

To reply to this email [click here](#)

## PEER REVIEW REQUEST FORM

Date Submitted: 10/27/2022

Due Date/Time: 10/28/2022 03:00PM

Client Contact: Joel Razon, RN  
Phone:  
Fax:  
Email: Joel\_Razon@gbtpa.com

Peer Vendor: ExamWorks/NMR  
Peer Vendor eMail: clayton.langley@mitchell.com

Claimant: DJABY DOUCOURE

Employer: CROSS COUNTRY  
CONSTRUCTION  
Location: HUNTER ROBERTS  
CONSTRUCTION GRP -CCIP -  
005157

Claim #: 005157-001583-WC-01  
DOI: 03/09/2020  
DOB: 04/10/1973  
Received Date:

Carrier:  
Claims Examiner: CHRISTINE LEVAN  
Review #: 5913393  
TPA:

Requesting  
Provider: Juraci Da Silva, PHD  
Phone: (917) 667-9070  
Specialty: Psychology

# of Requests: 0  
Jurisdiction: NY  
Review Level: NY PAR Level 2  
Review Type: Prospective UR

### Medical Records:

| No | Document Type   | Provider or Sender   | Page Count | Service Start Date | Service End Date |
|----|-----------------|----------------------|------------|--------------------|------------------|
| 1  | UR Request      | Juraci Da Silva, PHD | 2          | 10/18/2022         | 10/18/2022       |
| 2  | Medical Records | Juraci Da Silva, PHD | 6          | 10/11/2022         | 10/11/2022       |

|                       |  |
|-----------------------|--|
| Treatment Requested:  | 90837: Psychotherapy, 60 minutes with patient - Psychotherapy, 14 sessions - for mood disorder and anxiety   |
| Diagnosis:            | F06.30 Mood disorder due to known physiological condition, unspecified; F06.4 Anxiety disorder due to known physiological condition; --F07.81 Post concussional syndrome |
| History of Condition: |  |
| Source/Criteria/Ref:  | New York Medical Treatment Guidelines /  |
| Citation:             |  |

|                     |  |
|---------------------|--|
|                     |  |
| Conclusion:         |  |
| Client Instructions | <p>Guideline Variance: IW was referred for a psychological evaluation due to problems with depression, anxiety, and sleeping difficulty, along with symptoms of postconcussion syndrome (PCS). The reported onset of these symptoms followed a work-related accident on 03/09/20. IW describes the incident as traumatic. He says that he never recover from the incident. He underwent surgery in his back (2022), neck (2021), and left knee (2020). He shares that his pain continues. He fears that he will need more surgery. He complains that he has memory loss and cannot concentrate on what he tries to do and he reports that he is emotionally affected. He has difficulty sleeping because of pain and worries about the future. He shares that he gets easily irritable and tends to be impatient and angry. Overall, IW is experiencing feelings of overwhelming, ruminative anxiety, and not feeling himself. He feels like he is not the same person and he struggles daily. These symptoms continue to interfere with his daily functioning. Per Beck Depression Inventory and Beck Anxiety Inventory, indicates that he consciously admits to severe levels of clinical depression and he consciously admits high levels of clinical anxiety accompanied by an inability to relax, and fear of the worst happening. He came transferred from Dr. Robins' office where he used to receive psychotherapy for depression, anxiety, and PTSD.-- Unable to determine prior total Psychotherapy visit attended and response to treatment. May exceeds recommended number of visits per guidelines.</p> <p>NYS WCB MTG – Work-Related Depression and Depressive Disorders-B.3.b.i Cognitive Behavioral Therapy (CBT)</p> <p>PA Due Date/Time: 10/28/2022 3:00PM CST</p> <p>Requesting Provider Name/Specialty: Dr. Juraci Da Silva/Psychology</p> <p>Compensable (Accepted) Body Part/s: left knee, Post-Concussion syndrome and depression</p> <p>MOI: EE explains he was conducting a stripping operation on the east perimeter of the 4th floor when the panel fell on top of him causing pain to his left knee. IW states he does not want medical attention at this time only that it is sore and wants me to be aware of it.</p> <p>Request: 90837: Psychotherapy, 60 minutes with patient - Psychotherapy, 14 sessions - for mood disorder and anxiety</p> |

