

<b>Case Number:</b>	CM14-0024172		
<b>Date Assigned:</b>	06/11/2014	<b>Date of Injury:</b>	08/28/2006
<b>Decision Date:</b>	07/21/2014	<b>UR Denial Date:</b>	02/10/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	02/26/2014

### 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 chronic low back pain with derivative major depressive disorder (MDD) reportedly associated with an industrial injury of August 28, 2006. The applicant has been treated with the following: Analgesic medications; attorney representation; unspecified amounts of cognitive behavioral therapy and biofeedback therapy; psychotropic medications; and extensive periods of time off of work. The applicant's case and care have apparently been complicated by issues associated with alcoholism resulting in an earlier DUI citation. The applicant is, it was further noted on a medical-legal evaluation of August, 23, 2013, an active smoker. The applicant was apparently given a 47% mental health impairment rating on that date owing to diagnoses of alcohol dependence, major depressive disorder, and personality disorder. The applicant was apparently not working. It was stated that the applicant was "totally and permanently disabled." The applicant was receiving Social Security Disability Insurance (SSDI). The agreed medical evaluator stated that the applicant should be provided 50 sessions of individual outpatient psychotherapy on a lifetime basis owing to his alcohol dependence.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**BIOFEEDBACK THERAPY:** Upheld

**Claims Administrator guideline:** The Claims Administrator did not cite any medical evidence for its decision.

**MAXIMUS guideline:** Decision based on MTUS ACOEM Chapter 15 Stress Related Conditions Page(s): 400, 405.

**Decision rationale:** While the California Medical Treatment Utilization Schedule (MTUS)-adopted American College of Occupational and Environmental Medicine (ACOEM), 2nd Edition, (2004) Guidelines in Chapter 15, page 400 do support biofeedback as a relaxation technique to empower applicants to self-regulate physiologic responses, in this case, the applicant has had extensive mental health treatment over the course of the claim, as both the applicant's primary treating provider (PTP) and agreed medical evaluator (AME) have concurred. The applicant is off of work. The applicant apparently continues to abuse both alcohol and tobacco. As further 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 and/or unrecognized psychosocial stressors. In this case, the applicant's attending provider did not make a compelling case for the request in question. The applicant's attending provider initiated the request via a request for authorization (RFA) form without any attached progress notes, narrative commentary, or rationale. The attending provider simply stated that the applicant was entitled to the treatment in question, although, quite clearly, the applicant had, in fact, failed to demonstrate any functional improvement as defined in MTUS despite ongoing mental health care. Therefore, the request is not medically necessary.