

<b>Case Number:</b>	CM13-0043785		
<b>Date Assigned:</b>	12/27/2013	<b>Date of Injury:</b>	11/29/2012
<b>Decision Date:</b>	04/10/2014	<b>UR Denial Date:</b>	10/17/2013
<b>Priority:</b>	Standard	<b>Application Received:</b>	10/31/2013

### 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, has a subspecialty in Health 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:

According to the medical records provided for this independent medical review, this patient is a 25 year old male who reported an occupational related injury on November 29, 2012 when in the normal course of his work duties for a pawn and jewelry shop he was held up at gunpoint and his co-worker, who happened to be his best friend, was murdered. He subsequently has been diagnosed with Post-traumatic stress disorder (PTSD) and Major Depression and Anxiety. He continues to report being severely depressed and anxious and has panic attacks, poor sleep, recurrent rumination and intrusive thoughts about the terrible tragedy that he witnessed. He has been treated with Cognitive Behavioral Therapy (CBT) and EMDR as well as consultation with Psychiatry and psychiatric medications. A request for six additional sessions of psychotherapy was made and non-certified. This request for an independent medical review concerns itself with the denial of additional treatment and a request to overturn the decision.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Additional six sessions of Psychotherapy (For a total of 60): Upheld**

**Claims Administrator guideline:** Decision based on MTUS ACOEM Chapter 15 Stress Related Conditions Page(s): 398-404. Decision based on Non-MTUS Citation ODG (Mental Illness and Stress Chapter)

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS.  
Decision based on Non-MTUS Citation ODG MENTAL/STRESS: PSYCHOTHERAPY

**Decision rationale:** After a comprehensive review of all of the medical records provided it appears that this young man is suffering greatly from the exposure to violence he witnessed. Unfortunately at this time it also appears that he has had either a 54 or more likely 60 sessions of psychotherapy already. Even using the most generous criteria which come from the Official Disability Guidelines, the patient has reached the maximum of psychotherapy sessions at 50. This request would leave him at either 60 or 66. The guidelines state that typically therapy should last 13 to 20 sessions if there is sufficient evidence of objective functional improvement. The treating therapist has documented adequately that the patient is making objective functional improvements as a result of the treatment provided, which has including EMDR and CBT. The guidelines for psychotherapy state that in very complex cases of PTSD and depression it can last for at least one year or 50 sessions to be more effective then shorter term psychotherapy for patients with complex mental disorders such as depression and PTSD. Because this request would bring him up to 60 or perhaps 66 (it is unclear but the same either way) is not possible to authorize any further treatment and the original decision to deny additional therapy is upheld.