

<b>Case Number:</b>	CM13-0034016		
<b>Date Assigned:</b>	12/06/2013	<b>Date of Injury:</b>	03/26/2007
<b>Decision Date:</b>	04/09/2014	<b>UR Denial Date:</b>	09/11/2013
<b>Priority:</b>	Standard	<b>Application Received:</b>	10/11/2013

### HOW THE IMR FINAL DETERMINATION WAS MADE

MAXIMUS Federal Services sent the complete case file to a physician reviewer. He/she has no affiliation with the employer, employee, providers or the claims administrator. The physician reviewer is Board Certified in Physical Medicine and Rehabilitation, has a subspecialty in Pain Management and is licensed to practice in California. He/she has been in active clinical practice for more than five years and is currently working at least 24 hours a week in active practice. The physician reviewer was selected based on his/her clinical experience, education, background, and expertise in the same or similar specialties that evaluate and/or treat the medical condition and disputed items/services. He/she is familiar with governing laws and regulations, including the strength of evidence hierarchy that applies to Independent Medical Review determinations.

### CLINICAL CASE SUMMARY

The expert reviewer developed the following clinical case summary based on a review of the case file, including all medical records:

This is a male patient with the date of injury of March 26, 2007. A utilization review determination dated September 10, 2013 recommends a modified certification of Pristiq 50 mg #60 with one (1) refill. The reviewing physician modified the request from five (5) refills to one (1) refill, to allow the patient to follow-up with the psychologist due to ongoing emotional symptoms. A progress report dated November 8, 2013 includes subjective complaints indicating that the patient's pain has increased since the last visit. The patient's sleep is poor. The patient is using medications as prescribed but they are less effective. Current medications include Pristiq 50 mg tablets one (1) pill twice a day. The objective examination findings indicate that the patient appears to be calm, depressed, and in mild pain. The diagnoses include depression with anxiety. The note indicates that he is no longer following up with the psychologist or psychiatrist at this time. The note indicates that Pristiq improves the patient's mood and allows him to interact with his family. A psychological assessment dated 11/6/2013 including SCL-90-R indicates that the patient has extremely high distress, with a large number of syndromes elevated. The note indicates that it is clear that the patient is experiencing significant psychological difficulties and should be more intensively evaluated. The Millon behavioral medicine diagnostic interpretive report indicates that "immediate professional attention is highly recommended", due to serious thoughts about suicide. A qualified medical reevaluation dated November 6, 2013, indicates that the patient would benefit from ongoing psychological treatment and cognitive behavioral training.

### IMR ISSUES, DECISIONS AND RATIONALES

The Final Determination was based on decisions for the disputed items/services set forth below:

**PRISTIQ 50MG #60 WITH 5 REFILLS:** Overturned

**Claims Administrator guideline:** Decision based on MTUS ACOEM Chapter 15 Stress Related Conditions. Decision based on Non-MTUS Citation Official Disability Guidelines, Mental Illness & Stress.

**MAXIMUS guideline:** Decision based on MTUS ACOEM Chapter 15 Stress Related Conditions Page(s): 395-396,402,Chronic Pain Treatment Guidelines SSRIs (selective serotonin reuptake inhibitors), Page(s): 107.

**Decision rationale:** The Chronic Pain Guidelines indicate that antidepressants may have a role in treating secondary depression. Additionally, the guidelines recommend follow-up evaluation with mental status examinations to identify whether depression is still present. The Guidelines indicate that a lack of response to antidepressant medications may indicate other underlying issues. Within the documentation available for review, the patient clearly suffers from significant depressive symptoms, including suicidal ideation. The requesting physician has identified that Pristiq is improving the patient's depressive symptoms and improving his function as a result. A six-month prescription of Pristiq does seem to be a bit long when additional psychological consultation is being recommended. However, there is no provision to modify the current request to a shorter duration, and discontinuation of the patient's antidepressant at the current time could be catastrophic. As such, the currently requested Pristiq with five (5) refills will allow six (6) months for the requesting physician to organize further psychological/psychiatric consultation and intervention. Therefore, the currently requested Pristiq is medically necessary.