

Case Number:	CM15-0209096		
Date Assigned:	10/28/2015	Date of Injury:	09/06/2008
Decision Date:	12/16/2015	UR Denial Date:	10/13/2015
Priority:	Standard	Application Received:	10/23/2015

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 35 year old male who sustained an industrial injury on 09-06-2008. According to a psychological follow-up report dated 09-21-2015, the injured worker reported feeling worried, nervous and frustrated. He attended groups and found them helpful for understanding his symptoms of depression and anxiety. He reported feeling sensitive, irritable and angry. He experienced headaches. He had difficulty sleeping, awakening several times throughout the night. He often awakened with a stomachache. He felt stressed and under pressure. He was preoccupied with his physical and emotional condition. He had difficulty focusing, concentrating and remembering things. He experienced thoughts of death, but denied suicidal ideation. He appeared sad, tired, anxious and tense and had poor concentration. He ambulated with a cane. He was preoccupied with physical and emotional symptoms. The provider noted that the injured worker was in need of continued mental health interventions to cope with and manage current symptoms of depression, anxiety, stress and thoughts of death. Improvement was noted in his ability to manage his worries and feelings of nervousness. The treatment plan included behavioral group therapy, relaxation training hypnotherapy, cognitive behavioral therapy, continued psychiatric treatment as recommended by psychiatrist and follow up in 45 days. Work status was deferred. Documentation shows that the injured worker had been prescribed Celexa and Xanax by another provider on 08-26-2015. An authorization request dated 09-25-2015 was submitted for review. The requested services included office visit 1 session every 45 days. On 10-13-2015, Utilization Review non-certified the request for one (1) office visit with a psychologist (every 45 days).

IMR ISSUES, DECISIONS AND RATIONALES

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

One (1) office visit with a psychologist (every 45 days): Upheld

Claims Administrator guideline: The Claims Administrator did not cite any medical evidence for its decision.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Medical Treatment 2009, Section(s): Psychological treatment. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Mental Illness & Stress / Cognitive therapy for depression.

Decision rationale: The most recent progress report dated 09-21-2015 noted that the injured worker reported feeling worried, nervous and frustrated. He also reported feeling sensitive, irritable and angry, had difficulty sleeping, awakening several times throughout the night. He was preoccupied with his physical and emotional condition and had difficulty focusing, concentrating and remembering things. The request for One (1) office visit with a psychologist (every 45 days) is excessive and not medically necessary as the request does not indicate the number of sessions being requested and thus is not medically necessary.