

<b>Case Number:</b>	CM14-0131158		
<b>Date Assigned:</b>	08/20/2014	<b>Date of Injury:</b>	11/10/1999
<b>Decision Date:</b>	10/01/2014	<b>UR Denial Date:</b>	08/14/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	08/15/2014

### 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 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:

Injured worker is a 59 year old male with date of injury 11/10/1999. Date of the UR decision was 8/14/2014. He suffers from chronic pain secondary to industrial trauma. Psychotherapy progress report dated 5/1/2014 suggested that he appeared very agitated, frustrated and depressed. It was stated that he had another fall on 4/17/2014 in which he encountered more physical injuries which caused worsening of his depression. He was diagnosed with Major Depressive Disorder, moderate to severe with anxiety, improved and mental disorder due to Chronic Pain and Physical Impairment. 8 additional psychotherapy visits were requested per that report. Report dated 6/12/2014 also reported the injured worker appearing very agitated, angry, tearful and depressed. It was indicated that pain had taken a toll on his relationship with his wife and children since he was very irritable, emotionally volatile and had periods of severe psychological decompensation. Eight (8) additional psychotherapy visits were requested per the report dated 6/12/2014. Report dated 7/30/2014 stated that he continued to report global pain and ongoing frustration, anger and emotional liability as he had been unable to receive authorization for treatment. Objective findings per that report were flattened affect, appearing tense with agitated mood, pressured speech, dysphoric and angry. Another Eight (8) psychotherapy visits were requested per that report. Response letter to dated 8/12/2014 suggested that he had shown objective functional impairment with improvements in affect and mood, increased pain management skills, coping skills as well as some ability to control anger and emotional volatility.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Eight (8) psychotherapy treatments: Overturned**

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines psychological treatment. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) 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) Stress and Mental illness chapter, Cognitive therapy for depression

**Decision rationale:** ODG Psychotherapy Guidelines recommend: "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." It has been indicated that injured worker has undergone at least 33 sessions of psychotherapy. Report dated 8/12/2014 suggested that he had shown objective functional impairment with improvements in affect and mood, increased pain management skills, coping skills as well as some ability to control anger and emotional volatility. Report dated 7/30/2014 stated that he continued to report global pain and ongoing frustration, anger and emotional lability as he had been unable to receive authorization for treatment. Objective findings per that report were flattened affect, appearing tense with agitated mood, pressured speech, dysphoric and angry. Another 8 psychotherapy visits were requested per that report. Guidelines recommend up to 50 sessions of psychotherapy in cases of severe Major Depression or PTSD if progress is being made. The request for Eight (8) psychotherapy treatments is medically necessary based on the severity of the symptoms being experienced by the injured worker.