiatric symptoms secondary to his work-related orthopedic injury and chronic pain. In her "Initial Psychological Evaluation Report" dated 4/16/14, [REDACTED] diagnosed the claimant with Major Depressive Disorder, mild to moderate, now chronic. On the "Treating Physician's Determination of Medical Issues" form dated 4/18/14, [REDACTED] listed diagnoses including" (1) Unspecified depressive disorder; (2) Unspecified anxiety disorder, NOS; (3) Psychological factors affecting other medical conditions; and (4) Possible somatic symptoms disorder with predominant pain. These diagnoses corroborate [REDACTED] diagnosis from her "Re-Evaluation" of the claimant dated 4/4/14. The claimant has been receiving group psychotherapy from [REDACTED] and individual psychotherapy from [REDACTED]. The request under review is for an additional 6 psychotherapy sessions.

IMR ISSUES, DECISIONS AND RATIONALES

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

6 Cognitive Behavior Therapy (CBT) Psychotherapy Sessions: Upheld

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

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 and Stress Chapter

Decision rationale: The CA MTUS does not address the treatment of depression, therefore; the Official Disability Guideline regarding the cognitive treatment of depression will be used as reference for this case. In her "Initial Psychological Evaluation Report" dated 4/16/14, [REDACTED] recommended "individual psychotherapy on a weekly basis for 12 weeks." She additionally wrote, "Depending on his response to psychotherapy, additional sessions may be necessary." [REDACTED] also recommended weekly psychotherapy sessions for which [REDACTED] began providing group therapy sessions and [REDACTED], began providing individual psychotherapy sessions. The request under review is from [REDACTED] for an additional 6 CBT psychotherapy sessions. It is unclear whether the request is for additional individual sessions or additional group sessions. Either way, there is insufficient information related to the number of completed group and individual sessions to date as well as the exact progress made from those sessions. Without more information, the request for additional "6 Cognitive Behavior Therapy Psychotherapy Sessions" is not medically necessary.