

<b>Case Number:</b>	CM14-0175016		
<b>Date Assigned:</b>	10/28/2014	<b>Date of Injury:</b>	12/01/2012
<b>Decision Date:</b>	12/04/2014	<b>UR Denial Date:</b>	10/09/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	10/22/2014

### 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 Psychology 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 claimant is a 45 year-old male (██████████) with a date of injury of 12/1/12. The claimant sustained injury to his back while working as an Engineer for ██████████. The mechanism of injury was not found within the minimal records submitted for review. In the most recent record submitted, dated 4/25/14, ██████████ diagnosed the claimant with low back pain-post op of Tlif 12/3/13. It was noted in the Excel determination letter dated 10/8/14, that the claimant had been diagnosed with Postlaminectomy/fusion syndrome and Lumbar spine probable mild right L5 radiculitis.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Consultation with a psychologist for anxiety:** Upheld

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

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Psychological treatment, Psychological evaluations Page(s): 101-102; 100-101.

**Decision rationale:** The CA MTUS guideline regarding the use of psychological treatments and psychological evaluations will be used in reference to this case. Based on the review of the minimal medical records, the claimant appears to be struggling with continued chronic pain.

Unfortunately, there were no records to review from referring physician, [REDACTED]. Also, there was mention of a psychiatric QME that had been completed by [REDACTED] in July 2014, however, this report was not included for review. As a result, there was insufficient information to substantiate the request for a psychological consultation/evaluation. As a result, the request for "Consultation with a psychologist for anxiety" is not medically necessary.

**Psychological sessions for anxiety:** Upheld

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

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Behavioral interventions Recommended. The identification and reinforcement of coping skills is.

**Decision rationale:** The CA MTUS guideline regarding the use of behavioral interventions in the treatment of chronic pain will be used as reference for this case. Based on the review of the minimal medical records, the claimant appears to be struggling with continued chronic pain. Unfortunately, there were no records to review from referring physician, [REDACTED]. Also, there was mention of a psychiatric QME that had been completed by [REDACTED] in July 2014; however, this report was not included for review. As a result, there was insufficient information to substantiate the request for psychological services. Additionally, the request for psychological treatment is premature without having had a completed evaluation offering appropriate treatment recommendations. As a result, the request for "Psychological sessions for anxiety" is not medically necessary.