

Case Number:	CM15-0035196		
Date Assigned:	03/03/2015	Date of Injury:	01/31/2012
Decision Date:	04/14/2015	UR Denial Date:	01/23/2015
Priority:	Standard	Application Received:	02/24/2015

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: 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 48-year-old male who sustained an industrial injury on 01/31/2012. Diagnoses include and lumbar post laminectomy syndrome, major depressive disorder, single and moderate, and pain disorder associated with psychological factors. Treatment to date has included medications, psychotherapy, physical therapy, TENS Unit, and spinal cord stimulator trial with 50-60% improvement. A physician progress note dated 01/12/2015 documents the injured worker is feeling back to the same way he initially did. He is very anxious and very depressed. He is taking Remeron 45 mg at night. He has gone back to drinking. He feels it is necessary to help him control his anxiety; he has thoughts of hurting himself but he will not do so at this time as he feels that he wants to find a better way out of this. His mood is depressed and anxious. Affect is appropriate. No active thoughts of suicide. Concentration is fair. Treatment requested is for Seroquel 25mg #90 with 3 refills. On 01/23/2015 Utilization Review non-certified, the request for Seroquel 25mg #90 with 3 refills and cited was California Medical Treatment Utilization Schedule (MTUS) American College of Occupational and Environmental Medicine (ACOEM), and Official Disability Guidelines.

IMR ISSUES, DECISIONS AND RATIONALES

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

Seroquel 25mg #90 with 3 refills, a prescribed on 1/12/15: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 15 Stress Related Conditions. Decision based on Non-MTUS Citation ODG Mental Illness & Stress (updated 11/21/14) Quetiapine (Seroquel).

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Mental Illness & Stress Atypical Antipsychotics, Quetiapine (Seroquel).

Decision rationale: ODG states "Quetiapine is not recommended as a first-line treatment. There is insufficient evidence to recommend atypical antipsychotics (eg, Quetiapine, Risperidone) for conditions covered in ODG. 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." "The request for Seroquel 25mg #90 with 3 refills, a prescribed on 1/12/15 is excessive and not medically necessary as Seroquel is not recommended for conditions covered in ODG. Also, the dose which is being proscribed for the injured worker, i.e. 25 mg is an off label dose which is given for sedation sometimes. Per National Institute of Mental Health, the off label use of Seroquel lacked both safety and effectiveness. Thus, the request is not medically necessary.