

<b>Case Number:</b>	CM14-0198054		
<b>Date Assigned:</b>	12/08/2014	<b>Date of Injury:</b>	07/06/1992
<b>Decision Date:</b>	01/22/2015	<b>UR Denial Date:</b>	10/28/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	11/25/2014

### 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 Anesthesiology, has a subspecialty in Pain Management and is licensed to practice in Tennessee. 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 injured worker is a 61 year-old female (██████████) with a date of injury of 7/6/92. The injured worker sustained injury while working for ██████████. The mechanism of injury was not provided. She developed psychiatric symptoms of depression and anxiety secondary to her work-related injury and has subsequently been participating in weekly psychotherapy (phone sessions) with ██████████ since May 2005. In her "Treatment Summary" dated 10/18/14, ██████████ diagnosed the injured worker with: (1) Major depressive disorder, moderate, chronic; and (2) Panic disorder, without agoraphobia. The request under review is for additional sessions at once per week for 6 months.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Psychotherapy visit x 1 week for 6 months:** Upheld

**Claims Administrator guideline:** Decision based on MTUS ACOEM Page(s): 57-64, 396-397.  
Decision based on Non-MTUS Citation Official Disability Guidelines (ODG)

**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 depression

**Decision rationale:** The CA MTUS does not address the treatment of depression therefore, the Official Disability Guideline regarding the cognitive treatment of depression as well as the APA Practice Guideline for the Treatment of Patients with Major Depressive Disorder will be used as references for this case. Based on the review of the limited medical records submitted for review, the injured worker has been participating in ongoing psychotherapy sessions with [REDACTED] since May 2005. Although it is mentioned by [REDACTED] that the injured worker was awarded "lifetime mental health services", there does not appear to be any indication of reducing the injured worker's sessions as recommended in the APA Practice Guideline regarding psychotherapy in maintenance phase treatment, so as not to have the injured worker become dependent upon the weekly phone sessions. There is noted progress and improvement from the provided therapy however, the need for an additional 24 sessions cannot be fully determined as it appears excessive in light of the number of years that the injured worker has been receiving therapy. In her "Treatment Summary" dated 10/18/14, [REDACTED] offered an estimated discharge date of June 2015. At this time, it appears reasonable to transition to a reduction in services to prepare for an upcoming discharge. As a result, the request for "Psychotherapy visit x 1 week for 6 months" is not medically necessary. It is noted that the injured worker received a modified authorization for an additional 8 psychotherapy sessions in response to this request.