

Case Number:	CM14-0128354		
Date Assigned:	09/24/2014	Date of Injury:	04/13/2009
Decision Date:	10/24/2014	UR Denial Date:	07/14/2014
Priority:	Standard	Application Received:	08/12/2014

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 licensed 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 claimant is a 45 year-old male [REDACTED] with a date of injury of 4/13/09. The claimant sustained to his right leg while working for Sierra Pacific Industries. The claimant sustained injury to his leg when a large log hit the claimant's right leg, crushing it and fracturing both the tibia and fibula. It is also reported that the claimant developed psychiatric symptoms as a result of the work-related accident and secondary to his chronic pain. In a letter dated 8/8/14, psychiatrist, [REDACTED], indicated that the claimant had been diagnosed with PTSD and Depression. In his PR-2 report dated 9/9/14, [REDACTED] diagnosed the claimant with PTSD and Anxiety Disorder. The claimant has been receiving psychotropic medications as well as psychotherapy to treat his psychiatric symptoms.

IMR ISSUES, DECISIONS AND RATIONALES

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

Continued psychotherapy sessions: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines, Mental Illness & Stress Procedure Summary; Psychotherapy

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

Decision rationale: The CA MTUS does not address the treatment of PTSD nor depression 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 has been receiving psychotherapy since 2012. The number of completed sessions over the past year is not known. In his most recent progress report dated 7/30/14, treating therapist, [REDACTED], indicated a need for further psychotherapy due to continued symptoms of PTSD including, "Re-experiencing, avoidance, and numbing responses to stimuli, and persistent symptoms of increased arousal." He reported that he is treating the claimant with "cognitive behavioral interventions and trigger/emotional processing in session." Improvements are noted to be "reductions in panic attacks, increased tolerance of trauma cues, and decrease in reports of depressive mood in both severity and duration." Although these improvements are reported, they are neither measurable nor objective functional improvements as cited within the ODG. Without knowing how many sessions have been conducted over the past year and not having enough information about objective improvements/progress, the need for additional sessions cannot be fully determined. Additionally, the request for "Continued psychotherapy sessions" remains too vague as it does not indicate the number of sessions being requested or the frequency of those sessions. As a result, the request for "Continued psychotherapy sessions" is not medically necessary.