

Case Number:	CM14-0185351		
Date Assigned:	11/13/2014	Date of Injury:	07/06/2010
Decision Date:	01/06/2015	UR Denial Date:	10/14/2014
Priority:	Standard	Application Received:	11/06/2014

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 Adult Psychiatry, and is licensed to practice in Illinois and Wisconsin. 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:

This is a 54 year old male who was injured in July of 2010. The patient has a history of ETOH abuse in addition to chronic pain. A psychological evaluation dated 9/11 of this year indicated a diagnosis of Major Depressive Disorder. Current medications include Lyrica and Hydrocodone. Psychotropic medication management has been requested. Coverage has been denied by the previous reviewer due to lack of medical necessity. This is an independent review of the previous determination to deny coverage for psychotropic medication management.

IMR ISSUES, DECISIONS AND RATIONALES

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

Psychotropic medication mgt.: Overturned

Claims Administrator guideline: The Claims Administrator did not cite any medical evidence for its decision.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 15 Stress Related Conditions Page(s): 398.

Decision rationale: The ACOEM indicates that referral be made to a specialist if symptoms persist for more than 6-8 weeks. The patient appears to have been symptomatic since at least 2013 and there is no indication that he has had any significant trials of psychotropic medications. Given the information available, a specialty referral for the purpose of psychotropic medication

evaluation and management appears to be warranted and supported by the cited evidence based guideline. Therefore the request is medically necessary.