

Case Number:	CM15-0212407		
Date Assigned:	11/02/2015	Date of Injury:	01/02/2014
Decision Date:	12/23/2015	UR Denial Date:	10/13/2015
Priority:	Standard	Application Received:	10/28/2015

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, 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 42 year old male who sustained an industrial injury on 1-2-14. A review of the medical records indicates that the worker is undergoing treatment for organic brain syndrome chronic not otherwise specified and depressive disorder not otherwise specified. Subjective complaints (8-28-15) include he continues to indicate difficulties associated with headaches, difficulties associated with neck pain, continued back pain, right knee pain, and pain is rated at 9 out of 10. The worker was treated with Cymbalta but could not tolerate initial side effects even though medication was reduced to the lowest dosage of 20mg. The worker reports he had issues with feeling numb, paranoid, heart racing and pounding, and sweating. Cymbalta was discontinued, and the worker continues to be depressed and irritable. He continues to take Hydrocodone, Neurontin and does ongoing psychotherapy. Objective findings (8-28-15) on mental status exam include "significant" physical pain and discomfort and denies thoughts about hurting himself or others. The plan notes Brintellix and the impression is noted that Cymbalta created more anxiety and that he will be re-evaluated and will make a follow up appointment. A request for authorization is dated 9-29-15. On 10-13-15, the requested treatment of 12 pharmacological sessions was modified to allow 1 visit every 8 weeks.

IMR ISSUES, DECISIONS AND RATIONALES

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

12 Pharmacological sessions: Upheld

Claims Administrator guideline: Decision based on MTUS Stress-Related Conditions 2004, Section(s): Follow-up.

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 organic brain syndrome, chronic, not otherwise specified and depressive disorder not otherwise specified. He was prescribed Cymbalta but could not tolerate initial side effects and is currently being prescribed Brintellix. He is not on any medications that would required such close monitoring needing 12 more office visits. Thus, the request for 12 Pharmacological sessions is excessive and not medically necessary.