



DATE OF REVIEW: June 9, 2009

IRO Case #:

**Description of the services in dispute:**

Request for 8 counselling sessions (#90808).

**A description of the qualifications for each physician or other health care provider who reviewed the decision**

The Psychologist who performed this review is licensed in Psychology by the state of Texas. This reviewer is a Diplomate of the American College of Forensic Examiners. They also hold a master certification in Neuro Linguistic Programming. The reviewer provides services for both adult and pediatric patients within their practice. The reviewer has been in active practice since 1976.

**Review Outcome**

Upon independent review the reviewer finds that the previous adverse determination/adverse determinations should be:

Upheld.

**Provide a description of the review outcome that clearly states whether or not medical necessity exists for each of the health care services in dispute.**

The request for 8 counselling sessions (#90808) is not medically necessary.

**Information provided to the IRO for review**

**Records from the State:**

- Confirmation of Receipt of a request for a Review by an Independent Review Organization (IRO)
- Company Request for IRO
- Request Form - Request for a Review by an Independent Review Organization, 5/19/09
- Letter 4/9/09
- Letter 4/16/09

**Records :**

- Affidavit 5/14/09

- Preauthorization request for 8 counseling sessions (#90808) PhD, 4/3/09
- Letter, PhD, 4/3/09
- Progress notes PhD, 2/25/09, 3/12/09, 3/17/09, 3/25/09, 4/2/09
- Letter 4/9/09
- Letter 4/16/09

### **Patient clinical history [summary]**

The patient is a male whose date of injury is xx/xx/xx. On this date the patient was operating a press when his hair was caught in an exposed driveshaft and the patient was essentially scalped, losing more than half his scalp and his left ear. The patient also sustained a neck injury in the incident and has reported significant symptoms of PTSD. The patient has been seen and treated by Ph.D. The patient continues to report significant symptoms including nightmares, flashbacks, mood lability, and chronic pain. The patient states that the psychological therapy “has literally saved my life”. The patient states he has been able to cope with his life much better. Flashbacks have reportedly decreased 60–70%. The patient’s attitude has changed significantly for the better. The patient has been able to discontinue Xanax as his anxiety has decreased. The patient reportedly completed a chronic pain management program which helped lessen his neck pain approximately 30–40%. The patient reports his work related injury was extremely traumatic and that his psychologist has told him that he will need therapy “for quite awhile”. The patient continues to have difficulty looking at himself in the mirror, talking to people he has just met or walking into a store where people can look at him; however, he reports that he is better able to handle it and does not get depressed like he did before secondary to therapy. The records indicate that the patient has completed 6 individual psychotherapy sessions since completing a chronic pain management program. A previous request for additional counseling was non-certified on 04/09/09 noting that the treatment has become merely “supportive counseling” at this time which is not an evidenced procedure for PTSD and due to a lack of objective progress in psychotherapy completed to date. The request was again non-certified on appeal on 04/16/09 noting that the issues raised by the initial reviewer were not addressed and no additional documentation was provided. The patient’s inability to benefit from previous individual psychotherapy and chronic pain management program reportedly presents a poor prognosis for the requested treatment.

### **Analysis and explanation of the decision include clinical basis, findings and conclusions used to support the decision.**

Based on the clinical information provided, the request for eight counseling sessions is not recommended as medically necessary. The patient has completed a course of individual psychotherapy with Ph.D.; however, there is no comprehensive assessment of objective progress achieved in therapy completed to date. The patient has additionally completed a chronic pain management program, and there is no indication for additional individual psychotherapy at this time based on a lack of sufficient progress to warrant continued treatment. The Official Disability

Guidelines Mental Illness and Stress Chapter support treatment for more than 6 sessions only with evidence of objective functional improvement. Given the current clinical data, the request for eight counseling sessions is not indicated as medically necessary at this time.

**A description and the source of the screening criteria or other clinical basis used to make the decision:**

1. Official Disability Guidelines, Return To Work Guidelines (2009 Official Disability Guidelines, 14th edition) Integrated with Treatment Guidelines (ODG Treatment in Workers' Comp, 7th edition) Accessed Online