

<b>Case Number:</b>	CM14-0130335		
<b>Date Assigned:</b>	09/22/2014	<b>Date of Injury:</b>	04/15/2012
<b>Decision Date:</b>	10/27/2014	<b>UR Denial Date:</b>	08/01/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	08/15/2014

### 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, mid back pain, shoulder pain, anxiety, and depression reportedly associated with an industrial injury of April 15, 2012. Thus far, the applicant has been treated with analgesic medications; psychotropic medications; adjuvant medications; unspecified amounts of physical therapy over the course of the claim; and extensive periods of time off of work. In a Utilization Review Report dated August 12, 2014, the claims administrator denied a request for Brintellix. The claims administrator invoked non-MTUS Third Edition ACOEM Guidelines in its denial but mislabeled the same as originating from the MTUS. The applicant's attorney subsequently appealed. In a September 20, 2014 Medical-legal Evaluation, the applicant reported persistent complaints of neck, back, and bilateral shoulder pain. The applicant had not worked since April 2012, it was acknowledged. The applicant was using antidepressant medications, it was stated. The applicant had alleged multifocal pain complaints and depression secondary to cumulative trauma at work, it was noted. The applicant was reportedly using Gabapentin, Norco, Hydroxyzine, and Brintellix, it was noted. In a September 17, 2014 progress note, the applicant reported 10/10 pain complaints without medications versus 9/10 pain with pain medications. The applicant was unemployed, it was acknowledged. The applicant was asked to continue Gabapentin and remain off of work, on total temporary disability. The applicant was also asked to follow up with a psychiatrist. In a September 4, 2014 neurosurgery consultation, the consulting neurosurgeon stated that the applicant was not a surgical candidate. The applicant was described as morbidly obese, it was incidentally noted. On July 18, 2014, the applicant was asked to start Brintellix for depression and anxiety. Vistaril was also endorsed for anxiety.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Brintellix 10 mg #30:** Overturned

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disabilities Guidelines, Treatment in Workers Compensation, 2014 Web Based Edition

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

**Decision rationale:** As noted in the MTUS-adopted ACOEM Guidelines in Chapter 15, page 402, it often takes "weeks" for antidepressants to exert their maximal effect. In this case, it appears that Brintellix was introduced on a psychiatry note of July 18, 2014, i.e., some two weeks before the date of the Utilization Review Report, August 1, 2014. This was too soon a point in time to determine whether or not Brintellix had been effective. Introduction of Brintellix was indicated on or around the date in question, owing to the applicant's ongoing issues with depression and anxiety. Therefore, the request was medically necessary.