

Case Number:	CM15-0207214		
Date Assigned:	10/26/2015	Date of Injury:	06/03/2005
Decision Date:	12/08/2015	UR Denial Date:	09/22/2015
Priority:	Standard	Application Received:	10/21/2015

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

Certification(s)/Specialty: Preventive Medicine, Occupational Medicine

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 64-year-old female, who sustained a repetitive use industrial injury on June 6, 2005, incurring injuries to the bilateral wrists. The injured worker had a history of depression and anxiety. She was diagnosed with left carpal tunnel. She underwent a surgical left elbow nerve release in June, 2005. Treatment included antidepressants, psychiatric therapy, anti-anxiety medications and antipsychotics. Currently, the injured worker complained of increased insomnia, anxiety, stress, increased depression, panic attacks and suicidal ideations. She was diagnosed with major depression, mood disorder and generalized anxiety. The treatment plan that was requested for authorization included a prescription for Latuda 20 mg #30 with 2 refills. On September 22, 2015, a request for Latuda with 2 refills was modified to a one month supply by utilization review.

IMR ISSUES, DECISIONS AND RATIONALES

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

Latuda Tab 20 MG #30 with 2 Refills: Overturned

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) Atypical antipsychotics.

Decision rationale: The MTUS is silent regarding the use of antipsychotic medications. The ODG guidelines state that antipsychotic drugs are commonly prescribed off-label for a number of disorders outside of their FDA-approved indications, schizophrenia and bipolar disorder. In a new study funded by the National Institute of Mental Health, four of the antipsychotics most commonly prescribed off label for use in patients over 40 were found to lack both safety and effectiveness. The four atypical antipsychotics were aripiprazole (Abilify), olanzapine (Zyprexa), quetiapine (Seroquel), and risperidone (Risperdal). The authors concluded that off-label use of these drugs in people over 40 should be short-term, and undertaken with caution. Providers should use caution concerning the use of antipsychotics for patients who do not have a diagnosis of psychosis, since the drugs are associated with serious adverse effects, including extra pyramidal symptoms with first-generation antipsychotics and weight gain and lipid/glucose dysregulation with second-generation agents. Moreover, antipsychotics may be linked to increased rates of stroke and all-cause mortality in patients with dementia. (Marston, 2014)

Latuda is a second-generation antipsychotic. In this case the treating physician started Latuda on 3-13-15 with Peer Review approving 1 month with 2 refills. The treatment note on 3-24-15 noted that the addition of Latuda did improve symptoms. Ongoing treatment must be monitored for severe adverse effects as noted above. With treatment provided by a psychiatric specialist and documentation of efficacy, the request for Latuda Tab 20 MG #30 with 2 Refills is medically necessary.