

<b>Case Number:</b>	CM13-0042786		
<b>Date Assigned:</b>	12/27/2013	<b>Date of Injury:</b>	04/10/2008
<b>Decision Date:</b>	04/14/2014	<b>UR Denial Date:</b>	10/08/2013
<b>Priority:</b>	Standard	<b>Application Received:</b>	10/18/2013

### HOW THE IMR FINAL DETERMINATION WAS MADE

MAXIMUS Federal Services sent the complete case file to an expert reviewer. He/she has no affiliation with the employer, employee, providers or the claims administrator. The expert reviewer is Board Certified in Psychiatry and Neurology 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 expert 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:

The patient is a 52 year-old male with a date of injury of 4/10/2008. The date of the Utilization Review (UR) decision was 10/08/2013. The industrial trauma resulted in injury to the left knee, back, and neck. He became increasingly depressed and despondent, more anxious, irritable and increasingly agitated, per report from 09/12/2012. He was diagnosed with depressive dis NOS and Psychological factors affecting medical disorder. It was mentioned that he was not benefitting from cymbalta and thus savella was prescribed for chronic pain and depression. He has also been on abilify, klonopin, intermezzo. He was also receiving cognitive therapy for depression and anxiety. The Progress Report (PR) from 04/19/2013 states he ended up stopping Savella gradually; that was not helping him for depression and anxiety even though his pain is diminished" and thus Viibryd was tried. PR from 07/26/2013 indicated that he was back on Savella 50 mg twice a day. The PR from 09/04/2013 indicated he is very anxious, irritable, very distraught, and upset, seems to be related to inability to get prescriptions filled. The Psychiatrist indicated that he needs the combination of Viibryd and Savella to help him with his severe anxiety and depression. The PR from 10/25/2013 suggested that he got the prescriptions authorized. Diagnosis of Major Depressive Disorder, recurrent has been listed in the request for authorization of medications by Psychiatrist.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**PRESCRIPTION FOR SAVELLA 50 MG, #60 WITH 2 REFILLS: Upheld**

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines CHRONIC PAIN MEDICAL TREATMENT GUIDELINES, MILNACIPRAN (SAVELLA)..

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines CHRONIC PAIN MEDICAL TREATMENT GUIDELINES, MILNACIPRAN, Page(s): 62. Decision based on Non-MTUS Citation OFFICIAL DISABILITY GUIDELINES (ODG) - MENTAL & STRESS- ANTIDEPRESSANTS FOR TREATMENT OF MDD (MAJOR DEPRESSIVE DISORDER).

**Decision rationale:** According to the guidelines quoted above, Savella is not FDA approved in U.S for treatment of depression. The only FDA approval it has at this time is for Fibromyalgia. The injured worker has been prescribed Savella for treatment of depression and chronic pain. He has not been diagnosed with fibromyalgia. Medical necessity for use of Savella cannot be affirmed at this time.