

Case Number:	CM14-0102130		
Date Assigned:	09/16/2014	Date of Injury:	01/29/2003
Decision Date:	10/15/2014	UR Denial Date:	06/16/2014
Priority:	Standard	Application Received:	07/02/2014

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, 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:

The claimant is an unknown age male with a date of injury of 1/23/03. The claimant sustained injury while working as a police officer for the [REDACTED]. The mechanism of injury was not found within the medical record. In his 5/23/14 PR-2 report, treating psychologist, [REDACTED] diagnosed the claimant with: (1) Posttraumatic stress disorder; (2) Depressive disorder, NOS; Alcohol abuse in remission; (3) Partner relational problem; and (4) Occupational problem. The claimant has been receiving psychotherapy as well as psychotropic medications to treat his psychiatric symptoms.

IMR ISSUES, DECISIONS AND RATIONALES

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

Continue psychotherapy once per week to twice per month for 45 days: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 23. Decision based on Non-MTUS Citation Official Disability 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 PTSD Recommended. There is evidence that individual Trauma-focused cognitive behavioral therapy/exposure therapy (TFCBT), stress management and group TFCBT are very effective in the treatment of post-traumatic stress disorder (PTSD).

Other non-trauma focused psychological treatments did not reduce PTSD symptoms as significantly. There was some evidence that individual

Decision rationale: The claimant is an unknown age male with a date of injury of 1/23/03. The claimant sustained injury while working as a police officer for the [REDACTED]. The mechanism of injury was not found within the medical record. In his 5/23/14 PR-2 report, treating psychologist, [REDACTED] diagnosed the claimant with: (1) Posttraumatic stress disorder; (2) Depressive disorder, NOS; Alcohol abuse in remission; (3) Partner relational problem; and (4) Occupational problem. The claimant has been receiving psychotherapy as well as psychotropic medications to treat his psychiatric symptoms.