

<b>Case Number:</b>	CM14-0106081		
<b>Date Assigned:</b>	07/30/2014	<b>Date of Injury:</b>	10/30/2012
<b>Decision Date:</b>	08/29/2014	<b>UR Denial Date:</b>	06/04/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	07/07/2014

### 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 Psychiatry, has a subspecialty in, 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:

Official Disability Guidelines (ODG) states Cognitive therapy Post Traumatic Syndrome Disorder (PTSD) is recommended. There is evidence that individual Trauma-Focused Cognitive Behavioral Therapy/Exposure Therapy (TFGBT), stress management, and group TFGBT are very effective in the treatment of post-traumatic stress disorder (PTSD), Number of psychotherapy sessions: There is very limited study of the exact number of sessions needed in a course of psychological or psychiatric treatment. There are a small number of studies offering some basic directions on this topic, and they are summarized below. Official Disability Guidelines Psychotherapy Guidelines: Up to 13-20 visits over 7-20 weeks (individual sessions), if progress is being made. (The provider should evaluate symptom improvement during the process, so treatment failures can be identified early and alternative treatment strategies can be pursued if appropriate.) In cases of severe major depression or PTSD, up to 50 sessions if progress is being made. Upon review of the documentation submitted for review, it is evidenced that the injured worker has benefited from psychotherapy in the past. Her condition has worsened secondary to her 10/30/12 accident. Further psychotherapy is warranted, however, the request for 20 sessions is in excess of the guidelines recommendation. The request for 20 Sessions of Psychotherapy (once a week) is not medically necessary.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**20 sessions of psychotherapy (once a week): Upheld**

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Psychological Evaluations and Psychological Treatment Page(s): 100-102. Decision based on Non-MTUS Citation Official Disability Guidelines for Mental Illness & Stress regarding Cognitive Therapy for Post Traumatic Syndrome Disorder and Psycho Therapy 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 and Stress, Cognitive therapy for Post Traumatic Syndrome Disorder (PTSD).

**Decision rationale:** Official Disability Guidelines (ODG) states Cognitive therapy Post Traumatic Syndrome Disorder (PTSD) is 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), Number of psychotherapy sessions: There is very limited study of the exact number of sessions needed in a course of psychological or psychiatric treatment. There are a small number of studies offering some basic directions on this topic, and they are summarized below. Official Disability Guidelines Psychotherapy Guidelines: Up to 13-20 visits over 7-20 weeks (individual sessions), if progress is being made. (The provider should evaluate symptom improvement during the process, so treatment failures can be identified early and alternative treatment strategies can be pursued if appropriate.) In cases of severe major depression or PTSD, up to 50 sessions if progress is being made. Upon review of the documentation submitted for review, it is evidenced that the injured worker has benefited from psychotherapy in the past. Her condition has worsened secondary to her 10/30/12 accident. Further psychotherapy is warranted, however, the request for 20 sessions is in excess of the guidelines recommendation. The request for 20 Sessions of Psychotherapy (once a week) is not medically necessary.

**Beck Anxiety Inventory (BAI), administered once a week for 20 weeks (in conjunction with psychotherapy visits):** Upheld

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Psychological Evaluation, and Psychological Treatment Page(s): 100-102. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) for Mental Illness & Stress regarding Cognitive therapy for Post Traumatic Syndrome Disorder and Official Disability Guidelines 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 & Stress, Psychological Evaluations.

**Decision rationale:** Per the Official Disability Guidelines, psychological evaluations are recommended. They are generally accepted, well-established diagnostic procedures not only with selected use in pain problems, but also with more widespread use in sub acute and chronic pain populations. Diagnostic evaluations should distinguish between conditions that are preexisting, aggravated by the current injury or work related. Psychosocial evaluations should determine if further psychosocial interventions are indicated. The Beck Anxiety Inventory is periodically administered to patients to measure the severity of anxiety and to monitor the progress of

treatment. The requested 20 BAI once a week is excessive, and is not medically necessary. It should be noted that the UR physician has certified a modification of the request for 3 BAI.

**Beck Depression Inventory (BDI), administered once a week for 20 weeks (in conjunction with psychotherapy visits): Upheld**

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Psychological Evaluation and Psychological Treatment Page(s): 100-102. Decision based on Non-MTUS Citation Official Disability Guidelines for Mental Illness & Stress regarding Cognitive therapy for Post Traumatic Syndrome Disorder and Official Disability Guidelines Psychotherapy Guidelines.

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Mental Illness & Stress regarding Cognitive therapy for Post Traumatic Syndrome Disorder and Official Disability Guidelines Psychotherapy Guidelines.

**Decision rationale:** The Official Disability Guidelines recommends the BDI II as a first-line option psychological test in the assessment of chronic pain patients. It is intended as a brief measure of depression, this test is useful as a screen or as one test in a more comprehensive evaluation. It can identify patients needing referral for further assessment and treatment for depression. The requested 20 BDI once a week is excessive, and is not medically necessary. It should be noted that the UR physician has certified a modification of the request for 3 BDI.

**4 medication management sessions, once every 3 months for one year,: Upheld**

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Mental Illness & Stress, and Office Visits.

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Mental Illness & Stress, and Office Visits.

**Decision rationale:** The MTUS is silent on Psychiatric Medication Management. Per Official Disability Guidelines: Office Visits are recommended as determined to be medically necessary. The need for clinical office visit with a health care provider is individualized based upon the review of patient concerns, signs, symptoms, clinical stability, and reasonable physician judgment. The determination is also based on what medications the patient is taking, since some medications such as opiates, or medicines such as certain antibiotics, require close monitoring. As patient conditions are extremely varied, a set number of office visits per condition cannot be reasonably established. The determination of necessity for an office visit requires individualized case review and assessment, being ever mindful that the best patient outcomes are achieved with eventual patient independence from health care system through self-care as soon as clinically feasible. Upon review of the submitted documentation, it appears that as far as psychotropic medications, the injured worker is taking Lorazepam for anxiety. Medication management to monitor side effects, check efficacy, and making dosing adjustments as necessary, however, the 4 medication management sessions once every 3 months for 1 year is excessive. The request is

not medically necessary. It should be noted that the UR physician has certified a modification of this request for 3 sessions.

**Beck Depression Inventory (BDI), administered once every 3 months for 1 year (in conjunction with medication management visits): Upheld**

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Psychological Evaluation and Psychological Treatment Page(s): 100-102. Decision based on Non-MTUS Citation Official Disability Guidelines for Mental Illness & Stress regarding Cognitive therapy for Post Traumatic Syndrome Disorder, Official Disability Guidelines, Psychotherapy Guidelines, and Office Visits.

**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 & Stress, BDI II (Beck Depression Inventory).

**Decision rationale:** The Official Disability Guidelines recommends the BDI II as a first-line option psychological test in the assessment of chronic pain patients. It is intended as a brief measure of depression, this test is useful as a screen or as one test in a more comprehensive evaluation. It can identify patients needing referral for further assessment and treatment for depression. The requested 4 BDI once every 3 months is excessive, and is not medically necessary, especially in addition to BDI testing to take place during psychotherapy visits. It should be noted that the UR physician has certified a modification of the request for 3 BDI.