

Case Number:	CM15-0202887		
Date Assigned:	10/19/2015	Date of Injury:	08/14/2000
Decision Date:	12/09/2015	UR Denial Date:	10/02/2015
Priority:	Standard	Application Received:	10/15/2015

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 53 year old male, who sustained an industrial injury on 8-14-00. The injured worker was diagnosed as having major depressive disorder, chronic headaches, neck pain, frequent syncopal episodes, and seizure disorder. Treatment to date has included psychiatric treatment and medication including Norco, Duragesic patches, Neurontin, Cymbalta, Klonopin, Abilify, and Restoril. The injured worker had been taking Abilify since at least August 2015. On 8-27-15, the injured worker complained of depression. The treating physician requested authorization for Abilify 15mg #30 and Nuvigil 250mg #30. On 10-2-15 the requests were non-certified by utilization review.

IMR ISSUES, DECISIONS AND RATIONALES

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

Abilify 15 mg #30: Overturned

Claims Administrator guideline: Decision based on MTUS Stress-Related Conditions 2004. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG).

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) (1) Mental Illness & Stress Aripiprazole (Abilify) (2) Mental Illness & Stress Antidepressants for

treatment of MDD (major depressive disorder).

Decision rationale: The claimant sustained an electrocution injury while trimming trees near power lines with date of injury in August 2000. He continues to be treated for chronic pain and major depressive disorder. When seen by the primary treating provider in August 2015 medications were decreasing pain from 10/10 to 6/10. Physical examinations were unchanged with a prior assessment, which documented decreased cervical range of motion with tenderness and mild spasms. He was noted to move stiffly. Duragesic, Norco, and gabapentin were prescribed. When seen for psychiatric follow-up in August 2015 he was not doing very well. He was not being given his psychotropic medications. He was having difficulty sleeping and was feeling depressed. He had feelings of hopelessness and helplessness. He had low energy and concentration and was having psychomotor agitation. He had suicidal ideation with a plan, which he would not reveal. He was sent for hospitalization. In September 2015, he was doing fairly well since taking his medications regularly. He was sleeping and resting well. He was having persistent episodes of passing out. Abilify, Nuvigil, and Cymbalta were prescribed. Aripiprazole (Abilify) is approved for schizophrenia and acute mania, and as an adjunct second-line therapy for bipolar maintenance and major depressive disorder. It is not recommended as a first-line treatment. In this case, the claimant has a diagnosis of major depressive disorder. He is already taking Cymbalta for depression and when medications were not available became suicidal. Abilify is medically necessary.

Nuvigil 250 mg #30: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG).

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Pain (Chronic), Armodafinil (Nuvigil).

Decision rationale: The claimant sustained an electrocution injury while trimming trees near power lines with date of injury in August 2000. He continues to be treated for chronic pain and major depressive disorder. When seen by the primary treating provider in August 2015 medications were decreasing pain from 10/10 to 6/10. Physical examinations were unchanged with a prior assessment, which documented decreased cervical range of motion with tenderness and mild spasms. He was noted to move stiffly. Duragesic, Norco, and gabapentin were prescribed. When seen for psychiatric follow-up in August 2015 he was not doing very well. He was not being given his psychotropic medications. He was having difficulty sleeping and was feeling depressed. He had feelings of hopelessness and helplessness. He had low energy and concentration and was having psychomotor agitation. He had suicidal ideation with a plan, which he would not reveal. He was sent for hospitalization. In September 2015, he was doing fairly well since taking his medications regularly. He was sleeping and resting well. He was having persistent episodes of passing out. Abilify, Nuvigil, and Cymbalta were prescribed. Armodafinil (Nuvigil) is used to treat excessive sleepiness caused by narcolepsy or shift work sleep disorder. It is not recommended solely to counteract the sedating effects of opioid medications until after first considering reducing excessive narcotic prescribing, and it is

noted that there should be heightened awareness for potential abuse of and dependence on this drug. In this case, there is no clear indication for this medication. The claimant has episodes of passing out which need to be further investigated. Prescribing Nuvigil is not medically necessary.