

<b>Case Number:</b>	CM14-0039506		
<b>Date Assigned:</b>	06/27/2014	<b>Date of Injury:</b>	03/12/2005
<b>Decision Date:</b>	08/07/2014	<b>UR Denial Date:</b>	03/21/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	04/03/2014

### 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:

The injured worker is a 59 year old female with date of injury 3/12/2005. She suffers from chronic pain in neck and lower back due to industrial injury. Date of the UR decision was 3/21/2014. Report dated 6/5/2013 suggested that she was being treated for Major Depressive Disorder, single episode, severe; Pain disorder associated with General Medical Condition and Psychological factors and Sleep disorder; Insomnia type. It is suggested that she has been prescribed Bupropion XL 150 mg daily, Alprazolam 1mg four times daily, Zolpidem 25 mg nightly, Escitalopram 40 mg daily. The report states that the antidepressant medications seem to be helping her as she had not been spending that much time in bed anymore. Report from 1/18/2014 suggests that there had been improvement in her mood due to medication changes and psychotherapy that she had been receiving, however the medications were abruptly discontinued per that report and there has been decline in her mood. It was also indicated in that report she had been receiving weekly psychotherapy with the Psychologist.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Twelve sessions of group psychotherapy:** 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), 2013, Mental Illness & Stress.

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) <Stress and Mental illnesschapter, <Cognitive therapy for depression.

**Decision rationale:** The injured worker is a 59 year old female chronic pain in neck and lower back due to industrial injury. She has been treated for Major Depressive Disorder, single episode, severe; Pain disorder associated with General Medical Condition and Psychological factors and Sleep disorder; Insomnia type. Report from 1/18/2014 suggests that there had been improvement in her mood due to medication changes and psychotherapy that she had been receiving. It was also indicated in that report that she had been receiving weekly psychotherapy with the Psychologist. Official Disability Guidelines (ODG) Psychotherapy Guidelines recommend:Up to 13-20 visits over 7-20 weeks (individual sessions), if progress is being made. (The provider should evaluate symptom improvement during the process, so treatment failures can be identified early and alternative treatment strategies can be pursued if appropriate.) There is no clear documentation regarding the number of sessions received by the injured worker so far, any evidence of functional improvement. Request for twelve sessions of group psychotherapy is excessive and not medically necessary at this time.