

<b>Case Number:</b>	CM15-0185114		
<b>Date Assigned:</b>	09/25/2015	<b>Date of Injury:</b>	03/20/2014
<b>Decision Date:</b>	11/12/2015	<b>UR Denial Date:</b>	09/11/2015
<b>Priority:</b>	Standard	<b>Application Received:</b>	09/21/2015

### 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. 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/Service. He/she is familiar with governing laws and regulations, including the strength of evidence hierarchy that applies to Independent Medical Review determinations.

The Expert Reviewer has the following credentials:

State(s) of Licensure: California

Certification(s)/Specialty: Psychologist

### 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 31 year old male who sustained an industrial injury on 3-20-2014. A review of medical records indicates the injured worker is being treated for head contusion, headache, neck muscle strain, left thumb extensor strain, forearm level, and posttraumatic stress disorder. Medical records dated 8-26-2015 noted he was having depression, sleep issues, and severe post trauma. He continued to report severely disrupted sleep from night terrors and depression for which he was attempting medication and counseling care. It is noted he has pursued his regular activities although he is withdrawn and reluctant to expose himself to public situations. Physical examination dated 8-26-2015 noted demeanor-manner was guarded, aloof, and withdrawn. Mood was dysphoric, anxious, and irritable. Affect was labile. Concentration was impaired. Memory had short-term impairment. Treatment in the past has included physical therapy, acupuncture, psychotherapy, exposure therapy of unknown amount, and medications including Sertraline and Nortriptyline. RFA dated 8-26-2015 requested to continue weekly exposure therapy sessions. Utilization review dated 9-11-2015 non-certified additional exposure therapy x 10 sessions.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Additional exposure therapy (x10): 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), Psychotherapy guidelines - Cognitive therapy.

**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: Exposure Therapy.

**Decision rationale:** Based on the review of the medical records, the injured worker has been receiving psychological services from both [REDACTED] (who is providing CBT) and [REDACTED] (providing exposure therapy) for an unknown number of sessions over an unknown duration of time. It appears that two psychologists are providing services possibly due to different specialties. Unfortunately, neither of their reports offers information regarding the number of completed sessions to date nor offer very much information about the specific interventions and progress/improvements made as a result of those interventions. In regards to the use of exposure therapy (ET), the ODG recommends its use in the treatment of PTSD and indicates, "ET usually lasts from 8-12 sessions depending on the trauma and the treatment protocol." As a result of insufficient information within the medical records to substantiate the need for additional treatment, the request for an additional 10 exposure therapy sessions is not medically necessary.