

<b>Case Number:</b>	CM14-0189574		
<b>Date Assigned:</b>	11/20/2014	<b>Date of Injury:</b>	11/15/2002
<b>Decision Date:</b>	01/08/2015	<b>UR Denial Date:</b>	10/30/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	11/13/2014

### 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, 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, shoulder pain, and dysthymia reportedly associated with an industrial injury of November 15, 2002. In a Utilization Review Report dated October 30, 2014, the claims administrator denied a request for Abilify. The claims administrator stated that the attending provider's rationale for selection of Abilify was sparse. The claims administrator then stated that the applicant had issues with depression, panic disorder, anxiety disorder, and dysthymia in its UR report, somewhat incongruously. The claims administrator stated that its decision was based on a September 12, 2014 progress note. The applicant's attorney subsequently appealed. In a November 11, 2014 progress note, the applicant reported ongoing complaints of neck pain, shoulder pain, muscle spasms, and headaches. The applicant was receiving Social Security Disability Insurance (SSDI), it was acknowledged, in addition to Workers' Compensation indemnity benefits. The applicant was using psychotropic medications which included a combination of Cymbalta and Abilify. The applicant stated that the combination of Abilify and Cymbalta was ameliorating her depressive symptoms to a much greater degree than Cymbalta monotherapy. Multiple medications were renewed, including Norco, Abilify, and Cymbalta. The attending provider stated that the applicant's mood had been ameliorated following several months of Abilify plus Cymbalta combo therapy. The attending provider stated that previous usage of SSRIs had proven unsuccessful here.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Abilify 2mg #30:** Upheld

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Antidepressants Page(s): 13.

**MAXIMUS guideline:** Decision based on MTUS ACOEM Chapter 15 Stress Related Conditions Page(s): 402. Decision based on Non-MTUS Citation Food and Drug Administration (FDA), Abilify Medication Guide

**Decision rationale:** As noted in the MTUS-adopted ACOEM Guidelines in Chapter 15, page 402, continuing with an established course of antipsychotics is important. The Food and Drug Administration (FDA) further notes that Abilify is an atypical antipsychotic which can be employed for a wide variety of roles, including in the treatment of schizophrenia, the primary usage and as an adjunctive treatment for major depressive disorder, the usage for which Abilify is seemingly been employed here. The requesting provider, furthermore, has stated that the combination of Cymbalta and Abilify had succeeded in attenuating the applicant's depressive symptoms and in ameliorating her mood. Continuing the same, on balance, was therefore indicated. Accordingly, the request was medically necessary.