

Case Number:	CM15-0188291		
Date Assigned:	09/30/2015	Date of Injury:	01/23/2013
Decision Date:	11/09/2015	UR Denial Date:	09/18/2015
Priority:	Standard	Application Received:	09/24/2015

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: Montana, Oregon, Idaho
 Certification(s)/Specialty: Orthopedic Surgery

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 47 year old male who sustained an industrial injury January 23, 2013. Past treatment included Norco, nabumetone, omeprazole, 12 sessions of physical therapy, acupuncture, an MRI of the lumbar spine and epidural steroid injections. Diagnosis is documented as bilateral lumbosacral radiculopathy. According to an initial comprehensive psychiatry consultation dated May 12, 2015, the injured worker presented with continued complaints of pain in the bilateral lumbar ligaments with some radiation of pain down the bilateral lower extremities with intermittent numbness and tingling sensations affecting both legs, with the left side worse than the right. A qualified medical evaluation dated June 5, 2015, documented a mood disorder with mixed emotional features of anxiety and depression. On July 17, 2015, the injured worker underwent a left L4, right L5, and left S1, transforaminal epidural steroid injection and L5 epidurogram. A request for authorization dated September 2, 2015, documented diagnoses as myofascial pain; lumbar spine radiculopathy, and request for authorization Savella 12.5mg-25mg #60. A drug screen report, collection date May 19, 2015, report date June 12, 2015, is present in the medical record. According to utilization review dated September 18, 2015, the request for Savella Tab 12.5mg-25mg #60 with no refills is non-certified.

IMR ISSUES, DECISIONS AND RATIONALES

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

Savella 12.5/25 mg #60: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Medical Treatment 2009.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Medical Treatment 2009, Section(s): SSRIs (selective serotonin reuptake inhibitors), SNRIs (serotonin noradrenaline reuptake inhibitors).

Decision rationale: According to the CA MTUS/ACOEM Chronic Pain Medical Treatment Guidelines, page 62, Milnacipran (Savella) is not recommended as it is not FDA approved and not available in the [REDACTED] at this time. Under study as a treatment for fibromyalgia syndrome. An FDA Phase III study demonstrated "significant therapeutic effects" of milnacipran for treatment of fibromyalgia syndrome. Milnacipran ([REDACTED]) has been approved for the treatment of depression outside of the [REDACTED] and is in a new class of antidepressants known as Norepinephrine Serotonin Reuptake Inhibitors (or NSRIs). What makes Milnacipran different from the Selective Serotonin Reuptake Inhibitors (SSRIs) "drugs like Prozac" and Selective Norepinephrine Reuptake Inhibitors (SNRIs) "drugs like Effexor" is that Milnacipran affects two neurotransmitters, norepinephrine and serotonin. In this case, the requested medication is not FDA approved for the worker's diagnoses according to the guidelines. Therefore, the request is not medically necessary.