

Case Number:	CM15-0121295		
Date Assigned:	07/02/2015	Date of Injury:	01/11/2010
Decision Date:	07/31/2015	UR Denial Date:	05/27/2015
Priority:	Standard	Application Received:	06/23/2015

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 40 year old female with an industrial injury dated 01/11/2010. Her diagnosis was post-traumatic stress disorder (PTSD). The mechanism of injury is documented as resulting from her work as a detective investigating child abuse cases. Prior treatments included EMDR (eye movement desensitization and reprocessing.) She presents on 05/13/2015 with complaints of intermittent flashbacks, difficulty concentrating, avoiding places or people that remind her of traumatic events, experiencing irritability or anger, stress and depression from trauma over loss of work and life changes. She notes nightmares/upsetting dreams, intrusive thoughts, triggers, overwhelmed with tearful feelings and periods of grief and sadness. The provider notes the above symptoms continue to moderately improve. The provider documents the injured worker reports few triggers the week of the visit. Objective was to continue to make gains through her work with EMDR (eye movement desensitization and reprocessing.) Current psychiatric status was documented as mild depressed mood, mild anxiety and moderate irritability. The treatment request is for psychotherapy with EMDR (eye movement desensitization and reprocessing) weekly for 6 months.

IMR ISSUES, DECISIONS AND RATIONALES

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

Psychotherapy with EMDR (Eye movement desensitization and reprocessing) weekly for 6 months: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 23. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), mental illness and stress, Psychotherapy guidelines.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Part Two, Behavioral Interventions, and Psychological Treatment; see also ODG Cognitive Behavioral Therapy Guidelines for Chronic Pain. Pages 101-102; 23-24. Decision based on Non-MTUS Citation ODG: Chapter Mental Illness and Stress, Topic: Cognitive Behavioral Therapy, Psychotherapy Guidelines March 2015 update.

Decision rationale: Citation Summary: According to the MTUS treatment guidelines, psychological treatment is recommended for appropriately identified patients during treatment for chronic pain. Psychological intervention for chronic pain includes: setting goals, determining appropriateness of treatment, conceptualizing a patient's pain beliefs and coping styles, assessing psychological and cognitive functioning, and addressing comorbid mood disorders such as depression, anxiety, panic disorder, and PTSD. The identification and reinforcement of coping skills is often more useful in the treatment of chronic pain and ongoing medication or therapy, which could lead to psychological or physical dependence. An initial treatment trial is recommended consisting of 3-4 sessions to determine if the patient responds with evidence of measurable/objective functional improvements. Guidance for additional sessions is a total of up to 6-10 visits over a 5 to 6 week period of individual sessions. The official disability guidelines (ODG) allow a more extended treatment. According to the ODG studies show that a 4 to 6 sessions trial should be sufficient to provide symptom improvement but functioning and quality-of-life indices do not change as markedly within a short duration of psychotherapy as do symptom-based outcome measures. ODG psychotherapy guidelines: up to 13-20 visits over a 7-20 weeks (individual sessions) if documented that CBT has been done and progress has been made. The provider should evaluate symptom improvement during the process so that treatment failures can be identified early and alternative treatment strategies can be pursued if appropriate. Psychotherapy lasting for at least a year or 50 sessions is more effective than short-term psychotherapy for patients with complex mental disorders according to the meta-analysis of 23 trials. Decision: A request was made for psychotherapy with EMDR (eye movement desensitization and reprocessing) weekly for six months. The request was noncertified by utilization review with the following provided rationale: "In this case the provider states that the claimant has made improvements over the past six months and recommends continued treatment. However, the documentation over the past few months is limited regarding specific objective functional improvement. Additionally, the claimant has attended treatment for years, although the number of prior treatment sessions is unknown." This IMR will address a request to overturn the utilization review decision of non-certification of the request. According to a letter from the patient's primary treating physician April 15, 2015, it is noted that the patient "has been in intensive therapy with EMDR, eye movement desensitization and reprocessing, with Jennifer Prins, LCSW. She has made great progress over the last six months with their treatment. However it would be in her best interest to continue weekly EMDR sessions with Jennifer Prins for an additional six months in order to continue progress in her recovery." It is further noted that she's been working hard and treatment and interruption would cause a regression and loss of some progress. The medical necessity of the requested treatment is not established by the

provided documentation. The provided medical records do contain some psychological treatment progress notes. However, these progress notes do not describe objectively measured functional indices of improvement. There is no clear treatment plan with stated goals and estimated dates of accomplishment and no indication of prior goals that have been accomplished as a direct result of her psychological treatment. It is unclear how long the patient has been participating in psychological treatment in terms of total quantity of sessions. The official disability guidelines recommend a typical course of psychological treatment consisting of 13 to 20 sessions maximum for most patients. There is however an exception that can be made according to the official disability guidelines that would allow for additional treatment in cases of very severe major depressive disorder or PTSD. It is not clear to what extent the patient's PTSD symptoms would qualify as very severe/extreme. The exception is reserved patients with the most severe symptoms, which might, or might not, apply in this situation. The request itself for six months of psychological treatment is excessive. The ongoing need to establish medical necessity during the course of psychological treatment is needed. This request for six months of psychological treatment is determined to be excessive in quantity/duration in the absence of specific and detailed information regarding prior treatment as listed above. For this reason, the medical necessity of the request is not established and the utilization review determination is upheld. Therefore, the request is not medically necessary.