

Case Number:	CM15-0005656		
Date Assigned:	01/26/2015	Date of Injury:	04/30/2011
Decision Date:	03/17/2015	UR Denial Date:	12/10/2014
Priority:	Standard	Application Received:	01/12/2015

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. 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/Service. He/she is familiar with governing laws and regulations, including the strength of evidence hierarchy that applies to Independent Medical Review determinations.

The Expert Reviewer has the following credentials:
State(s) of Licensure: California, Arizona, Maryland
Certification(s)/Specialty: Psychiatry

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 40 year old male sustained a work related injury on 04/30/2011. The injury occurred when he tripped and fell over a roof from the 6th to the 5th floor cement balcony. According to a psychological progress report dated 08/01/2014, the injured worker reported persistent pain that interfered with his activities of daily living and his sleep. He felt sad, discourage, nervous and frustrated because of his physical limitation. He worried about his future and ability to support himself as before. He had flashbacks of the industrial accident and was hyper vigilant and fearful around high places. He had diagnoses of major depressive disorder, posttraumatic stress disorder and insomnia. According to a progress report by the orthopedic provider dated 08/20/2014, the injured worker's condition had worsened since his prior exam. He complained of constant pain to the low back that radiated to his bilateral lower extremities and he reported stomachaches. On 12/10/2014, Utilization Review modified weekly psychotherapy sessions: 24 sessions. The request was modified for 4 trial sessions per guidelines. Guidelines cited included CA MTUS Chronic Pain Medical Treatment Guidelines, page 23.

IMR ISSUES, DECISIONS AND RATIONALES

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

Weekly psychotherapy sessions : 24 sessions: 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)

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Chapter: Mental Illness & Stress Topic: Cognitive therapy for PTSD, Cognitive therapy for depression

Decision rationale: The injured worker has been diagnosed and treated for Major Depressive Disorder, Post-Traumatic Stress Disorder and Insomnia. The submitted documentation suggests that he has participated in weekly group Psychotherapy sessions for a while. There is limited information available regarding the total number of sessions completed or information regarding the results from group Psychotherapy such as any evidence of objective functional improvement. He is also in treatment with a Psychiatrist and is being prescribed medications.ODG
Psychotherapy Guidelines: -Initial trial of 6 sessions over 6 weeks- Up to 13-20 visits over 7-20 weeks (individual sessions), if progress is being made.(The provider should evaluate symptom improvement during the process, so treatment failures can be identified early and alternative treatment strategies can be pursued if appropriate.)The request for Weekly psychotherapy sessions : 24 sessions; is excessive and not medically necessary based on the lack of the above information. Also, even if the injured worker was to participate in Individual group therapy rather than group, an initial trial would be recommended per the guidelines.