

Case Number:	CM15-0105059		
Date Assigned:	06/09/2015	Date of Injury:	02/03/2010
Decision Date:	07/15/2015	UR Denial Date:	05/11/2015
Priority:	Standard	Application Received:	06/01/2015

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, Arizona,
Maryland Certification(s)/Specialty: 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 49 year old male with an industrial injury dated 02/03/2010. The injured worker's diagnoses include depressive disorder and anxiety disorder. Treatment consisted of psychological testing, prescribed medications and periodic follow up visits. In a progress note dated 04/14/2015, the injured worker rated depression 8/10. The injured worker also reported that he had to stop taking Citalopram with Tramadol due to the dangers associated with a serotonergic reaction. Beck Anxiety Inventory (BAI) revealed severe anxiety and Beck Depression Inventory (BDI) 04/30/2015 revealed severe depression. According to the progress note dated 04/30/2015, the injured worker continued to report anxiety and depression. Objective findings revealed depression and anxiety. The treating physician prescribed 15 tablets of Klonopin 0.5mg and 30 tablets of Lexapro 20mg now under review.

IMR ISSUES, DECISIONS AND RATIONALES

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

15 tablets of Klonopin 0.5mg: Overturned

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Benzodiazepines. Decision based on Non-MTUS Citation Official Disability Guidelines - Treatment for Workers' Compensation (ODG-TWC) Online Edition, Chapter: Pain (Chronic).

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines
Topic: Benzodiazepine, Weaning of medications Page(s): 24, 124.

Decision rationale: MTUS states, "Benzodiazepines are not recommended for long-term use because long-term efficacy is unproven and there is a risk of dependence. Most guidelines limit use to 4 weeks. Their range of action includes sedative/hypnotic, anxiolytic, anticonvulsant, and muscle relaxant. Chronic benzodiazepines are the treatment of choice in very few conditions. The MTUS guidelines state that the use of benzodiazepines should be limited to 4 weeks. The injured worker's Beck Anxiety Inventory (BAI) score revealed severe anxiety. The request for 15 tablets of Klonopin 0.5mg is medically necessary. However, per guidelines, the use of medications such as Klonopin should be limited to 4 weeks only.

30 tablets of Lexapro 20mg: Overturned

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Antidepressants for chronic pain. Decision based on Non-MTUS Citation Official Disability Guidelines - Treatment for Workers' Compensation (ODG-TWC) Online Edition, Chapter: Mental Illness & Stress.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Chapter: Stress & Mental Illness Topic: Antidepressants for treatment of MDD (major depressive disorder).

Decision rationale: ODG states "MDD (major depressive disorder) treatment, severe presentations: The American Psychiatric Association strongly recommends anti-depressant medications for severe presentations of MDD, unless electroconvulsive therapy (ECT) is being planned. (American Psychiatric Association, 2006) .Many treatment plans start with a category of medication called selective serotonin reuptake inhibitors (SSRIs), because of demonstrated effectiveness and less severe side effects." The injured worker suffers from anxiety and depression. The Beck Depression Inventory (BDI) 04/30/2015 revealed severe depression. The levels of anxiety per Beck Anxiety Inventory were severe as well. The request for 30 tablets of Lexapro 20mg are medically necessary for treatment of depression and anxiety in this case.