

STATE OF MICHIGAN
DEPARTMENT OF INSURANCE AND FINANCIAL SERVICES
Before the Director of the Department of Insurance and Financial Services

In the matter of:

Anthony Petrilli
Petitioner

File No. 21-1121

v

Citizens Insurance Company of the Midwest
Respondent

Issued and entered
this 1st day of October 2021
by Sarah Wohlford
Special Deputy Director

ORDER

I. PROCEDURAL BACKGROUND

On August 11, 2021, Anthony Petrilli (Petitioner) filed with the Department of Insurance and Financial Services (Department) a request for an appeal pursuant to Section 3157a of the Insurance Code of 1956 (Code), 1956 PA 218, MCL 500.3157a. The request for an appeal concerns the determination of Citizens Insurance Company of the Midwest (Respondent) that the Petitioner rendered or ordered inappropriate treatment, products, services, or accommodations under Chapter 31 of the Code, MCL 500.3101 to MCL 500.3179.

The Respondent issued the Petitioner a written notice of the Respondent's determination under R 500.64(1) on May 27, 2021, June 17, 2021, and July 9, 2021. The Petitioner now seeks reimbursement in the full amount it billed for the dates of service at issue.

The Department accepted the request for an appeal on August 13, 2021. Pursuant to R 500.65, the Department notified the Respondent and the injured person of the Petitioner's request for an appeal on August 12, 2021 and provided the Respondent with a copy of the Petitioner's submitted documents. The Respondent filed a reply to the Petitioner's appeal on August 20, 2021. Both parties were provided a written notice of extension on September 17, 2021.

The Department assigned an independent review organization (IRO) to analyze issues requiring medical knowledge or expertise relevant to this appeal. The IRO submitted its report and recommendation to the Department on September 20, 2021.

II. FACTUAL BACKGROUND

This appeal concerns the denial of payment for psychotherapy treatments rendered between March 16, 2021 and May 17, 2021. On May 3, 2021, June 17, 2021, and July 9, 2021, the Respondent issued determinations to the Petitioner stating that the psychotherapy treatments were not medically necessary. The Respondent stated that its denial is based on progress notes lacking “specific information regarding the evidence-based therapy being used.”

With its appeal request, the Petitioner included a final treatment report from July 8, 2021 that indicated the injured person’s diagnoses included organic affective disorder, post-concussion syndrome, chronic PTSD, and TBI with a history of motor vehicle accident in January 2004. In a letter included with its appeal request, the Petitioner stated that the injured person had “decreased concentration, poor judgement, impaired memory, loss of social abilities, and decreased ability to problem solve.” The letter further stated that treatments provided for these areas included “social work, group therapy, individual psychotherapy, recreational therapy, and involvement with nursing staff.”

In its reply, the Respondent reaffirmed its denial of the psychotherapy treatments. The Respondent stated that medical records describe the treatment as “medication and case management” as opposed to “evidence-based therapy.” Further, the Respondent explained that the standard of care for individual psychotherapy must include “clear treatment plan, goals, method, measurement of efficacy, and duration.”

III. ANALYSIS

Director’s Review

Under MCL 500.3157a(5), a provider may appeal an insurer’s determination that the provider overutilized or otherwise rendered inappropriate treatment, products, services, or accommodations, or that the cost of the treatment, products, services, or accommodations was inappropriate under Chapter 31 of the Code. This appeal involves a dispute regarding inappropriate treatment.

The Director assigned an IRO to review the case file. In its report, the IRO reviewer concluded that, based on the submitted documentation, the psychotherapy treatments provided to the injured person on the dates of service at issue were not medically necessary based on medically accepted standards.

The IRO reviewer is a board-certified psychiatrist. In its report, the IRO reviewer referenced R 500.61(i), which defines “medically accepted standards” as the most appropriate practice guidelines for the treatment provided. These may include generally accepted practice guidelines, evidence-based practice guidelines, or any other practice guidelines developed by the federal government or national or professional medical societies, board, and associations. The IRO reviewer relied on Official Disability Guidelines for cognitive behavioral therapy and psychotherapy for post-traumatic stress for its recommendation.

The IRO reviewer explained that the Official Disability Guidelines recommend psychotherapy for up to 13-20 visits over 7-20 weeks, and up to 50 sessions for severe cases of Major Depression or PTSD. The IRO reviewer noted that the injured person was being treated for organic affective disorder, post-concussion syndrome, chronic PTSD, and TBI. The IRO reviewer opined, based on submitted documentation, the injured person “clearly has psychiatric needs[.]”

