

Case Number:	CM14-0176789		
Date Assigned:	10/30/2014	Date of Injury:	12/03/2010
Decision Date:	12/05/2014	UR Denial Date:	09/23/2014
Priority:	Standard	Application Received:	10/24/2014

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 low back pain reportedly associated with an industrial injury of December 3, 2010. Thus far, the applicant has been treated with the following: Analgesic medications; adjuvant medications; earlier lumbar laminectomy surgery; and unspecified amounts of physical therapy over the course of the claim. In a Utilization Review Report dated September 23, 2014, the claims administrator denied a request for Cymbalta. The claims administrator suggested that the attending provider employ a generic drug in lieu of Cymbalta. The claims administrator did not incorporate any guidelines into its rationale and stated that it was basing its decision on a variety of non-MTUS references, including the Physician's Desk Reference, ODG's Drug Formulary, and the Third Edition ACOEM Guidelines. It was not clearly stated whether the request for Cymbalta was a first-time request or a renewal request. The applicant's attorney subsequently appealed. In a March 19, 2014 progress note, the applicant reported ongoing complaints of low back pain with residual left leg radicular complaints. The applicant stated that he had been laid off by his former employer but was intent on finding another job. The applicant was given refills of Norco, Flexeril, Naprosyn, and Prilosec. It was stated that the applicant was already permanent and stationary. In an August 29, 2014 progress note, the applicant reported 6-8/10 low back pain complaints. The applicant was reportedly using Naprosyn and Cymbalta. It was stated that the applicant had not noticed any appreciable improvement in pain following introduction of Cymbalta but stated that Cymbalta had nevertheless ameliorated his mood. It was further noted that the applicant had initially alleged pain secondary to cumulative trauma at work as opposed to a specific, discrete injury. The applicant was obese, with a BMI of 32. The applicant was asked to continue Naprosyn and Cymbalta. The attending provider posited that the

applicant had developed a moderate improvement in mood following introduction of Cymbalta. It was acknowledged that the applicant was not working with permanent limitations in place.

IMR ISSUES, DECISIONS AND RATIONALES

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

Cymbalta 60mg #30, one tablet by mouth daily for symptom related to lumbar spine injury, as an outpatient: Overturned

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 12 Low Back Complaints. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Drug Formulary, Physician's Desk Reference

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, antidepressants such as Cymbalta "may be helpful" to alleviate symptoms of depression. In this case, the attending provider has seemingly posited that ongoing usage of Cymbalta has attenuated the applicant's depressive symptoms. Continuing the same, on balance, is therefore indicated. Accordingly, the request is medically necessary.