

Case Number:	CM14-0098669		
Date Assigned:	07/28/2014	Date of Injury:	06/09/2010
Decision Date:	09/09/2014	UR Denial Date:	05/30/2014
Priority:	Standard	Application Received:	06/26/2014

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 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 male who was injured on June 9, 2010. In addition to his physical treatment, he has received cognitive behavioral therapy since September 2013. Additionally, he has been prescribed psychotropic medication for his depression. On February 13, 2014, with persistent depression and worries, Hypnotherapy/Relaxation Training for 8 weeks was recommended. Additionally, Group Therapy was recommended.

IMR ISSUES, DECISIONS AND RATIONALES

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

Medical Hypnotherapy/Relaxation Training: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Behavioral Therapy Page(s): 23. Decision based on Non-MTUS Citation Official Disability Guidelines, Mental Illness & Stress.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 15 Stress Related Conditions Page(s): 388; 399-400. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Mental Illness & Stress, Hypnosis, Mind/body interventions (for stress relief).

Decision rationale: Relaxation techniques coupled with hypnotherapy may be effective for injured workers with muscle tension and other similar physical components coupled with psychological features, although the mechanism of improvement remains in question and may be in part a placebo. However, there is a lack of detail as to the length of the proposed treatment and proposed objective outcomes. Therefore, the requested service is not considered medically necessary.

Group Psychotherapy: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Behavioral Therapy Page(s): 23. Decision based on Non-MTUS Citation Official Disability Guidelines, Mental Illness & Stress.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Psychological Treatment Page(s): 101-102. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Mental Illness and Stress, Group therapy, Cognitive behavioral therapy.

Decision rationale: Medical Treatment Utilization Guidelines support the use of group psychotherapy for injured workers who continue to experience pain after the usual time of recovery. The identification and reinforcement (encouragement) of coping skills is often more useful in the treatment of pain than ongoing medication or therapy, which could lead to psychological or physical dependence. Cognitive behavioral therapy, including on a group basis, is thought to be effective for the treatment of a variety of conditions, including mood, anxiety, personality, eating, substance abuse, and psychotic disorders. Many cognitive behavioral therapy treatment programs for specific disorders have been evaluated for usefulness; the health-care trend of evidence-based treatment, where specific treatments for symptom-based diagnoses, are recommended. However, there is a lack of detail as to the length of the proposed treatment and proposed objective outcomes. Therefore, the requested service is not medically necessary.