The Petitioner submitted treatment plans with its appeal request. However, the IRO reviewer opined that submitted documentation does not include clear treatment goals, recognized measure of efficacy, or description of the method and planned duration of treatment that would be expected for adult psychotherapy. The IRO reviewer opined that treatment notes failed to establish the injured person’s progress in psychotherapy. Further, the IRO reviewer opined that, based on submitted documentation, medical necessity could not be established for the psychotherapy treatments at issue.

Based on the above, the IRO reviewer recommended that the Director uphold the Respondent’s determination that the psychotherapy treatments provided between March 16 through May 17, 2021 were not medically necessary in accordance with medically accepted standards, as defined by R 500.61(i).

IV. ORDER

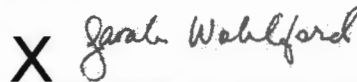
The Director upholds the Respondent’s determinations dated May 3, June 17, and July 9, 2021.

This order applies only to the treatment and dates of service discussed herein and may not be relied upon by either party to determine the injured person’s eligibility for future treatment or as a basis for action on other treatment or dates of service not addressed in this order.

This is a final decision of an administrative agency. A person aggrieved by this order may seek judicial review in a manner provided under Chapter 6 of the Administrative Procedures Act of 1969, 1969 PA 306, MCL 24.301 to 24.306. MCL 500.244(1); R 500.65(7). A copy of a petition for judicial review should be sent to the Department of Insurance and Financial Services, Office of Research, Rules, and Appeals, Post Office Box 30220, Lansing, MI 48909-7720.

Anita G. Fox
Director
For the Director:

 Recoverable Signature



Sarah Wohlford
Special Deputy Director
Signed by: Sarah Wohlford

STATE OF MICHIGAN
DEPARTMENT OF INSURANCE AND FINANCIAL SERVICES

Before the Director of the Department of Insurance and Financial Services

In the matter of:

Anthony Petrilli, M.D.

Case No. 21-1121

Petitioner,

v

Citizens Insurance Company of the Midwest

Respondent.

Petitioner:
Anthony Petrilli, M.D.
PO Box 361038
Grosse Pointe Farms, MI 48236
Email: shooshiv@sbcglobal.net
Phone: 586-582-7979

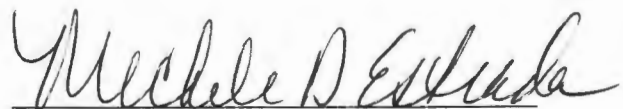
Respondent:
Citizens Insurance Company of the Midwest
440 Lincoln Street, S301
Worcester, MA 01615
Email: CICA-URAPPEALS@hanover.com
Phone: 508-755-5789

CERTIFICATE OF SERVICE

I certify that on October 1, 2021, I served a copy of the ORDER issued October 1, 2021, upon the following parties by fax and email only:

Petitioner via Anthony Petrilli, M.D. at: shooshiv@sbcglobal.net

Respondent via Citizens Insurance Company of the Midwest at: CICA-URAPPEALS@hanover.com



Michele D. Estrada
Legal Secretary
DIFS-Office of Research, Rules, and Appeals

Notice of Independent Review Recommendation

SENT TO: State of Michigan, Department of Insurance and Financial Services
Attn: Alison Porter
Email: portera8@michigan.gov

September 20, 2021:

RE: Case Number: 21-1121
Provider: Anthony Petrilli, MD
Insurer: Citizens Insurance Company of America
Name: Mevludie Kullolli
Date of Service: 03/16/2021 thru 05/17/2021
Type of Review: Utilization Review
Date Notice Received: 09/13/2021
Date of Recommendation: 09/20/2021

MET Healthcare Solutions (MET) has been certified as an Independent Review Organization by the State of Michigan, Department of Insurance and Financial Services. The case noted above has been assigned to MET (the IRO) for an independent review in accordance with the State of Michigan, Department of Insurance and Financial Services (DIFS) codes and applicable regulations for utilization reviews. MET has performed an independent review of the proposed/rendered care to determine if the adverse determination was appropriate. In the performance of the review, the medical records and documentation provided to MET have been reviewed by the assigned reviewer of this case.

This case was reviewed by a board-certified **Psychiatrist**. The reviewer has signed a certification statement stating that no known conflicts of interest exist between the reviewer and the patient, the patient's insurance carrier, the utilization review agent (URA), any of the treating physicians or health care providers who provided care to the patient, the maker or producer of any of the requested products, or the URA or insurance carrier health care providers who reviewed and issued the denial before referral to the IRO. In addition, the reviewer has certified that the review was performed without bias for or against any party to the dispute.

