

Case Number:	CM14-0069571		
Date Assigned:	07/14/2014	Date of Injury:	04/13/2006
Decision Date:	09/16/2014	UR Denial Date:	04/28/2014
Priority:	Standard	Application Received:	05/14/2014

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 Psychologist and is licensed to practice in Utah. 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:

This 58 year old patient had a date of injury on 4/13/2006. The mechanism of injury was not noted. In a progress noted dated 4/3/2014, subjective findings included symptoms of depression and anxiety. There is ongoing sleep disturbance and breathing problems. There are reports of asthma and high blood pressure. On a physical exam dated 4/3/2014, objective findings included the patient was tearful, but well oriented. Diagnostic impression shows anxiety disorder NOS. Treatment to date: medication therapy, behavioral modification, physical therapy, psychotherapy. A UR decision dated 4/28/2014 denied the request for psychotherapy 1x/month for 6 months, stating that the patient has already completed 10 individual psychotherapy sessions to date, and CA MTUS guidelines support up to 10 visits, and there is no clear rationale provided to support exceeding this recommendation. There are no objective measures or improvement provided. There are no current testing measures submitted for review.

IMR ISSUES, DECISIONS AND RATIONALES

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

Psychotherapy 1 time a month for 6 months: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official disabilities Guidelines.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 19-23.

Decision rationale: CA MTUS Chronic Pain Medical Treatment Guidelines state that behavioral modifications are recommended for appropriately identified patients during treatment for chronic pain, to address psychological and cognitive function, and address co-morbid mood disorders (such as depression, anxiety, panic disorder, and post-traumatic stress disorder). Additionally, CA MTUS supports an initial trial of 4 psychotherapy visits. CA MTUS Chronic Pain Medical Treatment Guidelines state that behavioral modifications are recommended for appropriately identified patients during treatment for chronic pain, to address psychological and cognitive function, and address co-morbid mood disorders (such as depression, anxiety, panic disorder, and post traumatic stress disorder). In addition, CA MTUS Chronic Pain Medical Treatment Guidelines state that with evidence of objective functional improvement, a total of up to 6-10 visits. In the reports viewed, the patient had already completed at least 10 psychotherapy visits, dated 10/10/2012, 12/16/2012, 1/25/2012, 2/17/2012, 3/6/2012, 3/30/2012, 4/30/2012, 5/18/2012, 7/13/2012, 8/10/2012, and 9/7/2012. This exceeds the recommended maximum number of sessions based on MTUS guidelines. However, the patient continues to experience symptoms of depression and anxiety, with no objective functional improvement. It is unclear what benefit additional sessions would provide. Therefore, the request for psychotherapy 1x/month for 6 months is not medically necessary.