#### Treatment Request Details:

| DOS Start Date | DOS End Date | Treatment     | Description Text   | CPT   | Req Units | Auth Units | Body Part                            | Determination | Guideline |
|----------------|--------------|---------------|--|-------|-----------|------------|--------------------------------------|---------------|-----------|
|                |              | Psychotherapy | 90837: Psychotherapy, 60 minutes with patient - Psychotherapy, 14 sessions - for mood disorder and anxiety | 90837 | 14        |            | No Physical Injury - Mental disorder |               |           |

## NMR #746975 (Pre-Referral)

[Click here to print](#)

### Comments

|                                  |  |
|----------------------------------|--|
| <b>Client Due Date</b>           | 10/28/2022 3:00 PMCDT  |
| <b>Referrer</b>                  | Starling, Debra  |
| <b>Referrer Phone</b>            | (615) 778-5135   |
| <b>Referrer Email</b>            | debra_starling@gbtpa.com   |
| <b>Client</b>                    | GALL-WC-GALL1 - GALLAGHER BASSETT - PEER REVIEWS   |
| <b>Turnaround Type</b>           | Standard   |
| <b>Date Created</b>              | 10/27/2022 3:37 PMCDT  |
| <b>Referral Type</b>             | Peer Review  |
| <b>Line of Business</b>          | Work Comp  |
| <b>Review Type</b>               | Medical Necessity  |
| <b>Review Level</b>              | NY PAR Level 2   |
| <b>Review is Addendum</b>        |  |
| <b>Review Timing</b>             | Prospective UR   |
| <b>State of Jurisdiction</b>     | NY   |
| <b>Last Name</b>                 | Doucoure   |
| <b>First Name</b>                | Djaby  |
| <b>Claim Number</b>              | 005157-001583-WC-01  |
| <b>Gender</b>                    | Unknown  |
| <b>Date of Birth</b>             | 4/10/1973  |
| <b>Job Title</b>                 |  |
| <b>Date of Disability/Injury</b> | 3/9/2020   |
| <b>Diagnosis(es)</b>             | F06.30 Mood disorder due to known physiological condition, unspecified; F06.4 Anxiety disorder due to known physiological condition; --F07.81 Post concussional syndrome |
| <b>Previous Treatment</b>        |  |
| <b>Review Period</b>             |  |
| <b>SSN</b>                       |  |

Guideline Variance: IW was referred for a psychological evaluation due to problems with depression, anxiety, and sleeping difficulty, along with symptoms of postconcussion syndrome (PCS). The reported onset of these symptoms followed a work-related accident on 03/09/20. IW describes the incident as traumatic. He says that he never recover from the incident. He underwent surgery in his back (2022), neck (2021), and left knee (2020). He shares that his pain continues. He fears that he will need more surgery. He complains that he has memory loss and cannot concentrate on what he tries to do and he reports that he is emotionally affected. He has difficulty sleeping because of pain and worries about the future. He shares that he gets easily irritable and tends to be impatient and angry. Overall, IW is experiencing feelings of overwhelming, ruminative anxiety, and not feeling himself. He feels like he is not the same person and he struggles daily. These symptoms continue to interfere with his daily functioning. Per Beck Depression Inventory and Beck Anxiety Inventory, indicates that he consciously admits to severe levels of clinical depression and he consciously admits high levels of clinical anxiety accompanied by an inability to relax, and fear of the worst happening. He came transferred from Dr. Robins' office where he used to receive psychotherapy for depression, anxiety, and PTSD.-- Unable to determine prior total Psychotherapy visit attended and response to treatment. May exceeds recommended number of visits per guidelines. NYS WCB MTG Work-Related Depression and Depressive Disorders-B.3.b.i Cognitive Behavioral Therapy (CBT)PA Due Date/Time: 10/28/2022 3:00PM CSTRequesting Provider Name/Specialty: Dr. Juraci Da Silva/PsychologyCompensable (Accepted) Body Part/s: left knee, Post-Concussion syndrome and depressionMOI: EE explains he was conducting a stripping operation on the east perimeter of the 4 floor when the panel fell on top of him causing pain to his left knee. IW states he does not want medical attention at this time only that it is sore and wants me to be aware of it.Request: 90837: Psychotherapy, 60 minutes with patient - Psychotherapy, 14 sessions - for mood disorder and anxiety

