

Case Number:	CM15-0070430		
Date Assigned:	04/17/2015	Date of Injury:	06/22/2011
Decision Date:	05/19/2015	UR Denial Date:	03/11/2015
Priority:	Standard	Application Received:	04/13/2015

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:

The injured worker is a 52-year-old female, who sustained an industrial injury on June 22, 2011. The injured worker's initial complaints and diagnoses are not included in the provided documentation. The injured worker was diagnosed as having unspecified depressive disorder. Treatment to date has included individual psychotherapy. On November 30, 2014, the injured worker reports not knowing how long she can go on, she is always crying and feels her life will come to a sudden end. She has a loss of energy and fatigue due to insomnia, physical pain, deteriorating health, loss of interest, and overwhelming depression. She reports having significant life threatening health problems that resulted from years of work related stress and anxiety. She exhibited tearfulness, flat affect, constant worrying, and irritability, which were symptoms of depression and anxiety per the treating provider. The treating provider noted she is at risk of becoming gravely disabled due to depression, significant health concerns, and physical pain. The injured worker is benefited by psychotherapy in helping to maintain hope in the recovery process abdomen and by motivating her to focus on personal, social, and family oriented goals. Psychotherapy provides her with an outlet where she can her painful emotions and feels a sense of release in the process, and helps to reduce stress and anxiety and possibly prevent a life threatening medical crisis. Her treatment is currently focused on her identify personal changes and activities the help shift focus away from negative thinking and increase proactive response to help manage emotional, medical, and social impairment.

IMR ISSUES, DECISIONS AND RATIONALES

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

20 Individual psychotherapy sessions: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 15 Stress Related Conditions. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Mental Illness & Stress, 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 and Stress Chapter Cognitive therapy for depression.

Decision rationale: Based on the review of the medical records, the injured worker completed an initial psychological evaluation with [REDACTED] in February 2014. She subsequently participated in follow-up psychotherapy sessions with [REDACTED] and/or his colleagues for an unknown number of sessions. Although the injured worker has been able to make some progress despite remaining symptomatic, the request for an additional 20 sessions is excessive. The ODG recommends a total of up to 20 psychotherapy sessions for the treatment of depression. Given this guideline, the request for an additional 20 sessions is not reasonable and not medically necessary. It is noted that the injured worker received a modified authorization for 10 additional psychotherapy sessions in response to this request.