

Case Number:	CM14-0076070		
Date Assigned:	07/16/2014	Date of Injury:	12/31/2012
Decision Date:	08/22/2014	UR Denial Date:	05/15/2014
Priority:	Standard	Application Received:	05/27/2014

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 Licensed in Psychology, and is licensed to practice in Texas. 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 47-year-old female who reported an injury on 12/31/2012, reportedly sustained while lifting a patient. The injured worker's treatment history included surgical intervention for the lumbar spine and medications. The injured worker was evaluated on 03/07/2014 and it was documented the injured worker complained of fatigue, headaches, and visual difficulties. She complained of grief, uncertainty, loss of emotional control, anger, feeling overwhelmed and irritability. Behaviorally, the injured worker complained of changes in activities, suspiciousness, change in usual communication, and increased appetite. Cognitively, the injured worker complained of lower alertness, memory problems, poor concentration, and poor problem solving. The injured worker underwent the Beck Depression Inventory II test on which she scored a 28, which is indicative of a moderate amount of depression. The Beck Anxiety Inventory score was 26, which is indicative of a moderate amount of anxiety. The diagnoses included major depressive disorder, single episode, moderate and a GAF of 40. The injured worker indicated she was anxious. The treatment plan included psychiatric care and supportive psychotherapy as well, starting the injured worker on Viibryd. The physician documented that it was the safest antidepressant medication for people with hypertension. The request for authorization or rationale was not submitted for this review.

IMR ISSUES, DECISIONS AND RATIONALES

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

Psychotherapy Sessions RFA 05/05/2014 #112: 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) Cognitive Therapy for Depression.

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

Decision rationale: The requested is non-certified. Per California Medical Treatment Utilization Schedule (MTUS) Guidelines, state cognitive behavioral therapy are for these Initial therapy for these "at risk" patients should be physical medicine for exercise instruction, using a cognitive motivational approach to physical medicine. Consider separate psychotherapy CBT referral after 4 weeks if lack of progress from physical medicine alone: - Initial trial of 3 to 4 psychotherapy visits over 2 weeks. With evidence of objective functional improvement, total of up to 6 to 10 visits over 5 to 6 weeks individual sessions. The injured worker was evaluated on 03/07/2014 and it was documented the injured worker complained of fatigue, headaches, and visual difficulties. She complained of grief, uncertainty, loss of emotional control, anger, feeling overwhelmed and irritability. Behaviorally, the injured worker complained of changes in activities, suspiciousness, change in usual communication, and increased appetite. Cognitively, the injured worker complained of lower alertness, memory problems, poor concentration, and poor problem solving. The injured worker underwent the Beck Depression Inventory II test on which she scored a 28, which is indicative of a moderate amount of depression. The Beck Anxiety Inventory score was 26, which is indicative of a moderate amount of anxiety. The documents submitted lacked injured worker long-term functional improvement goals. In addition, the request failed to indicate frequency and duration of psychotherapy sessions. Given the above, the request for psychotherapy sessions RFA 05/05/2014 is non-certified.