### Case Summary

**Location** HUNTER ROBERTS CONSTRUCTION GRP -CCIP - 005157

**Employer** CROSS COUNTRY CONSTRUCTION

**Street**

**City**

State  
Zip Code

Contact Provider(s) No  
Provider Specialty Psychology  
Provider Phone Number (917) 667-9070  
Number of Questions 1

Question 01  
Special Requirements

Attachments

Client Uploads  
No Document Attached

Documentation Reviewed  
ref.DO-00-2169-510\_10-18-2022-21-23\_2.pdf  
ref.DO-00-2169-512\_10-18-2022-21-23\_1.pdf  
ref.R.doc

Reports  
No Document Attached



Listed below are details of a Prior Authorization Request (PAR) that was submitted to request confirmation that the proposed treatment(s)/test(s) are based on a correct application of the Medical Treatment Guidelines. Upon identification of the claim administrator, they will be required to respond within 8 business days; parties will be notified of the outcome.

**CLAIM INFORMATION**

| WCB Case # | Date of Injury | Claim Admin Claim # |
|------------|----------------|---------------------|
| G2718838   | 03/09/2020     | 005157001583WC01    |

**Patient Name** Doucoure, Djaby

**Address** 1310 SHERIDAN AVE#6G  
Bronx, NY 104561308

**SSN** XXX-XX-7893

**DOB** 04/10/1973

**Gender** Male

**Employer Name** CROSS COUNTRY CONSTRUCTION LLC

**Address** 5 W MAIN ST STE 103  
ELMSFORD, NY 105232449

**Insurer Name** Arch Indemnity Insurance Co.

**Insurer ID** W036885

**Address** 300 PLAZA THREE 3RD FLOOR  
JERSEY CITY, NJ 07311-1107

**Claim Admin Name** Gallagher Bassett Services Inc

**Claim Admin ID** T100033

**Address**

**HEALTH CARE PROVIDER INFORMATION**

**Name** Da Silva, Juraci

**Address** 55 West 39th Street, Suite 305  
New York, NY 10018

**Type** Psychologist

**WCB Auth #** S18633-8

**NPI** 1255774766

**PRIOR AUTHORIZATION REQUEST DETAILS**

| 1. | Body Part | MTG Reference Code and Description                                   | CPT Code and Description                      |
|----|-----------|--|---|
|    | Other     | Depression - B.3.b.i: Treatment - Cognitive Behavioral Therapy (CBT) | 90837: Psychotherapy, 60 minutes with patient |

**STATEMENT OF MEDICAL NECESSITY / SUPPORTING MEDICAL DOCUMENTATION**

Statement of Medical Necessity: Please see attached detail evaluation.  
Supporting documentation was provided as a part of this request.

Supporting documentation was provided as a part of this request.

**PROVIDER'S ATTESTATION**

By submission of this request for prior authorization, I certify that my statements are true and correct, and I do not have a substantially similar request pending.

**Provider Name** Da Silva, Juraci

**Date** 10/18/2022



JM D4 SILIA  
PSYCHOLOGICAL SERVICES

*55 West 39<sup>th</sup> Street Suite 305, NYC, 10018 and 91-31 Queen Blv. Suite 308, Elmhurst, NY 11373*  
*Phone: (917) 677-9070 e-Fax: (917) 725-8044*

## **CLINICAL PSYCHOLOGICAL EVALUATION**

*CONFIDENTIAL*

**Patient's (Pt) Name:** DJABY DOUCOURE  
**Date of Birth:** 04/10/73  
**Date of the Evaluation:** 10/11/22  
**Date of the Injury:** 03/09/20  
**WCB Claim:** G2718838 – 005157001583WC01

This report is confidential, and discretion must be exercised in disclosing the information herein to any person, including the patient.

