

<b>Case Number:</b>	CM15-0135616		
<b>Date Assigned:</b>	07/23/2015	<b>Date of Injury:</b>	08/17/2011
<b>Decision Date:</b>	08/20/2015	<b>UR Denial Date:</b>	07/13/2015
<b>Priority:</b>	Standard	<b>Application Received:</b>	07/14/2015

### 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: Massachusetts

Certification(s)/Specialty: Physical Medicine & Rehabilitation, Pain Management

### 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 51-year-old male who sustained an industrial injury on 8-17-11. The diagnosis is major depressive disorder, recurrent. In a follow up note dated 7/2/15, the treating physician reports the injured worker has been having a lot of anxiety, poor sleep, and feeling of hopelessness. His mood was euthymic and affect was appropriate. He denied any side effects of medication and has been compliant. The plan is to continue him on Cymbalta 60 mg daily, Nuedexta 20-10 twice a day for lability, Klonopin 0.5 mg up to 2 times a day as needed for anxiety, and Lunesta 3 mg at night as needed for insomnia. Nudexta is noted on the request for authorization, although Nudexta is noted in the physician follow-up report dated 7-2-15. The requested treatment is Nudexta 20-10 mg for a quantity of 60.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Nudexta 20/10mg quantity 60: Upheld**

**Claims Administrator guideline:** Decision based on MTUS ACOEM Chapter 15 Stress Related Conditions.

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Neudexta prescribing Information.

**Decision rationale:** The claimant sustained a work-related injury in August 2011 and continues to be treated for depression. When seen, he was not having any crying spells. His sleep was poor. He was socializing more. His weight was 276 pounds. Medications were prescribed including Neudexta. Nuedexta is a combination product containing dextromethorphan hydrobromide and quinidine sulfate and is indicated for the treatment of pseudobulbar affect (PBA). PBA is a neurological condition seen in patients with diagnoses such as f amyotrophic lateral sclerosis, extrapyramidal and cerebellar disorders, multiple sclerosis, traumatic brain injury, Ahheimer's disease, stroke, and brain tumors. The claimant does not have any of these diagnoses. Nuedexta is not indicated for the treatment of depression, which is the claimant's established diagnosis. The request is not medically necessary.