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DATE OF REVIEW: Jun/22/2009

IRO CASE #:

DESCRIPTION OF THE SERVICE OR SERVICES IN DISPUTE:
Repeat Psychological Interview, Cognitive Behavioral Therapy x 8 Sessions (90801, 90806)

DESCRIPTION OF THE QUALIFICATIONS FOR EACH PHYSICIAN OR OTHER HEALTH CARE PROVIDER WHO REVIEWED THE DECISION:
MD, Board Certified by the American Board of Psychiatry and Neurology

REVIEW OUTCOME:

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

[ ] Upheld (Agree)

[X] Overturned (Disagree)

[ ] Partially Overturned (Agree in part/Disagree in part)

INFORMATION PROVIDED TO THE IRO FOR REVIEW

PATIENT CLINICAL HISTORY SUMMARY
The patient is a female who injured her left shoulder at work on xx-xx-xx when she was lifting trays with her left hand. She had a previous injury to her right shoulder and back, had surgery and treatment for this injury, including a work-hardening program. She has had surgery and other therapies for the left shoulder as well. She had 6 sessions of IPT with LMSW. She showed slight improvement in her depression. At termination, she still had an elevated BDI and BAI. Her attending physician on 3/36/2009 specified that she needed additional psychotherapy to address her anger and anxiety. A designated doctor evaluation concurred that she had not reached MMI at this time. Her therapist and treating physician requested a psychological interview and 8 additional sessions of CBT. The services were denied on two occasions.

ANALYSIS AND EXPLANATION OF THE DECISION INCLUDING CLINICAL BASIS, FINDINGS AND CONCLUSIONS USED TO SUPPORT THE DECISION
The therapy notes from, LMSW, of the 6 treatment sessions provided to the patient, were reviewed. The notes reveal that the patient has significant complex psychosocial issues that clearly are increasing her anxiety and aggravating her perception of pain. Ms. was able to begin an exploration of these factors in the 6 sessions allowed, with a slight improvement of patient's functioning. However, it is clear from the records reviewed that more needs to be accomplished. This reviewer disagrees with the previous reviewer that the request is redundant. She has not reached MMI and her attending doctor agrees that she would benefit from additional psychotherapy. Because these psychosocial issues are impeding the patient's recovery from injury, addressing them with 8 more sessions of CBT is consistent with ODG guidelines. The reviewer finds that medical necessity exists for Repeat Psychological Interview, Cognitive Behavioral Therapy x 8 Sessions (90801, 90806).

A DESCRIPTION AND THE SOURCE OF THE SCREENING CRITERIA OR OTHER CLINICAL BASIS USED TO MAKE THE DECISION

[ ] ACOEM-AMERICA COLLEGE OF OCCUPATIONAL & ENVIRONMENTAL MEDICINE UM KNOWLEDGEBASE

[ ] AHCPR-AGENCY FOR HEALTHCARE RESEARCH & QUALITY GUIDELINES

[ ] DWC-DIVISION OF WORKERS COMPENSATION POLICIES OR GUIDELINES

[ ] EUROPEAN GUIDELINES FOR MANAGEMENT OF CHRONIC LOW BACK PAIN

[ ] INTERQUAL CRITERIA

[X] MEDICAL JUDGEMENT, CLINICAL EXPERIENCE AND EXPERTISE IN ACCORDANCE WITH ACCEPTED MEDICAL STANDARDS

[ ] MERCY CENTER CONSENSUS CONFERENCE GUIDELINES

[ ] MILLIMAN CARE GUIDELINES

[X] ODG-OFFICIAL DISABILITY GUIDELINES & TREATMENT GUIDELINES

[ ] PRESSLEY REED, THE MEDICAL DISABILITY ADVISOR

[ ] TEXAS GUIDELINES FOR CHIROPRACTIC QUALITY ASSURANCE & PRACTICE

PARAMETERS

[ ] TEXAS TACADA GUIDELINES

[ ] TMF SCREENING CRITERIA MANUAL

[ ] PEER REVIEWED NATIONALLY ACCEPTED MEDICAL LITERATURE (PROVIDE A DESCRIPTION)

[ ] OTHER EVIDENCE BASED, SCIENTIFICALLY VALID, OUTCOME FOCUSED GUIDELINES (PROVIDE A DESCRIPTION)