

<b>Case Number:</b>	CM13-0033659		
<b>Date Assigned:</b>	12/06/2013	<b>Date of Injury:</b>	03/29/2005
<b>Decision Date:</b>	03/26/2014	<b>UR Denial Date:</b>	09/23/2013
<b>Priority:</b>	Standard	<b>Application Received:</b>	10/10/2013

### HOW THE IMR FINAL DETERMINATION WAS MADE

MAXIMUS Federal Services sent the complete case file to a physician reviewer. He/she has no affiliation with the employer, employee, providers or the claims administrator. The physician reviewer is Board Certified in Clinical Psychology, has a subspecialty in Health Psychology and Pain Management 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 physician 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:

According to the medical records provided for this review, this patient is a 59 year old male who reported an injury in the course of his work duties at [REDACTED]. His work involved maintaining and quickly repairing the main computer servers and programs. During the financial crisis when [REDACTED] was bought by [REDACTED] he experienced increased work-related stress coming from both the corporate environment and his co-workers/supervisors which created an intense fear of being fired. There might have been a preexisting anxiety and depression from his life working and living in [REDACTED] prior to this reported injury. His psychiatric diagnosis was listed as either schizoaffective disorder with paranoid features vs. major depressive disorder with severe psychotic symptoms. There is also a diagnosis of generalized anxiety disorder, sleep disorder due to medical and psychiatric condition, and psychological factors affecting medical condition. There is also an Axis II diagnosis of mixed personality disorder with obsessive-compulsive, histrionic, paranoid and schizotypal personality features. A psychological assessment from Oct 2012 states that "he has been scratching himself to the point of bleeding and infected wounds because of "pain in his head" and he lives in fear of dying from a heart-attack. A request for 20 sessions of individual psychotherapy was non-certified; this IMR will address a request to appeal this utilization review decision.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**PSYCHOTHERAPY, ONCE A WEEK FOR 20 WEEKS:** Upheld

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines  
Page(s): 23.

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS.  
Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Mental/Stress  
Chapter: Psychotherapy

**Decision rationale:** The request for 20 sessions of individual psychotherapy was correctly non-certified due based on the ODG -official disability guidelines for psychotherapy. In cases of severe psych comorbidities an initial trial of 6 visits over 6 weeks with evidence of objective functional improvement, total of up to 13-20 visits over 13-20 weeks (individual sessions). The medical records provided for this review were insufficient with respect to the current status of this patient's mental health: there was no documentation of objective functional improvements from the recent prior sessions, no information regarding his current psychiatric medications and use of a psychiatrist for consultations (which should take priority over psychotherapy in this case), and there was no specific information provided about the total number of therapy sessions provided to date. The specific request for 20 psychotherapy sessions was not supported due to exceeding the ODG, and a lack of sufficient recent documentation as described above.