

Case Number:	CM15-0143138		
Date Assigned:	08/04/2015	Date of Injury:	08/16/2013
Decision Date:	09/08/2015	UR Denial Date:	07/09/2015
Priority:	Standard	Application Received:	07/23/2015

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:

The injured worker is a 50 year old female who sustained an industrial injury on 8-16-13. Diagnoses are congenital dislocation of hip, sprain-strain neck, neuralgia neuritis radiculitis unspecified, and fracture of neck of femur. In a progress report dated 7-1-15, the primary treating physician notes the injured worker is status post left hip open reduction internal fixation on August 2013 with marked residuals. The left hip is noted to be very painful with restricted range of motion. Psychological stress and anxiety is noted. Physical therapy increases her pain therefore she does not wish to participate in physical therapy. She is awaiting removal of metal ware and bone grafting on 7-10-15. Medications noted are Tramadol and Ibuprofen. In a progress report dated 3-2-15, the treating provider notes she continues to work through her stress in therapy. She is noted to be depressed but less anxious and agitated. The diagnosis is major depressive disorder severe recurrent without psychotic features. Work status is to remain off work until 8-14-15. The requested treatment is psychological counseling unspecified number of sessions.

IMR ISSUES, DECISIONS AND RATIONALES

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

Psychological counseling unspecified number of sessions: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Psychological Treatment.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Psychological treatment Page(s): 23, 100-102.

Decision rationale: California MTUS states that behavioral interventions are recommended. The identification and reinforcement 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. ODG Cognitive Behavioral Therapy (CBT) guidelines for chronic pain recommends screening for patients with risk factors for delayed recovery, including fear avoidance beliefs. Initial therapy for these "at risk" patients should be physical medicine for exercise instruction, using 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 3-4 psychotherapy visits over 2 weeks. With evidence of objective functional improvement, total of up to 6-10 visits over 5-6 weeks (individual sessions) The injured worker suffers from congenital dislocation of hip, sprain-strain neck, neuralgia neuritis radiculitis unspecified, and fracture of neck of femur and also developed major depressive disorder severe recurrent without psychotic features. She does not wish to participate in physical therapy as it increases her pain. Upon review of the submitted documentation, it is gathered that the injured worker suffers from chronic pain secondary to industrial trauma and would be a good candidate for behavioral treatment of chronic pain. However, the request for Psychological counseling unspecified number of sessions exceeds the guideline recommendations for an initial trial and thus is not medically necessary at this time.