

SENT VIA EMAIL OR FAX ON
Jan/20/2012

Applied Assessments LLC

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NOTICE OF INDEPENDENT REVIEW DECISION

DATE OF REVIEW:

Jan/20/2012

IRO CASE #:

DESCRIPTION OF THE SERVICE OR SERVICES IN DISPUTE:

Individual Psychotherapy 1 X 6 weeks

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

Anesthesiology/Pain Management

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

OD Guidelines

Behavioral health treatment pre-authorization request

Initial pre-auth UR review 12/12/11

Reconsideration behavioral health treatment pre-authorization request

Appeal pre-auth UR review 12/28/11

Psychological assessment report 11/10/11

PATIENT CLINICAL HISTORY SUMMARY

The claimant is a male who reportedly was injured on xx/xx/xx. The records indicate he was walking in a field then fell in a hole that swallowed him. The claimant indicated that he impulsively twisted and grabbed the fence and was able to avoid going down the hole. Claimant reported that the sudden nature of the fall and the idea of being swallowed into a bottomless pit were very frightening and he thought he was going to die. He could not yell because his voice did not come out. He stated he was in pain feeling as the bottom half of his body was torn but he was finally able to pull himself up to safety. There was nobody with

him and he had to reach his supervisor to report the incident. Claimant stated he has been in this state of constant fear and lost all confidence in himself. He mentioned he has nightmares every night about falling in the pit. Medications were listed as hydrocodone-acetaminophen 5-500mg, Paxil 20mg, naproxen 500mg, cyclobenzaprine 10mg, Cymbalta 10mg. The records indicate the claimant scored 21 on BDI 2 indicating moderate depression. BAI score was 36 reflecting severe anxiety. Responses on the fear avoidance beliefs questionnaire (FABQ) showed significant fear avoidance of work as well as significant fear avoidance of physical activity in general. The civilian PTSD checklist was positive for post traumatic stress disorder. It was noted that the claimant responded to the MMPI2 items in an inconsistent manner. His profile is likely to be invalid. He may have responded in a random manner or may have consistently misrecorded responses on the answer sheet. Per psychological assessment on 11/10/11 the claimant was recommended to be evaluated for psychopharmacologic treatment and receive authorization for initial six individual psychotherapy sessions to address the diagnosed axis 1 problems including pain disorder associated with both psychological factors and general medical condition acute, major depressive disorder, single episode, severe, without psychotic features, and post traumatic stress disorder, acute.

A pre-authorization request for individual psychotherapy one times six weeks was reviewed on 12/12/11 and non-certification was recommended. The reviewer discussed the case and requested procedure with Dr.. The clinical indication and necessity of the procedure could not be established. Mental health evaluation of 11/10/11 (two months post injury) finds impressions of pain disorder, major depressive disorder and PTSD, acute. However, the psychometric assessment is inadequate/inappropriate to elucidate the pain problem, explicate psychological dysfunction, or inform differential diagnosis in this case; and there is no substantive behavioral analysis to refine relevant clinical/diagnostic information. With respect to pain complaints there is no evidence of delayed recovery from the injury in this case and no submitted medical documentation in this regard, or that antecedent, specific psychosocial risk factors may contribute this thus requiring psychological or behavioral services to resolve or reduce. Non-approval is recommended.

An appeal request for individual psychotherapy once a week x 6 weeks was reviewed on 12/28/11, and again adverse determination recommended. The request was discussed with Dr. including treatment goals, treatment history and claimant's psychological symptoms. The reviewer noted there was not adequate review of claimant's current psychological symptoms. The claimant is diagnosed with PTSD after minimal psychological data for this diagnosis. It was noted the claimant's MMPI profile was invalid. Researchers indicate invalid MMPI-II often indicates symptom magnification and / or malingering. The psychological risk factors were not adequately assessed in the evaluation. Without adequate psychological evaluation of the psychological risk factors (possible source of psychological symptoms), the appropriateness of the request cannot be determined. Furthermore, it was reported this is 3 month old injury and evaluation does not identify specific behavior or psychological findings that suggest risk factors for labor covering or chronicity. There is no evidence these symptoms constitute delay in the "usual time of recovery" for this acute injury. There is no evidence the claimant "is at risk" for delayed recovery. The request is not consistent with requirement of psychological treatment only be provided for "appropriately identified patient." Adverse determination was recommended.

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

Based on the clinical information provided, the request for individual psychotherapy once a week for 6 weeks is not indicated as medically necessary, and the two previous denials are upheld. The claimant was noted to have sustained injury when he slipped and fell into hole and was able to keep from falling completely in by grabbing onto fence. The claimant stated he thought he was going to die and could not yell because his voice would not come out. It was noted the claimant's evaluation revealed moderate depression and severe anxiety. PTSD check list was positive for posttraumatic stress. However, the claimant's MMPI-II profile was likely to be invalid. Researchers indicate invalid MMPI-II often indicates symptom

magnification and/or malingering. Given the current clinical data, the requested individual psychotherapy is not indicated as 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)