

Case Number:	CM15-0019407		
Date Assigned:	02/09/2015	Date of Injury:	02/22/2006
Decision Date:	03/26/2015	UR Denial Date:	01/20/2015
Priority:	Standard	Application Received:	02/03/2015

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
 Certification(s)/Specialty: Psychologist

CLINICAL CASE SUMMARY

The expert reviewer developed the following clinical case summary based on a review of the case file, including all medical records:

This 53 year old male sustained an industrial injury to the right knee via repetitive trauma on 2/22/06. The injured worker was under ongoing treatment for right knee pain. In a PR-2 dated 10/13/14, the injured worker complained of pain 5/10 to the right knee as well as anxiety. Work status was temporary total disability. In an initial psychological evaluation dated 1/6/15, the injured worker complained of depressed mood, reduced interest in activities, fatigue, low energy, guilt, worthlessness and sleep disturbances and anxiety. The injured worker was diagnosed with major depression, anxiety, sleep disorder and partner relational problem. The treatment plan included 3-4 psychotherapy visits over the next two weeks, biofeedback therapy, group therapy and acupuncture. On 1/20/15, Utilization Review noncertified a request for psycho-education group protocol, six visits over two months and modified a request for a follow-up office visit with [REDACTED], one visit over two months to a follow-up office visit with [REDACTED], one visit citing CA MTUS and ACOEM Guidelines. As a result of the UR denial, an IMR was filed with the Division of Workers Comp.

IMR ISSUES, DECISIONS AND RATIONALES

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

Psycho-education group protocol, six visits over two months: Overturned

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

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Education Page(s): 44-45.

Decision rationale: Based on [REDACTED] and [REDACTED] psychological evaluation report, the injured worker is in need of psychological services to help him manage and reduce his symptoms of depression and anxiety as well as chronic pain. In the report, it was recommended that the injured worker not only receive individual psychotherapy and biofeedback, but also group psychoeducation. The CA MTUS recommends and supports psychoeducation regarding diagnosis and symptoms. As a result, the request for group psychoeducation is reasonable and medically necessary.

Follow-up office visit with [REDACTED], one visit over two months: Overturned

Claims Administrator guideline: The Claims Administrator did not cite any medical evidence for its decision.

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 Office Visits

Decision rationale: Based on [REDACTED] and [REDACTED] psychological evaluation report, the injured worker is in need of psychological services to help him manage and reduce his symptoms of depression and anxiety as well as chronic pain. In the report, it was recommended that the injured worker not only receive individual psychotherapy and biofeedback, but also group psychoeducation and a follow-up office visit with psychologist, [REDACTED]. The ODG recommends office visits. The request for a follow-up visit with [REDACTED] for reassessment is reasonable and medically necessary.