

MAXIMUS FEDERAL SERVICES, INC.

Independent Medical Review

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Notice of Independent Medical Review Determination

Dated: 12/4/2013

[REDACTED]

[REDACTED]

Employee:

[REDACTED]

[REDACTED]

Date of UR Decision:

8/8/2013

Date of Injury:

8/26/1998

IMR Application Received:

8/28/2013

MAXIMUS Case Number:

CM13-0017930

- 1) MAXIMUS Federal Services, Inc. has determined the request for **psych consultation prior to a spinal cord stimulation trial is medically necessary and appropriate.**

INDEPENDENT MEDICAL REVIEW DECISION AND RATIONALE

An application for Independent Medical Review was filed on 8/28/2013 disputing the Utilization Review Denial dated 8/8/2013. A Notice of Assignment and Request for Information was provided to the above parties on 10/11/2013. A decision has been made for each of the treatment and/or services that were in dispute:

- 1) MAXIMUS Federal Services, Inc. has determined the request for **psych consultation prior to a spinal cord stimulation trial is medically necessary and appropriate.**

Medical Qualifications of the Expert Reviewer:

The independent Medical Doctor who made the decision has no affiliation with the employer, employee, providers or the claims administrator. The physician reviewer is Board Certified in Occupational Medicine 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 treatments and/or services at issue.

Expert Reviewer Case Summary:

The applicant is a represented [REDACTED] who has filed a claim for chronic low back pain and secondary depression reportedly associated with an industrial injury of August 26, 1998.

Thus far, the applicant has been treated with the following: Analgesic medications; prior multilevel lumbar fusion surgeries; transfer of care to and from various providers in various specialties; adjuvant medications; psychotropic medications; and extensive periods of time off of work.

In a utilization review report of August 8, 2013, the claims administrator either certified or modified psychiatric consultation for spinal cord stimulator trial. It appears that the request was certified, although the decision may have been incorrectly stated as modification. There appears to be some semantic dispute. The applicant's attorney, for whatever reason, appealed on August 28, 2013.

The applicant did undergo psychological consultation on October 1, 2013, was diagnosed with adjustment disorder with depressed mood, and was asked to undergo additional psychological counseling to help him adjust his stressful medical procedures. It was stated that the applicant was a good candidate for the procedure and should undergo the same. Notably a note of July 30, 2013 is notable for comments that the applicant should consider spinal cord stimulator trial and is reportedly working modified duty. The applicant is using Norco four to six times a day and Neurontin four times a day. Both the spinal cord stimulator trial and precursor psychological evaluation are endorsed.

Documents Reviewed for Determination:

The following relevant documents received from the interested parties and the documents provided with the application were reviewed and considered. These documents included:



1) Regarding the request for psych consultation prior to a spinal cord stimulation trial:

Section of the Medical Treatment Utilization Schedule Relied Upon by the Expert Reviewer to Make His/Her Decision

The Claims Administrator based its decision on the Chronic Pain Medical Treatment Guidelines, section Spinal Cord Stimulators, which is part of MTUS.

The Expert Reviewer based his/her decision on the Chronic Pain Medical Treatment Guidelines, section Spinal Cord Stimulators, pg. 38, and section Psychological Evaluations, IDDS and SCS, pg. 101, which are part of MTUS.

Rationale for the Decision:

MTUS guidelines indicate that spinal cord stimulators should only be offered after careful counseling and patient identification in conjunction with comprehensive multidisciplinary medical management. Thus, performing of precursor counseling/psychological screening can help to identify appropriate candidates for a spinal cord stimulator. Therefore, the proposed psychological consultation for spinal cord stimulator trial was medically necessary, medically appropriate, and indicated here. **The request for psych consultation prior to a spinal cord stimulation trial is medically necessary and appropriate.**

Effect of the Decision:

The determination of MAXIMUS Federal Services and its physician reviewer is deemed to be the final determination of the Administrative Director, Division of Workers' Compensation. With respect to the medical necessity of the treatment in dispute, this determination is binding on all parties.

In accordance with California Labor Code Section 4610.6(h), a determination of the administrative director may be reviewed only if a verified appeal is filed with the appeals board for hearing and served on all interested parties within 30 days of the date of mailing of the determination to the employee or the employer. The determination of the administrative director shall be presumed to be correct and shall be set aside only upon proof by clear and convincing evidence of one or more of the grounds for appeal listed in Labor Code Section 4610.6(h)(1) through (5).

Sincerely,

Paul Manchester, MD, MPH
Medical Director

cc: Department of Industrial Relations
Division of Workers' Compensation
1515 Clay Street, 18th Floor
Oakland, CA 94612

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Disclaimer: MAXIMUS is providing an independent review service under contract with the California Department of Industrial Relations. MAXIMUS is not engaged in the practice of law or medicine. Decisions about the use or nonuse of health care services and treatments are the sole responsibility of the patient and the patient's physician. MAXIMUS is not liable for any consequences arising from these decisions.