### **BACKGROUND INFORMATION:**

#### 1. Identification and Purpose for Evaluation:

Mr. Doucure is a 49-year-old male who was referred for a psychological evaluation due to problems with depression, anxiety, and sleeping difficulty, along with symptoms of post-concussion syndrome (PCS). The reported onset of these symptoms followed a work-related accident on 03/09/20. This evaluation was done in person at the Manhattan office.

#### 2. Accident Description

On the above-mentioned date, Mr. Doucure was working in construction when a wood/metal penal structure fell on him. He fell on the ground but is not sure if he lost consciousness. He shares that he was taken to the medical room at the construction site but as time passed the pain intensified and he went to the doctor. He reports injuries in his back, neck, and left knee. He describes the incident as traumatic. He says that he never recover from the incident. He underwent surgery in his back (2022), neck (2021), and left knee (2020). He shares that his pain continues. He fears that he will need more surgery. He complains that he has memory loss and cannot concentrate on what he tries to do. He will start cognitive rehabilitation, with Dr. Busichio. He still goes to physical therapy. Since the accident, he reports that he is emotionally affected. He takes pain medication when needed.

Mr. Doucure's past medical history is unremarkable; there are no prior head injuries and/or loss of consciousness or any other emotional difficulties that would account for these symptoms. He never received psychological treatment before the accident. He came transferred from Dr. Robins' office where he used to receive psychotherapy for depression, anxiety, and PTSD. He denied the use of alcohol and/or other substances. He shares that he was involved in a car accident in 2017 when he used to work as a taxi driver, and he injured his right shoulder. Mr. Doucure was born in West Africa and lived in the U.S since 1997. He has ten children, from



JM DA SILVA  
PSYCHOLOGICAL SERVICES

*55 West 39<sup>th</sup> Street Suite 305, NYC, 10018 and 91-31 Queen Blv. Suite 308, Elmhurst, NY 11373*  
*Phone: (917) 677-9070 e-Fax: (917) 725-8044*

two relationships (ages from 21 to 2.5-year-old). His wife helps with his ADLs. He completed high school. He has been unable to return to work.

### 3. Test Session Behavior

Mr. Doucure arrived alone and on time for the test session. He took a taxi to my office. His appearance was neat. He wore a mask, and his temperature was measured per COVID-19 regulations. He spoke in English, and his comprehension was judged to be intact for the task instructions presented to him. He was cooperative, and rapport was easily established.

### 4. Current Symptoms

Following the accident, Mr. Doucure kept good eye contact and expresses that he needs help. Mr. Doucure reports he has difficulty sleeping because of pain and worries about the future. He shares that he gets easily irritable and tends to be impatient and angry. He says that he used to have nightmares and flashbacks about the accident but that now he is doing better. He feels very bad that he cannot be active and do things as he used to. He feels like he is failing his family. He used to work hard and supports his family and now all changed. He says that he is tired to stay home and going to doctor's appointments. He reports low energy and has difficulty getting engaged in activities. He shared that he feels very frustrated, as his life is very uncertain and unstable. He feels stuck in life and says that he did not ask for this or expect this.

Overall, Mr. Doucure is experiencing feelings of overwhelming, ruminative anxiety, and not feeling himself. He feels like he is not the same person and he struggles daily. He denies suicidal thoughts or plans. These symptoms continue to interfere with his daily functioning. He was referred for a psychological evaluation to continue his psychological care.

### **A brief Interviewing for Mental Status (BIMS) was administered.**

Mr. Doucure is oriented x 3 (time, place, person), presents neatly dressed, and has good interpersonal relatedness, and a good attitude towards the therapist.

Mr. Doucure's speech is coherent; his latency of response is mostly soft. His mood is anxious and sometimes depressed; his affect is appropriate to his mood: mostly constricted. His voice is most expressive, and his vocabulary is polysyllabic.

