

Case Number:	CM14-0187621		
Date Assigned:	11/18/2014	Date of Injury:	07/04/2012
Decision Date:	01/06/2015	UR Denial Date:	10/08/2014
Priority:	Standard	Application Received:	11/12/2014

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:

The injured worker is a 63 year-old female has a date of injury of 7/4/12. The injured worker sustained injuries to her back, neck, hips, right leg, and right foot when she slipped and fell while working as a cashier for [REDACTED]. Secondary to her work-related orthopedic injuries, it is reported that the injured worker developed psychiatric symptoms. In his "Psychological Consultation Report" dated 6/18/14, [REDACTED] diagnosed the claimant with: (1) Major depressive disorder, single episode; (2) Generalized anxiety disorder; (3) Insomnia related to generalized anxiety disorder and chronic pain; and (4) Stress-related physiological response affecting general medical condition, gastric disturbance and headaches. The injured worker has been receiving follow-up psychological services including individual psychotherapy, and group psychotherapy/hypnotherapy services. The request under review is for additional group psychotherapy sessions.

IMR ISSUES, DECISIONS AND RATIONALES

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

Group psychotherapy x6: 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)-TWC Integrated Treatment/Disability Duration Guidelines

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Mental Illness and Stress Chapter; Cognitive Behavior Therapy, and Psychotherapy Guidelines.

Decision rationale: The CA MTUS does not address the treatment of depression therefore; the Official Disability Guideline regarding the cognitive treatment of depression will be used as reference for this case. Based on the review of the medical records, the injured worker has been receiving psychological services from [REDACTED] and/or his psychological assistants at Psychological Assessment Services since her initial psychological evaluation in June 2014. In the most recent "Requested Progress Report" submitted for review dated 8/1/14, [REDACTED] and Psychological Assistant, [REDACTED], report that the injured worker's objective findings are that she has a "sad and anxious mood; poor concentration; over talkative; problems with memory; preoccupation with current symptoms and limitations as well as emotional symptoms; dysphonic; tearful." The progress noted indicates that the "Patient reports of improved mood and motivation with treatment." This information regarding progress and improvements from services remains too generalized. Additionally, it is unclear as to which services have provided the progress and how many sessions of each service have been completed to date. Without more specific and sufficient information, the need for additional psychological services cannot be fully determined. As a result, the request for "Group psychotherapy x6" is not medically necessary.