As an officer of MET Healthcare Solutions, I certify that there is no known conflict between the reviewer, the IRO and/or any officer/ employee of the IRO with any person or entity that is a party to the dispute, and the written recommendation was sent to the DIFS on 09/20/2021.

Sincerely,

Stacy Jones
COO

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Independent Review
Organization
Expires 06/30/2022

Date of Recommendation: 09/20/2021

Appeals Section File No: 21-1121

DESCRIPTION OF THE SERVICE OR SERVICES IN DISPUTE:

Psychotherapy treatments provided on 03/16/2021 thru 05/17/2021

A DESCRIPTION OF THE QUALIFICATIONS FOR EACH REVIEWER WHO PROVIDED THE RECOMMENDATION:

The adverse determination for the above described service(s) in dispute was reviewed by a board-certified **Psychiatrist** considered an expert in their field of specialty with current hands on experience in the described service(s).

REVIEW OUTCOME:

It is the recommendation of the Reviewer that the previous adverse determinations should be upheld.

INFORMATION PROVIDED TO THE IRO FOR REVIEW:

Master Treatment Plan by Dawn Perry dated 01/05/2021
Progress Note - Psychotherapeutic Half Session from St. John Health dated 03/16/2021, 04/27/2021 (telemedicine)
Progress Note – Extended Psychotherapeutic Session from St. John Health dated 04/07/2021, 04/12/2021, 04/13/2021, 04/15/2021, 04/19/2021, 04/22/2021, and 04/26/2021
Progress Note – Collateral Psychotherapeutic Session from St. John Health dated 04/08/2021
Progress Note – Psychotherapeutic Full Session from St. John Health dated 04/14/2021 and 04/21/2021
MI UR Determination Letter from MedLogix dated 05/27/2021, 06/17/2021, and 07/09/2021
Weekly Treatment Plan by Dawn Perry dated 07/08/2021
Letter by Anthony Petrilli, M.D., P.C. dated 07/12/2021, and 07/19/2021
No-Fault Utilization Review Provider Appeal Request by Anthony Petrilli, MD dated 07/12/2021, 08/02/2021 and 08/11/2021
MI UR Appeal Response from MedLogix dated 08/18/2021
No-Fault Utilization Review Insurer Reply to Provider Appeal from DIFS Michigan Department dated 08/20/2021
Assignment Letter from State of Michigan Department of Insurance dated 09/13/2021

CLINICAL HISTORY [SUMMARY]:

The claimant is a 60-year-old female diagnosed with TBI, migraines, HTN, hypothyroidism, chronic back and neck pain, GERD, arthritis and a history of motor vehicle accident in 2004.

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Organizations
External
Version: 08-01-2020

Progress Note - Psychotherapeutic Half Session from St. John Health dated 03/16/2021 documented Dr. Petrilli stating "Patient is aware of M.D.'s absence, which will begin in few hours. She is tearful but realistic. Patient has called MD.'s house several times and urged to do so if she cannot connect with case manager, family, or coverage, etc. Daughter, as noted, is receiving therapy and will leave all prescriptions to other M.D.'s secondary to patient's daughter desiring Benzodiazepines. No suicidal-homicidal ideation. Cognitive behavioral therapy, support. Still showing problems with sleep, interests, daily life activities, guilt, sexuality, energy, concentration, cognition, appetite, psychomotor activity. No gross symptoms of psychosis, inappropriate affect, thought disturbance, schizophrenic traits or paranoia."

Progress Note – Extended Psychotherapeutic Session from St. John Health dated 04/07/2021 documented Dr. Petrilli stating "Patient still feels uncomfortable in her home (son's) but significant issues she is dealing with involve her daughter's motor vehicle accident and sequelae. Patient paintings have flair of hypomania (as in past) and MD, very pleased that patient using painting which she finds positive and stimulating."

Progress Note – Collateral Psychotherapeutic Session from St. John Health dated 04/08/2021 documented Dr. Petrilli stating "Follow up with patient's significant swings that thus far are minimal and relatively brief. Some areas patient is irritated by are realistic, especially with limits on heat/electricity etc., which son does not address in patient's favor."