Mr. Doucure's thought processes are seen to be logical and relevant, showing no evidence of delusions or hallucinations. Pt.'s judgment and insight seem fair. His immediate, recent, and remote memory all appear to be slightly affected by his PCS symptoms at this time.

Mr. Doucure's impulse control is fair. His social/occupational/vocational functioning is all fair.





JM DA SILVA  
PSYCHOLOGICAL SERVICES

55 West 39<sup>th</sup> Street Suite 305, NYC, 10018 and 91-31 Queen Blv. Suite 308, Elmhurst, NY 11373  
Phone: (917) 677-9070 e-Fax: (917) 725-8044

TESTS ADMINISTERED: (The following tests were selected step-wise based on a combination of the patient's condition, outcomes of the previous testing, and clinical indication. Besides confirming differential diagnoses from various points of view, the tests give invaluable information for effective treatment planning).

1. Beck Depression Inventory (BDI-2)
2. Beck Anxiety Inventory (BAI)
3. The Beck Hopelessness Scale (BHS)
4. Posttraumatic Stress Disorder Checklist (PCL-5)
5. Pain Self-Efficacy Questionnaire (PSEQ)
6. Quality of Life Inventory (QLI)
7. Miller Forensic Assessment of Symptoms Test (M-Fast)
8. Clinical Interview

#### TEST RESULTS:

##### 1. Beck Depression Inventory BDI-II

Beck Depression Inventory has become one of the most clinically accepted instruments for assessing the severity of depression in diagnosed patients and for detecting levels of consciously admitted depression regardless of the clinical population. The BDI-II was developed as an indicator of the presence and degree of depressive symptoms consistent with *DSM-V*.

Mr. Doucure's score of 50 indicates that he consciously admits to severe levels of clinical depression. No suicidal thoughts or plans were mentioned at this time.

##### 2. Beck Anxiety Inventory (BAI)

The BAI consists of twenty-one questions about how the subject has been feeling in the last month, expressed as common symptoms of anxiety (such as numbness and tingling, sweating not due to heat, and fear of the worst happening). Anxiety can be thought of as having several components, including cognitive, somatic, affective, and behavioral components.

Mr. Doucure's score of 30 indicates that he consciously admits high levels of clinical anxiety accompanied by an inability to relax, and fear of the worst happening.

##### 3. The Beck Hopelessness Scale (BHS)

The BHS is a 20-item developed to measure three major aspects of hopelessness: feelings about the future, loss of motivation, and expectations. Mr. Doucure's scores of 10 show moderate to severe pessimism and negative attitudes about the future.



JM DA SILVA  
PSYCHOLOGICAL SERVICES

*55 West 39<sup>th</sup> Street Suite 305, NYC, 10018 and 91-31 Queen Blv. Suite 308, Elmhurst, NY 11373*  
*Phone: (917) 677-9070 e-Fax: (917) 725-8044*

#### 4. Posttraumatic Stress Disorder Checklist (PCL-5)

The PCL-5 is a 20-item self-report checklist of PTSD symptoms based closely on the DSM-V criteria. Respondents rate each item from 0 ("not at all") to 4 ("extremely") to indicate the degree to which they have been bothered by that particular symptom over the past month. Typically, it is optimal to assess traumatic event exposure. A total score of 33 or higher suggests the patient may benefit from PTSD treatment.

Overall, Mr. Doucure's score of 58 indicates significant traumatic event sequelae. Please note, even though he might have suffered from PTSD before, it seems that his symptoms got better.

#### 5. Pain Self-Efficacy Questionnaire (PSEQ)

PSEQ assesses patients' views of their ability to manage their pain. The ten items assess how confident patients are that they can do things at present despite the pain. It covers a range of functions, including house chores, socializing, work, and coping with pain without medication. The scores range from 0 to 60; the higher the score, the better the prognostic.

A score of 19 indicates that Mr. Doucure has a fair self-efficacy belief; which means that he is somehow confident in his ability to manage the pain.

