

Case Number:	CM15-0204901		
Date Assigned:	10/21/2015	Date of Injury:	02/14/2012
Decision Date:	12/31/2015	UR Denial Date:	09/30/2015
Priority:	Standard	Application Received:	10/19/2015

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 injured worker is a 44-year-old female, who sustained an industrial injury on 02-14-2012. The injured worker was diagnosed as having major depression disorder single episode - moderated, generalized anxiety disorder and psych fact aff med condition. On medical records dated 08-31-2015 and 09-02-2015, hand written notes are difficult to decipher, the subjective complaints were noted as feeling disoriented, difficult to follow instruction and appears more depressed. Objective findings were noted as decompensating with increased anxiety and depression noted, and needing an adjustment to medication was noted. Treatments to date included medication. The injured worker was noted to be not working. Current medications were not listed on 08-31-2015 and 09-02-2015. The Utilization Review (UR) was dated 09-30-2015. A Request for Authorization was dated 08-30-2015. The UR submitted for this medical review indicated that the request for 6 psychiatric consultations, monthly x 6 visits for diagnosis depression and anxiety was non-certified.

IMR ISSUES, DECISIONS AND RATIONALES

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

6 psychiatric consultation, monthly x 6 visits for diagnosis depression and anxiety: Upheld

Claims Administrator guideline: Decision based on MTUS Stress-Related Conditions 2004.

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 & Stress / Office visits.

Decision rationale: ODG states "Office visits are recommended as determined to be medically necessary. The need for clinical office visit with a health care provider is individualized based upon the review of patient concerns, signs, symptoms, clinical stability and reasonable physician judgment. The determination is also based on what medications the patient is taking, since some medications 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 health care system through self care as soon as clinically feasible." The injured worker has been diagnosed with major depressive disorder, single episode, moderate; generalized anxiety disorder and psychological factors affecting general medical condition. She has been prescribed psychotropic medications including Viibryd 20 mg daily, Trazodone 50 mg at bedtime and Trileptal. The request for 6 psychiatric consultation, monthly x 6 visits for diagnosis depression and anxiety is not medically necessary as the injured worker is not on any medications that would need such close monitoring requiring six more office visits.