

Case Number:	CM14-0114842		
Date Assigned:	08/04/2014	Date of Injury:	09/17/2008
Decision Date:	10/15/2014	UR Denial Date:	07/10/2014
Priority:	Standard	Application Received:	07/21/2014

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. The expert reviewer is Board Certified in Psychiatry and is licensed to practice in California. 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/services. He/she is familiar with governing laws and regulations, including the strength of evidence hierarchy that applies to Independent Medical Review determinations.

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 52 year old male with date of injury 09/17/2008. Date of the UR decision was 07/10/2014. The injured worker suffers from chronic pain condition with cervical and lumbar radiculopathy and is status post cervical and lumbar fusion. Progress report dated 1/21/2014 suggested that he was being treated for Generalized Anxiety Disorder. The subjective complaints included worsening of sleep as Mirtazapine had stopped working for him because of which he discontinued it. He had a recent fall while walking at a park and the provider thought that the alprazolam could be contributing to his falls because of which he was started on a slow taper. It was documented that he had been undergoing psychotherapy treatment as well. He was noted as Permanently-Partially Disabled Psychiatrically. It was documented that the injured worker had used at least 17 psychotherapy sessions since 7/16/2013. Psychiatric progress report dated 6/11/2014 suggested that he was still using Soma for his pain and was able to sleep with Alprazolam and was continued on 1 mg three times daily as needed.

IMR ISSUES, DECISIONS AND RATIONALES

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

Psychiatric Sessions 4 per year moving forward: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Psychological treatment. Decision based on Non-MTUS Citation Official Disability Guidelines, 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) Mental illness, Office visits, Stress related conditions

Decision rationale: Official Disability Guidelines states "Office visits: Recommended as determined to be medically necessary. Evaluation and management (E&M) outpatient visits to the offices of medical doctor(s) play a critical role in the proper diagnosis and return to function of an injured worker, and they should be encouraged. The need for a clinical office visit with a health care provider is individualized based upon a review of the patient concerns, signs and symptoms, clinical stability, and reasonable physician judgment. The determination is also based on what medications the patient is taking, since some medicines 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 the health care system through self-care as soon as clinically feasible." The injured worker had had several office visits with a Psychiatrist. He has been continued on Alprazolam which per MTUS guidelines is not recommended for long term use. He is being treated for Generalized Anxiety Disorder and his main subjective complaint has been poor sleep. Injured worker has also undergone extensive treatment with psychotherapy. The request for Psychiatric Sessions 4 per year moving forward is excessive and is not medically necessary.