

<b>Case Number:</b>	CM14-0047986		
<b>Date Assigned:</b>	07/11/2014	<b>Date of Injury:</b>	08/01/2007
<b>Decision Date:</b>	08/08/2014	<b>UR Denial Date:</b>	04/08/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	04/16/2014

### 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:

According to the records provided for this independent review, this patient is a 61 year old male who reported an industrial/occupational work-related injury on August 1, 2007. The injury occurred during his normal work duties as a warehouse manager when he was moving a large and heavy display that weighed approximately 200 pounds with the help of a coworker and sustain an injury to his right knee and back when twisting to move it. Medically he is been diagnosed with lumbar radiculopathy and degenerative disc disorder, additional medical diagnoses not relevant to this request are well documented in his records. There is radiating pain into both lower extremities and he has undergone arthroscopic surgery, multiple injections/procedures as well as conventional pain medicine treatment, acupuncture and physical therapy but still reports continued low back, hip, and right knee pain. Psychologically, he is been diagnosed with adjustment disorder with mixed anxiety and depressed mood, and chronic pain syndrome. A request for 10 sessions of individual psychotherapy was made, and non-certified; this independent review will address a request to overturn that decision.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**10 individual psychotherapy sessions.:** Upheld

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG): Cognitive Behavioral Therapy (CBT) guidelines for chronic pain.

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines part two behavioral interventions, psychological treatment Page(s): 101.. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Mental illness and stress: psychotherapy guidelines, June 2014 update.

**Decision rationale:** The utilization review rationale for non-certification was stated that the patient has completed an initial trial of five sessions and if there was no evidence of subjective or functional improvement and therefore continued treatment did not appear appropriate. A psychotherapy treatment summary for therapy sessions held twice monthly in January and February and one in March 2014 stated that the patient is participating diligently in therapy and that he has been experiencing tremendous instability in the approval, and non-approval of his pain medications - to the point where it causes him significant anger and agitation and that and that he is "about to explode" as the situation is reaching a crisis point. Another treatment summary, covering 8 sessions held from April to November of 2013, states that the patient has been coming in approximately one time per month and that he feels he needs to come in for "maintenance reasons" that the pressures of coping with his pain, and navigating the work comp system, build up in him and that by participating in therapy and having an objective observer allow him to reduce this stress. The total number of treatment sessions provided to date was not included in the request for additional sessions: this number is always necessary in order to know whether not he has had the maximum number of sessions that is allowed, and if not how many more can be offered. I was able to estimate that he is had at a minimum 13 sessions, but it is possible that he's had more. According to the official disability guidelines a maximum of 13 to 20 sessions can be offered, if progress is being made. This request for 10 additional sessions would exceed the maximum guideline by at least three sessions assuming that he is not had any more than the ones that I have accounted for. In addition, there is a requirement that progress be reflected in the documentation to support the request for additional sessions, and after a thorough and comprehensive review this patients medical chart, which consisted of approximately 109 pages, I did not see any indication that the patient is making progress in demonstrating functional improvements as a result of his psychological treatment. There is however, some indication that the supportive of nature of the treatment is helpful for him in decreasing his stress levels. The criteria for continued treatment requires "objective functional improvement" (MTUS) or more simply stated in the ODG guidelines as "progress." These concepts are different than the notion of benefit that the progress notes for this patient reflect. Although it is clear that the patient is struggling psychologically with the consequences of the chronic pain condition and difficulties and navigating the work compensation system, the overall picture, as presented for this review, does not support additional psychotherapy sessions because of the quantity requested and the insufficient documentation of functional improvement/ progress. Therefore the request to overturn the non-certification decision is not approved.