

<b>Case Number:</b>	CM14-0009202		
<b>Date Assigned:</b>	04/25/2014	<b>Date of Injury:</b>	09/17/2012
<b>Decision Date:</b>	05/27/2014	<b>UR Denial Date:</b>	01/15/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	01/23/2014

### 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 Board Certified in Psychology 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 CA MTUS does not address the treatment of Posttraumatic Stress Disorder therefore, the Official Disability Guideline regarding the cognitive therapy treatment of PTSD will be used as reference for this case. In the "Mental Health Progress Note" dated 1/14/14 from [REDACTED] and [REDACTED], it is noted that the patient is participating in his therapy however, it is unclear as to how many sessions the patient has completed to date and the exact progress and objective functional improvements that have been made from those sessions. The ODG suggests an "initial trial of 6 visits over 6 weeks" and "with evidence of objective functional improvement, total of 13-20 visits over 13-20 weeks (individual sessions)" may be necessary. It further indicates 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." Because the information offered for review fails to provide enough evidence to support the need for continued services, the request for "Twelve (12) Cognitive Behavioral Therapy (CBT) visits" is not medically necessary.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**TWELVE (12) COGNITIVE BEHAVIORAL THERAPY (CBT) VISITS:** 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.

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation NON-MTUS.

**Decision rationale:** The CA MTUS does not address the treatment of Posttraumatic Stress Disorder therefore, the Official Disability Guideline regarding the cognitive therapy treatment of PTSD will be used as reference for this case. In the "Mental Health Progress Note" dated 1/14/14 from [REDACTED] and [REDACTED], it is noted that the patient is participating in his therapy however, it is unclear as to how many sessions the patient has completed to date and the exact progress and objective functional improvements that have been made from those sessions. The ODG suggests an "initial trial of 6 visits over 6 weeks" and "with evidence of objective functional improvement, total of 13-20 visits over 13-20 weeks (individual sessions)" may be necessary. It further indicates 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." Because the information offered for review fails to provide enough evidence to support the need for continued services, the request for "Twelve (12) Cognitive Behavioral Therapy (CBT) visits" is not medically necessary.