

Case Number:	CM15-0087534		
Date Assigned:	05/11/2015	Date of Injury:	09/13/2001
Decision Date:	06/16/2015	UR Denial Date:	04/20/2015
Priority:	Standard	Application Received:	05/06/2015

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: Pennsylvania

Certification(s)/Specialty: Internal Medicine, Hospice & Palliative 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 injured worker is a 59-year-old, female who sustained a work related injury on 9/13/01. The diagnoses have included insulin dependent diabetes, inattention and impaired information processing. The treatments have included 13 combined medication management and psychotherapy visits and stimulant medication. In the [REDACTED] note dated 4/15/15, the injured worker has multiple psychiatric and pain medications that requires medication management visits. She "lives a chaotic work and home life predominantly as a result of her cognitive impairment." Her brain injuries, chronic pain, medical conditions and her diabetes have aggravated her cognitive impairment to the point she can no longer work. "With medication management and psychotherapeutic support" she "has a chance of being able to return to gainful employment." The treatment plan includes requests for authorization of 12 medication management and psychotherapy visits.

IMR ISSUES, DECISIONS AND RATIONALES

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

12 Medication management sessions: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 15 Stress Related Conditions Page(s): 105. Decision based on Non-MTUS Citation Official Disability Guidelines.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Pain Outcomes and Endpoints, Criteria for the Use of Opioids, Weaning of Medications Page(s): 8, page(s) 76-77, and page 124.

Decision rationale: The MTUS Guidelines generally encourage follow up care when needed to maximize the worker's function. The submitted and reviewed records indicated the worker was experiencing pain in the neck and lower back, problems with thinking and concentration, and numbness in both hands. This request for a large number of sessions with an unspecified specialist for management of an unspecified medication would not account for changes in the worker's care needs or allow for determination for medical need. For these reasons, the current request for twelve sessions with an unspecified specialist for unspecified medication management is not medically necessary.

12 Psychotherapy sessions: Overturned

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Behavioral Interventions, Psychological Evaluations, Psychological Treatment, Weaning Medications Page(s): 23; pages 100-102, page 124.

Decision rationale: The MTUS Guidelines strongly recommend the identification and management of coping skills, describing these elements as often being more important to the treatment of pain than the ongoing medications used. When there is documented evidence of functional improvement, psychotherapy sessions should be continued. The submitted and reviewed documentation indicated the worker was experiencing pain in the neck and lower back, problems with thinking and concentration, and numbness in both hands. These records suggested these sessions might improve the worker's coping skills and subsequently the worker's function. In light of this supportive evidence, the current request for twelve sessions of psychotherapy is medically reasonable.