

Case Number:	CM15-0147008		
Date Assigned:	08/07/2015	Date of Injury:	05/27/2015
Decision Date:	09/09/2015	UR Denial Date:	07/10/2015
Priority:	Standard	Application Received:	07/28/2015

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
 Certification(s)/Specialty: Psychologist

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 35-year-old female, who sustained an industrial injury on 5-27-15. The injured worker was diagnosed as having major depression disorder single episode. Treatment to date has included treatment with a psychiatrist and medication including Xanax. Currently, the injured worker complains of isolation, agitation, anger, anxiety, intrusive thoughts, avoidance, nightmares, and panic attacks. The treating physician requested authorization for psychotropic medication management (to consider Sertraline).

IMR ISSUES, DECISIONS AND RATIONALES

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

Psychotropic medication management (to consider Sertraline): Overturned

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Mental Illness and Stress chapter - Office visits.

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 Visit.

Decision rationale: Based on the review of the medical records, the injured worker has been experiencing symptoms of anxiety because of work-place stress. She was evaluated by treating psychologist, [REDACTED], who recommended a psychotropic medication management visit, which the request under review is based. The referral to a psychiatrist appears reasonable given the injured worker's symptoms. As a result, the request for a psychotropic medication management office visit is medically necessary.