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| Case Number: | CM15-0007998 | | |
| Date Assigned: | 01/26/2015 | Date of Injury: | 04/20/2009 |
| Decision Date: | 03/17/2015 | UR Denial Date: | 01/05/2015 |
| Priority: | Standard | Application Received: | 01/14/2015 |

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. 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/Service. He/she is familiar with governing laws and regulations, including the strength of evidence hierarchy that applies to Independent Medical Review determinations.

The Expert Reviewer has the following credentials:

State(s) of Licensure: California, Texas

Certification(s)/Specialty: Psychiatry, Geriatric Psychiatry, Addiction Psychiatry

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 injured worker is a 60 year old male, who sustained an industrial injury on 4/29/09, he sustained a head injury after a fall. The diagnoses have included anxiety and depression. Symptoms have included acting bizarrely and not speaking much. Treatment to date has included medications Latuda 40 mg and Fetizma 40mg. He had been tried on, and failed, lexapro, Celexa, Zoloft, Viibryd, Savella, Doxepin, Desipramine, and augmentation with atypical antipsychotics. On 08/07/14 office notes show the patient as more cooperative and less anxious. Per the exam of 12/23/14, he continues to improve, he was more alert and cooperative, and spoke a few words. [REDACTED] had been providing the patient with samples as his medications have been noncertified. On 1/7/15 Utilization Review non-certified a prescription for Fetizma 40 mg #30, noting it appeared the IW still has one refill of Fetizma remaining. This would appear to be from 09/2014. The MTUS, ACOEM Guidelines, was cited. On 1/14/15, the injured worker submitted an application for IMR for review of Fetizma 40mg # 30. His diagnosis is mood disorder.

IMR ISSUES, DECISIONS AND RATIONALES

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

Fetzima 40mg #30: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines. Decision based on Non-MTUS Citation Drug.com and Official Disability Guidelines, Mental Illness and Stress Chapter

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation CA-MTUS is silent regarding Fetzima. ODG Mental Illness & Stress Antidepressants for treatment of MDD (major depressive disorder) Recommended for initial treatment of presentations of Major Depressive Disorder (MDD) that are moderate, severe, or psychotic, unless electroconvulsive therapy is part of the treatment plan. Not recommended for mild symptoms. Drug selection criteria. The American Psychiatric Association has published the following considerations regarding the various types of anti-depressant medications: (1) Many treatment plans start with a category of medication called selective serotonin reuptake inhibitors (SSRIs), because of demonstrated effectiveness and less severe side effects; (2) In addition to the SSRIs, other anti-depressant medications that are likely to be optimal for most patients include desipramine, nortriptyline, bupropion, and venlafaxine; Increasing evidence of the importance of norepinephrine in the etiol

Decision rationale: The patient developed depression and anxiety after an industrial injury involving a head injury. He was tried and failed multiple antidepressants. He was given the diagnosis of mood disorder. He was placed on Fetzima (a levomilnacipram formulation of the SNRI antidepressant family) 40mg along with Latuda. [REDACTED] indicated that he has shown improvement evidenced by increased cooperation, decreased anxiety, increased alertness, and speaking a few words. Per ODG, norepinephrine plays an important role in the etiology of depression, and SNRI antidepressants may be equally or more effective than SSRIs. Fetzima was approved by the FDA in July 2013 for use in the US for major depressive disorder, however this patient has been diagnosed with mood disorder. Until there is documentation provided that the patient meets criteria for major depressive disorder, this request is noncertified. Fetzima (levomilnacipran) extended release capsules for oral use. Prescribing information. [REDACTED]

[REDACTED]