

Case Number:	CM13-0040211		
Date Assigned:	12/20/2013	Date of Injury:	07/20/2001
Decision Date:	02/14/2014	UR Denial Date:	10/10/2013
Priority:	Standard	Application Received:	10/29/2013

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 Psychiatry 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 case involves a 43 year old female injured in 2001. She has been diagnosed with adjustment disorder with mixed anxiety, depression, and psychological factors affecting medical condition. She has been treated with Vyvanse 50 mg. daily. At issue is the medical necessity of Vyvanse 50 mg #30.

IMR ISSUES, DECISIONS AND RATIONALES

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

Vynanse 50mg #30: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation <http://www.ncbi.nlm.nih.gov/pubmed/22263621> and <http://www.ncbi.nlm.nih.gov/pubmed/24014142>

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation *Lisdexamfetamine dimesylate improves processing speed and memory in cognitively impaired MS patients: a phase II study*; Sarah A Morrow, Audrey Smerbeck, Kara Patrick, Bianca Weinstock-Guffman, Ralph H B Benedict et al, N Neurol Feb 2013

Decision rationale: The MTUS and Official Disability Guidelines are both silent on Vyvanse. Vyvanse is indicated for ADHD. There is no evidence of a diagnosis of ADHD in this case. Some doctors have used it to augment antidepressants to make them work better for patients with difficult to treat depression. The use of Vyvanse or other stimulants to augment antidepressants is still experimental. As such, the request for Vyvanse 50mg #30 is not medically necessary and appropriate.