

Case Number:	CM14-0061141		
Date Assigned:	07/09/2014	Date of Injury:	04/17/2007
Decision Date:	08/26/2014	UR Denial Date:	04/07/2014
Priority:	Standard	Application Received:	05/02/2014

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 claimant was injured on 04/17/07 in a motor vehicle accident. A Psychological evaluation and Internal Medicine evaluation have been requested and are under review. The claimant has a diagnosis of osteoarthritis of the right shoulder. He is status post arthroscopic surgery in December 2012 and right shoulder hemi-arthroplasty in October 2013. He continues to have right shoulder pain with limited range of motion, weakness, and popping. He has a well-healed surgical scar and mildly decreased strength. Range of motion is also mild to moderately limited. He has been under psychiatric care for the past 6-7 years and he underwent a recent reevaluation regarding depression. He presents with severe depression related to his injury. He has other medical problems such as hypertension and migraines for which he has seen an internist, [REDACTED]. His current medical problems were being aggravated by his musculoskeletal problems. He remains off work and has been doing Physical Therapy and home exercises. He had a significant amount of tightness in the posterior capsule. He was nearly independent in his exercises. The claimant has been seeing [REDACTED] for issues related to depression. A psychological evaluation has been requested. [REDACTED] has recommended that he see [REDACTED] for depression on an industrial basis and see [REDACTED] for his hypertension on an industrial basis. On the date these requests were made, there is no report of his blood pressure being elevated or any psychological screening having been done. On 02/03/14, [REDACTED] recommended that he see his private psychiatrist and internist to determine whether his emotional issues and hypertension are work related. He had a complex agreed medical evaluation with [REDACTED] on 03/18/14 and the assessment indicated that he had high blood pressure and had been seeing a neurologist for his migraines and treating with his physician for approximately 3 years. On 03/10/14, [REDACTED] stated that [REDACTED] and [REDACTED] stated that his psychological issues and hypertension were exacerbated by his injury.

IMR ISSUES, DECISIONS AND RATIONALES

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

Psychological evaluation: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Psychology Evaluations. Decision based on Non-MTUS Citation Official Disability Guidelines- Treatment in Workers Compensation, Mental Illness & Stress Procedure Summary.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Psychological evaluations Page(s): 132. Decision based on Non-MTUS Citation American College of Occupational and Environmental Medicine (ACOEM), 2nd Edition, (2004), chapter 7, Independent Medical Evaluations and Consultations, page 127.

Decision rationale: The history and documentation do not objectively support the request for a psychological evaluation at this time. The MTUS state if a diagnosis is uncertain or complex, if psychosocial factors are present, or if the plan or course of care may benefit from additional expertise, the occupational health physician may refer a patient to other specialists for an independent medical assessment. In this case, however, the claimant has already been seeing a psychiatrist for his emotional issues and it is not clear how another psychological evaluation is likely to provide significant benefit to him. ██████████ stated he thought the psychologist could determine whether the claimant's psychological issues are due to his injury but then he stated that this his psychological issues are related to his injury. ██████████ had already stated on 02/03/14 that his psychological issues were exacerbated by his injury. As a result, the medical necessity of this request for a psychological evaluation has not been clearly demonstrated.

Evaluation with internist: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines- Treatment in Workers Compensation, Pain Procedure Summary.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation American College of Occupational and Environmental Medicine (ACOEM), 2nd Edition, (2004) , chapter 7, Independent Medical Evaluations and Consultations, page 127.

Decision rationale: The MTUS state if a diagnosis is uncertain or complex, if psychosocial factors are present, or if the plan or course of care may benefit from additional expertise, the occupational health physician may refer a patient to other specialists for an independent medical assessment. However, the claimant has already been seeing an internist for his hypertension and it is not clear how another internist evaluation is likely to provide significant benefit to him. ██████████ stated he thought the internist could determine whether the claimant's hypertension is due to his injury but then he stated that his hypertension is related to his injury. In addition, on

02/12/14, [REDACTED] had stated that his hypertension was exacerbated by his injury. The medical necessity of this request for an internist evaluation has not been clearly demonstrated.