

Case Number:	CM14-0176112		
Date Assigned:	10/29/2014	Date of Injury:	10/02/2012
Decision Date:	12/05/2014	UR Denial Date:	10/06/2014
Priority:	Standard	Application Received:	10/23/2014

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 a licensed Psychologist, 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 a 35 year-old male [REDACTED] with a date of cumulative injury of 2/2/12. The claimant sustained injury to his psyche as the result of experiencing repeated work-related trauma exposures to emergency calls including death. The claimant sustained this injury while working as a firefighter/paramedic for the [REDACTED]. In his most recent PR-2 report dated 9/24/14, treating therapist, [REDACTED] diagnosed the claimant with Posttraumatic Stress Disorder. Treating psychiatrist, [REDACTED] has also diagnosed the claimant with PTSD as well as with bipolar depression with mild psychotic features and Polysubstance dependence. The claimant has been receiving ongoing psychological/psychiatric services, but remains symptomatic. The request under review is for an additional 8 psychotherapy sessions.

IMR ISSUES, DECISIONS AND RATIONALES

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

Psychotherapy 8 visits.: Overturned

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Cognitive behavioral therapy.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Guidelines (ODG) Mental Illness and Stress Chapter

Decision rationale: The CA MTUS does not address the treatment of PTSD therefore; the Official Disability Guideline regarding the cognitive treatment of PTSD will be used as reference for this case. Based on the review of the medical records, the claimant continues to be symptomatic regarding symptoms of PTSD and depression as well as polysubstance dependence. The review of the records indicates that the claimant completed 2 QME evaluations with [REDACTED] (12/2012 and 11/2013), received psychiatric services with medication management in 2012 and 2013, participated in psychotherapy with [REDACTED] in 2012 and 2013, was psychiatrically hospitalized either in 2012 or 2013, went through detox and completed a residential drug/alcohol treatment program in 9/13 through 10/13, attended an IOP for chemical dependency in 12/13, completed an initial psychological evaluation with [REDACTED] in 12/13 (report dated 1/20/14), began psychotherapy with [REDACTED], in 1/14, and was evaluated and began medication management services with [REDACTED] in 2/2014. It appears that the claimant has completed a total of 18 psychotherapy sessions with [REDACTED] from 1/22/14 through 9/6/14. Despite the number of services that have already been completed, the claimant remains in need of further services. The ODG states that "extremely severe cases of combined depression and PTSD may require more sessions if documented that CBT is being done and progress is being made. Psychotherapy lasting for at least a year, or 50 sessions, is more effective than shorter-term psychotherapy for patients with complex mental disorders, according to a meta-analysis of 23 trials." Not only is the claimant working on reducing and alleviating his PTSD and depressive symptoms, but also needs to work on his polysubstance dependence issues. He has been able to demonstrate some improvements such as a reduction in his alcohol/marijuana use as well as an improvement in some of his coping such as using meditation. As a result, the request for additional "Psychotherapy 8 visits" is appropriate and medically necessary.