Progress Note – Extended Psychotherapeutic Session from St. John Health dated 04/13/2021 documented Dr. Petrilli stating "Patient is off Pruzo. She is taking Wellbutrin. XR, 300 milligrams, one in the morning, Zoloft, 100, two every night; Immitrix; Lirica 100, three times a day; Vitamin D, 50,000 milligrams; Lipitor 40; Synthroid, 0.1; Lisinopril, 12.5; Buspar, 15, four times a day; Lamictal, 100, one every night; Inderal, L.A., 60; Seroquel, 400; Nucynta, ER, 200, twice a day; Voltaren gel. Patient on Climovig (questionable spelling-) by Dr. Sable which provides questionable results. Patient still having bad headaches, three times a week, although only has one headache that is severe and she uses Imitrex for this."

Progress Note – Psychotherapeutic Full Session from St. John Health dated 04/14/2021 documented Dr. Petrilli stating "Medication review of patient on 4-13-21 re-emphasized by MD to patient with regard to better control of mood disorder and prevention or reduction of cycling that mood stabilizer, as Lamictal and Seroquel, help (and that single use of anti-depressants may worsen) Nucynta (pain medication) reflects avoidance of Benzodiazepines and ergo use of Buspar and/or Inderal, which patient finds very helpful. Latter also positive regarding panic, anxiety, post -traumatic stress disorder, etc. Clinical status review indicates problems with mood, self-esteem; appetite, concentration, and isolation, etc., despite her general overview not psychotic regarding depression."

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External
Expires 06/30/2022

Progress Note – Psychotherapeutic Full Session from St. John Health dated 04/21/2021 documented Dr. Petrilli stating “Patient notes slight increase in physical issues, such as headaches, and also is reluctant to follow up with walks. Etc., as in past. No suicidal-homicidal ideation of active type. No symptoms or gross psychosis, such as inappropriate affect, thought disturbance, schizophrenia traits, or paranoia.”

Letter by Anthony Petrilli, M.D., P.C. dated 07/12/2021 documented Dr. Petrilli stating “In terms of your rejection for dates of service 3-16-21 through 4-26-21 and 4-28-21 through 5-17-21, I am filing an appeal. Patient is in dire need of psychiatric care and this is evidenced in the numerous progress notes that have been sent to you on three different occasions, per your request. These notes are detailed and thorough and include patient's medications. I have included a copy of the rejection, appeal request, additional supporting documentation, as well as treatment plan forms signed by this physician and interdisciplinary staff.”

Denial letter from MI UR Determination dated 08/18/2021 denied the request for Psychotherapy treatments provided on 03/16/2021 through 05/17/2021 stating “Denied per review of medical documentation. Treatment is not medically necessary.”

ANALYSIS AND EXPLANATION OF THE DECISION:

Q1. Were the psychotherapy treatments provided between March 16, 2021 through May 17, 2021 to the injured person medically necessary in accordance with medically accepted standards as defined by R500.61(i)? Please explain.

Ans1. The psychotherapy treatment provided between March 16, 2021 through May 17, 2021 was not medically necessary in accordance with medically accepted standards as defined by R500.61(i). According to the Official Disability Guidelines, psychotherapy is recommended up to 13-20 visits over 7-20 weeks (individual sessions), if progress is being made. In cases of severe Major Depression or PTSD, up to 50 sessions if progress is being made. In this case, the records indicate the claimant is being treated for Organic Affective Disorder; Post-Concussion Syndrome; PTSD, Chronic; and TBI. The treating provider submitted treatment plans, however, there does not appear to be clear treatment goals, recognized measures of efficacy, or description of the method and planned duration of treatment that would be expected in individual psychotherapy for an adult. While the injured person clearly has psychiatric needs, the medical records failed to establish she has made progress thus far in psychotherapy. Therefore, based on the referenced evidence-based guidelines, medical necessity for psychotherapy treatments provided between March 16, 2021 through May 17, 2021 cannot be established.

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CAPS# 00010020

**A DESCRIPTION AND THE SOURCE OF THE SCREENING CRITERIA OR OTHER CLINICAL BASIS
CONSIDERED IN REACHING THE RECOMMENDATION:**

1. ODG. Mental Illness and Stress. Cognitive Behavioral Therapy (CBT) for PTSD, Mental Illness and Stress. Last review/update: 02/12/2021
2. ODG. Mental Illness and Stress. Psychotherapy for Post-Traumatic Stress Disorder (PTSD), Mental Illness and Stress. Last review/update: 02/12/2021
3. American Psychiatric Association. Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition (DSM-5), American Psychiatric Association, Arlington 2013.

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External
EAB-06-01-2022