

Case Number:	CM14-0022495		
Date Assigned:	05/09/2014	Date of Injury:	01/27/2011
Decision Date:	08/01/2014	UR Denial Date:	02/17/2014
Priority:	Standard	Application Received:	02/21/2014

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 Anesthesiology, has a subspecialty in Pain Management, 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 patient is a 30-year-old male who has submitted a claim for posttraumatic stress disorder, with depression and ongoing driving phobia associated with an industrial injury date of January 27, 2011. Medical records from 2013-2014 were reviewed. The patient complained of ongoing insomnia as a result of chronic pain and traumatic anxiety. He has gained a lot of weight and believed that he was five feet tall. Patient also has a strong fear of driving and cars. He has fear and diminished interest in dating due to the grotesque appearance of his leg. He has general anxiety and concentration and memory difficulties. There were feelings of hopelessness and tearfulness. Patient is more socially isolated. Physical examination showed patient walking on a slight limp. He related in a cooperative but reticent manner. Mood was serious and depressed. Patient wore worried faces. There was extreme deformity of his left thigh. Treatment to date has included psychotherapy, activity modification, and left femur surgeries. Utilization review, dated February 17, 2013, denied the request for 6 medication management visits because it was unclear as to what type of medication the patient was currently using.

IMR ISSUES, DECISIONS AND RATIONALES

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

MEDICATION MANAGEMENT 6 VISITS: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Page(s): 405.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Pain Section, Office Visits.

Decision rationale: The CA MTUS does not address this topic. Per the Strength of Evidence hierarchy established by the California Department of Industrial Relations, Division of Workers' Compensation, the Official Disability Guidelines, (ODG), Pain Chapter was used instead. It states that evaluation and management (E&M) outpatient visits to the offices of medical doctor play a critical role in the proper diagnosis and return to function of an injured worker, to monitor the patient's progress, and make any necessary modifications to the treatment plan. The determination of clinical office visit is based on what medications the patient is taking, since some medicines such as opiates, among others, require close monitoring. In this case, the patient was diagnosed with posttraumatic stress disorder with depression and ongoing driving phobia. Rationale for the present request was not provided. Furthermore, a psychological evaluation dated January 27, 2014 indicated that the patient currently takes no medications. A medication management is not appropriate and necessary because there are no medications to be monitored. The medical necessity has not been established. Therefore, the request for Medication Management 6 visits is not medically necessary.