

<b>Case Number:</b>	CM15-0041157		
<b>Date Assigned:</b>	03/11/2015	<b>Date of Injury:</b>	01/30/2014
<b>Decision Date:</b>	04/22/2015	<b>UR Denial Date:</b>	02/02/2015
<b>Priority:</b>	Standard	<b>Application Received:</b>	03/04/2015

### 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 was a 59 year old female, who sustained an industrial injury, January 30, 2004. The injured worker previously received the following treatments outpatient psychiatric, Abilify, Duloxetine, Lunesta, Ambien, Gabapentin and Motrin. The injured worker was diagnosed with major depression, single episode. According to progress note of January 13, 2015, the injured workers chief complaint was ongoing lower back pain of mild to moderate intensity. Psychologically the injured worker felt some dysphoria. There were many days that the injured worker felt happy. However, the injured worker had a diminished libido and lower frequency of sexual activity. The injured worker had depression that may be associated with cynical attitude, discouragement and feeling useless at times. The treatment plan included six outpatient psychiatric visits for forty minutes, one times a month for six visits.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Six outpatient psychiatric visits for 40 minutes starting 2/28/15 to 8/31/15 once a month for the next 6 visit to be extended and/or adjusted as medical necessary: Upheld**

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG)-psychotherapy guidelines.

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Chapter: Mental Illness & Stress Topic: 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 request for Six outpatient psychiatric visits for 40 minutes starting 2/28/15 to 8/31/15 once a month for the next 6 visit to be extended and/or adjusted as medical necessary is excessive and not medically necessary as the guidelines do not recommend such close monitoring such as once a month monitoring based on the medications that the injured worker has been prescribed.