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| Case Number: | CM14-0003457 | | |
| Date Assigned: | 01/31/2014 | Date of Injury: | 11/21/2007 |
| Decision Date: | 08/28/2014 | UR Denial Date: | 12/13/2013 |
| Priority: | Standard | Application Received: | 01/08/2014 |

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 Occupational Medicine 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 applicant is a represented [REDACTED] employee who has filed a claim for chronic neck pain and associated headaches reportedly associated with an industrial injury of November 21, 2007. Thus far, the applicant has been treated with the following: Analgesic medications; attorney representation; sleep aid; psychotropic medications; epidural steroid injection therapy; and transfer of care to and from various providers in various specialties. In a Utilization Review Report dated December 13, 2013, the claims administrator approved or partially approved a request for Mobic, approved or partially approved a request for Neurontin, and apparently denied a request for Lexapro. The claims administrator's rationale was somewhat difficult. The claims administrator suggested that the applicant taper off of Lexapro over a span of ten days. The claims administrator then stated that usage of Mobic was supported and further stated that usage of Neurontin was also supported. The applicant's attorney subsequently appealed. In a November 26, 2013 progress note, the applicant presented with severe complaints of headaches and left-sided occipital pain with associated muscle spasm. The applicant was in the process of appealing a previously denied cervical epidural steroid injection, it was acknowledged. The applicant also had ancillary complaints of low back pain, occipital neuralgia, and radicular leg pain complaints. Severe burning and paresthesias were noted. The applicant is using Norco, Atarax, Neurontin, Lunesta, Mobic, Prilosec, Lexapro, and Fioricet, it was acknowledged. The applicant stated that usage of medications was ameliorating the ability to perform activities such as light housekeeping, cooking, shopping, groceries, and self-care. It was explicitly stated that the applicant was using Lexapro for depression. A variety of medications were refilled. Epidural steroid injection therapy and an occipital nerve.

IMR ISSUES, DECISIONS AND RATIONALES

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

Lexapro 20 mg, thirty count: Overturned

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines SSRIS (SELECTIVE SEROTONIN REUPTAKE INHIBITORS Page(s): 107.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 15 Stress Related Conditions Page(s): 402.

Decision rationale: As noted in the Stress Related Conditions Chapter of the American College of Occupational and Environmental Medicine (ACOEM) Practice Guidelines, antidepressants such as Lexapro may be helpful to alleviate the symptoms of depression. In this case, contrary to what was suggested by the claims administrator, the applicant does report symptoms of depression and anxiety, for which Lexapro has been introduced. As the Stress Related Conditions Chapter of the ACOEM Practice Guidelines further notes that antidepressant such as Lexapro often takes weeks to exert their maximal effect, continuing the same, on balance, is indicated in the treatment of the applicant's ongoing mental health complaints. Therefore, the request for Lexapro 20 mg, thirty count, is medically necessary and appropriate.