

Case Number:	CM14-0193944		
Date Assigned:	12/01/2014	Date of Injury:	04/27/2007
Decision Date:	02/10/2015	UR Denial Date:	10/21/2014
Priority:	Standard	Application Received:	11/19/2014

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 (PHD, PSYD), 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 45 year-old female [REDACTED] with a date of injury of 4/27/07. The injured worker sustained cumulative injuries to her back, neck, and right upper extremity while working for the [REDACTED]. She has received treatment for her orthopedic injuries including medications, TENS unit, torso brace, and surgery. It is also reported that the injured worker developed psychiatric symptoms secondary to her work-related orthopedic injury and pain. In the "Initial Psychological Evaluation Report" dated 9/25/14, [REDACTED] diagnosed the injured worker with and Unspecified Depressive Disorder with Anxiety. It was recommended that the injured worker begin psychotherapy and seek out a psychiatric consultation for medication management services. The request under review is based upon [REDACTED] recommendation and is for 4 psychiatric consultations over 1 year.

IMR ISSUES, DECISIONS AND RATIONALES

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

4 psychiatric consultation over a year: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 14 Ankle and Foot Complaints Page(s): 398. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Psychiatric Consults

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 Office visits

Decision rationale: The CA MTUS does not address psychiatric consultations therefore, the Official Disability Guideline regarding the use of office visits will be used as reference for this case. Based on the review of the medical records, the injured worker previously received psychological and psychiatric services in 2012. However, she required an updated psychological evaluation in September 2014 due to an exacerbation in symptoms. In her "Initial Psychological Evaluation Report" dated 9/25/14, [REDACTED] presents relevant and appropriate information to substantiate the need for a psychiatric consultation. However, the request for a total of 4 consultation appointments over the year appears premature. The ODG indicates that, "The need for a clinical office visit with a health care provider is individualized based upon a review of the patient concerns, signs and symptoms, clinical stability, and reasonable physician judgment. The determination is also based on what medications the patient is taking, since some medicines such as opiates, or medicines such as certain antibiotics, require close monitoring. As patient conditions are extremely varied, a set number of office visits per condition cannot be reasonably established. The determination of necessity for an office visit requires individualized case review and assessment, being ever mindful that the best patient outcomes are achieved with eventual patient independence from the health care system through self care as soon as clinically feasible." Given this guideline, the request for "4 psychiatric consultation over a year" is not medically necessary. It is noted that the injured worker received a modified authorization for 1 psychiatric consultation in response to this request.