#### 6. Quality of Life Inventory (QLI)

The Quality of life inventory is 33 items for assessing patients' well-being and life satisfaction. Mr. Doucure's responses indicated he was not very satisfied with his life overall. He endorsed several items of importance to him, which included health, medical care, amount of pain, amount of energy, capacity to help self, control over own life, life longevity, family health, children, family happiness, sexual life, partner, friendships, emotional support, responsibilities, usefulness to others, amount of worries in life, neighborhood, home or residence, employment, education, finances, have fun, a chance for a happy future, peace of mind, faith, meeting goals, overall happiness, life satisfaction, personal appearance, and self in general. He feels very frustrated, as he cannot achieve daily goals.

#### 8. Structured Inventory of Malingered Symptomatology (SIMS-TM)

The SIMS-TM is a 75 items test that assesses five distinct areas. This test is a multi-axial, self-administered measure developed to serve as a screening tool for the detection of feigned or exaggerated psychiatric and cognitive disturbance across a variety of clinical and forensic settings. The two relevant areas for the psychological scope are Psychoses and Affective Disorders. Mr. Doucure scored 2 (cut off >1 to 2) on the Psychosis scale and 5 (cut off >5 to 6) in the Affective Disorders, showing no psychological symptoms, exaggeration, or malingering.



JM DA SILVA  
PSYCHOLOGICAL SERVICES

*55 West 39<sup>th</sup> Street Suite 305, NYC, 10018 and 91-31 Queen Blv. Suite 308, Elmhurst, NY 11373*

*Phone: (917) 677-9070 e-Fax: (917) 725-8044*

#### 8. Clinical Interviews.

Findings from the interviews themselves corroborate the testing hypotheses. Moreover, Mr. Doucure's reaction to the stress of the accident, as reported in interviews, emerges as a causative factor of present debility.

---

#### **DISCUSSION OF TEST RESULTS:**

Mr. Doucure appears to be presently functioning on the average native endowment range of cognitive intelligence. Mr. Doucure's attention, concentration, and memory functioning all seem to be slightly affected. Responses to BDI-2, BAI, PCL-5, M-Fast, and QLI combined with a clinical interview, support underlying processes of depression and anxiety in a non-psychotic patient.

#### **DIAGNOSTIC IMPRESSION:**

(F06.30) Mood Disorder due to Medical Condition

(F06.4) Anxiety Disorder Due to the medical condition

(F07.81) Post Concussion Syndrome

**With a reasonable degree of certainty, Mr. Doucure's psychological condition is consequentially related to injuries sustained in a work-related accident that occurred on 03/09/20. From a psychological point of view, he has a marked temporary disability of 75% at this time.**

#### **RECOMMENDATIONS:**

The following psychological treatment is recommended: The course of treatment should be first directed toward his mood disorder and anxiety. Once the recommended treatment ends he should be assessed for PTSD.

**14 sessions of psychotherapy for Mood Disorder and Anxiety:** Mr. Doucure should be given the benefit of a course in Cognitive Behavior Therapy (CBT); Acceptance Commitment Therapy (ACT); and the use of Mindfulness Exercises. This line of therapy is directed toward shoring up Pt's sense of self, helping Mr. Doucure to cope with feelings of helplessness and symptoms of depression and anxiety; teaching cognitive and behavioral coping skills (e.g., cognitive restructuring, activity pacing, mood check, etc.); as well as practice and consolidation of coping skills (e.g., pain and anger management).



JURACI DA SILVA  
PSYCHOLOGICAL SERVICES

*55 West 39<sup>th</sup> Street Suite 305, NYC, 10018 and 91-31 Queen Blv. Suite 308, Elmhurst, NY 11373*

*Phone: (917) 677-9070 e-Fax: (917) 725-8044*

Ms. Doucoure will be monitored in psychotherapy and re-evaluated after the recommended course of treatment is completed. The patient will be referred to a psychiatrist for psychotropic medication if indicated.

**PROGNOSIS:** Guarded

Respectfully Submitted,

---

Juraci Da Silva, M.A., Ph.D (NYS # 018633-1)