

SENT VIA EMAIL OR FAX ON  
May/19/2011

## True Resolutions Inc.

An Independent Review Organization  
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### NOTICE OF INDEPENDENT REVIEW DECISION

**DATE OF REVIEW:**

May/18/2011

**IRO CASE #:**

**DESCRIPTION OF THE SERVICE OR SERVICES IN DISPUTE:**

Cognitive Behavioral Therapy 1 x 12

**DESCRIPTION OF THE QUALIFICATIONS FOR EACH PHYSICIAN OR OTHER HEALTH CARE PROVIDER WHO REVIEWED THE DECISION:**

Certified by the American Board of Psychiatry and Neurology with additional qualifications in Child and Adolescent Psychiatry

Licensed by the Texas State Board of Medical Examiners

**REVIEW OUTCOME:**

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

- Upheld (Agree)
- Overturned (Disagree)
- Partially Overturned (Agree in part/Disagree in part)

**INFORMATION PROVIDED TO THE IRO FOR REVIEW**

**PATIENT CLINICAL HISTORY SUMMARY**

The claimant is a man who sustained a very significant traumatic brain injury while working on xx/xx/xx when he fell a distance of 95 feet from a billboard sign. He suffered brain trauma as well as internal injuries, fractures of the right femur and pelvis. He was placed in a drug-induced coma for 6 weeks. His CT scan of the brain revealed subarachnoid hemorrhage and a left parietal subdural hematoma. Follow-up imaging showed bi-frontal contusions and evidence of burr holes in the right frontal areas. He has received cognitive therapy for over 100 sessions, and a request has been made to continue at least 12 more weekly sessions. His psychiatrist wrote an appeal letter that documents that he has shown objective signs of functional improvement so far. Specifically, his behavioral, cognitive and emotional dysfunction have stabilized and improved. He is more accepting of his limitations in his activities of daily living. His wife has now been engaged as his overseer to handle executive functioning, supervise his medication and also to be sure that he does not operate a motor vehicle nor secretly spend the family's money. He has been increasingly compliant with treatment. His mood has stabilized and improved and his ability to sleep has likewise

increased, but with difficulty and multiple medication changes. His current goals are to continue improvement in ADL's , increase acceptance of limitations both cognitive and physical, develop a greater understanding of the impact of his injuries and his capabilities and capacities and move closer to acceptance of them. Grooming has improved considerably as well. The insurance company reviewer has denied the request for additional sessions citing ODG limiting the number of sessions to 50. The psychiatrist is requesting an exception under Appendix D.

**ANALYSIS AND EXPLANATION OF THE DECISION INCLUDING CLINICAL BASIS, FINDINGS AND CONCLUSIONS USED TO SUPPORT THE DECISION**

The psychiatrist is correct that ODG Appendix D does allow additional treatment in exceptional cases. This gentleman clearly falls into such a category. As pointed out in the rebuttal, it is amazing that the patient is even alive, as apparently a co-worker died in the accident. Clearly, this patient has extenuating circumstances not normally addressed by ODG. His severe traumatic brain injury is life-long, and will continue to need treatment. He seems to continue to progress with treatment. However, even if he were no longer to improve with treatment, it is likely that he would regress without it. This will necessitate continuation of his present treatment for some time into the future to prevent his condition from deteriorating. The request is medically necessary.

**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

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

MERCY CENTER CONSENSUS CONFERENCE GUIDELINES

MILLIMAN CARE GUIDELINES

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)