

<b>Case Number:</b>	CM15-0221811		
<b>Date Assigned:</b>	11/17/2015	<b>Date of Injury:</b>	05/20/2013
<b>Decision Date:</b>	12/31/2015	<b>UR Denial Date:</b>	10/12/2015
<b>Priority:</b>	Standard	<b>Application Received:</b>	11/11/2015

### 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: Texas, New York, California  
 Certification(s)/Specialty: Preventive Medicine, Occupational Medicine

### 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 applicant is a represented 53-year-old who has filed a claim for chronic wrist pain and major depressive disorder reportedly associated with an industrial injury of May 25, 2013. In a Utilization Review report dated October 12, 2015, the claims administrator failed to approve requests for 12 sessions of physical therapy and a psychological consultation. The claims administrator referenced an October 7, 2015 office visit in its determination. A 4-session partial approval of physical therapy was apparently issued. On October 12, 2015, the applicant apparently consulted a psychologist, who placed the applicant off of work from a mental health perspective owing to issues with depression and associated tearfulness. Psychotherapy was sought. The remainder of the file, including the claims administrator's medical evidence log, was surveyed. The October 7, 2015 office in which the request was initiated was not seemingly incorporated into the IMR packet.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Physical Therapy for the right wrist, three times a week for four weeks:** Upheld

**Claims Administrator guideline:** Decision based on MTUS Postsurgical Treatment 2009, Section(s): Carpal Tunnel Syndrome.

**MAXIMUS guideline:** Decision based on MTUS General Approaches 2004, Section(s): Initial Approaches to Treatment.

**Decision rationale:** The request for 12 sessions of physical therapy for the wrist was not medically necessary, medically appropriate, or indicated here. As noted in the MTUS Guideline in ACOEM Chapter 3, page 48, the value of physical therapy increases with the prescription for the same which clearly states treatment goals. Here, the October 7, 2015 office visit on which the claims administrator based its decision upon was not seemingly incorporated into the IMR packet. The applicant's response to earlier therapy was not clearly described or characterized. Clear goals for further treatment, going forward, were not seemingly articulated. Therefore, the request was not medically necessary.

**Psychological Consultation:** Overturned

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Medical Treatment 2009, Section(s): Psychological evaluations.

**MAXIMUS guideline:** Decision based on MTUS Stress-Related Conditions 2004, Section(s): General Approach.

**Decision rationale:** Conversely, the request for a psychological counseling was medically necessary, medically appropriate, and indicated here. As noted in the MTUS Guideline in ACOEM Chapter 15, page 388, referral to a mental health professional is indicated here in applicants whose mental health symptoms become disabling despite primary care interventions, which persist beyond three months. Here, the applicant was described on a handwritten psychological DFR dated October 12, 2015 that the applicant had longstanding mental issues present, reportedly attributed to cumulative trauma over 10 years of employment. Obtaining a psychological consultation to delineate the extent of the same and formulate other appropriate mental health treatment options was, thus, indicated. Therefore, the request was medically necessary.