

Pure Resolutions LLC

An Independent Review Organization

Phone Number:
(817) 779-3288

990 Hwy. 287 N. Suite 106 PMB 133
Mansfield, TX 76063

Fax Number:
(817) 385-9613

Email: pureresolutions@irosolutions.com

Review Outcome:

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

Psychiatry

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)

Description of the service or services in dispute:

Continued Individual Psychotherapy x 4, 1 X 4

Patient Clinical History (Summary)

The patient is a female whose date of injury is xx/xx/xx.. The patient sustained a broken nose and facial contusions. Re-evaluation dated 07/31/14 indicates that BDI is 28 and BAI is 33. Baseline scores were noted to be BDI 22 and BAI 13. Current FABQ-PA is 21 and FABQ-W is 36. Current medication is ibuprofen. MMPI results indicate that the profile should be interpreted with caution. There is some possibility that the clinical report is an exaggerated picture of the patient's present situation and problems. The patient is presenting an unusual number of psychological symptoms. Diagnoses are adjustment disorder with mixed anxiety and depressed mood; pain disorder associated with both psychological factors and a general medical condition; acute stress reaction.

The initial request for continued individual psychotherapy was non-certified on 08/22/14 noting that there are indications of symptom exaggeration that must be evaluated and ruled out based on MMPI assessment prior to further treatment. Reconsideration dated 10/24/14 indicates that she reports experiencing psychosocial stressors as direct consequences from the work related injury she experienced. The denial was upheld on appeal dated 10/09/14 noting that the physical examination included a provisional diagnosis of posttraumatic stress disorder, although the symptoms do not support this. MMPI test results were of questionable accuracy.

Analysis and Explanation of the Decision include Clinical Basis, Findings and Conclusions used to support the decision.

The patient sustained injuries on xx/xx/xx. The number of individual psychotherapy sessions completed to date is not documented. The Official Disability Guidelines support ongoing individual psychotherapy only if progress is being made. The patient's Beck scales are noted to have increased since the initial assessment. The submitted records indicate that MMPI testing indicates that the profile should be interpreted with caution. There is some possibility that the clinical report is an exaggerated picture of the patient's present situation and problems. The patient is presenting an unusual number of psychological symptoms. There is no indication that the patient has been assessed for psychotropic medications. Therefore, medical necessity is not established in accordance with Official Disability Guidelines Mental Illness and Stress Chapter. As such, it is the opinion of the reviewer that the request for continued individual psychotherapy x 4, 1 x 4 is not recommended 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 and Environmental Medicine um
- knowledgebase AHCPH-Agency for Healthcare Research and Quality Guidelines
- DWC-Division of Workers Compensation Policies and
- Guidelines European Guidelines for Management of Chronic
- Low Back Pain Interqual Criteria
- Medical Judgment, Clinical Experience, and expertise in accordance with accepted medical standards
- Mercy Center Consensus Conference Guidelines
- Milliman Care Guidelines
- ODG-Official Disability Guidelines and Treatment
- Guidelines Pressley Reed, the Medical Disability Advisor
- Texas Guidelines for Chiropractic Quality Assurance and 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)