

Case Number:	CM14-0082354		
Date Assigned:	08/29/2014	Date of Injury:	12/03/2011
Decision Date:	10/08/2014	UR Denial Date:	05/05/2014
Priority:	Standard	Application Received:	06/03/2014

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 69 year-old female [REDACTED] with a date of injury of 12/3/11. The claimant sustained an injury to her back when she lifted a heavy bucket of water and felt a cramping in her back. The claimant sustained this injury while working as a housekeeper for [REDACTED]. In their "Visit Note" dated 5/22/14, Nurse Practitioner, [REDACTED] under the supervision of [REDACTED], diagnosed the claimant with: (1) Sprains and strains of thoracic region; and (2) Pathologic fracture of vertebrae. The claimant has been treated with medications and physical therapy. It is also reported that the claimant has developed psychiatric symptoms secondary to her work-related orthopedic injury. In his "Initial Psychological Evaluation Secondary Treating Physician's Report Request for Authorization" dated 4/14/14, [REDACTED] diagnosed the claimant with: (1) Major depression, single episode, moderate; and (2) R/O opioid dependence.

IMR ISSUES, DECISIONS AND RATIONALES

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

Group Education Seminar (Psycho education group protocol x 6 initial treatment sessions):
Overturned

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Psychological Treatment. Decision based on Non-MTUS Citation Official Disability Guidelines: Mental Illness & Stress Chapter, Group Therapy.

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 and Stress Chapter

Decision rationale: The CA MTUS guideline regarding education as well as the Official Disability Guideline regarding the cognitive treatment of depression will be used as reference for this case. Based on the review of the medical records, the claimant continues to experience chronic pain since her injury in December 2011. She has also developed psychiatric symptoms of depression and anxiety secondary to her work-related orthopedic injuries. The claimant completed an initial psychological evaluation with [REDACTED] from [REDACTED] on 4/14/14 and has received a total of 3 individual psychotherapy sessions. The request under review is for an initial set of 6 group education sessions. The CA MTUS indicates that patient education is recommended. It further states, "No treatment plan is complete without addressing issues of individual and/or group patient education as a means of facilitating self-management of symptoms and prevention. (Colorado, 2002)" The ODG suggests that for the cognitive treatment of depression, there should be an "initial trial of 6 visits over 6 weeks." Although the ODG refers to individual psychotherapy sessions, that guideline can also be generalized to include group sessions as well. Utilizing these guidelines, the request for 6 group education sessions appears appropriate to educate the claimant on her condition and normalize her experiences. Therefore, the request for "Group Education Seminar (Psycho education group protocol x 6 initial treatment sessions)" is medically necessary.