

Case Number:	CM15-0047619		
Date Assigned:	03/19/2015	Date of Injury:	05/27/1994
Decision Date:	04/24/2015	UR Denial Date:	03/05/2015
Priority:	Standard	Application Received:	03/12/2015

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, Indiana, New York
Certification(s)/Specialty: Internal 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 76 year old male, who sustained an industrial injury on 5/27/1994. The medical records submitted did not include details on the initial injury. The diagnoses have included Coronary Artery Disease (CAD) status post intervention, Chronic Obstructive Pulmonary Disease (COPD), and anxiety. Treatment to date has included lorazepam and Buspar. Currently, the IW complains of increased anxiety with discontinuation of lorazepam. The physical examination from 2/23/15 documented that the lorazepam had been denied and the injured worker was not at high risk due to comorbidities including Coronary Artery Disease (CAD) and high anxiety levels. The plan of care included restarting Buspar 15 mg one tablet twice a day.

IMR ISSUES, DECISIONS AND RATIONALES

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

Buspar 15mg 1 po bid: Upheld

Claims Administrator guideline: The Claims Administrator did not cite any medical evidence for its decision.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation
<http://www.nlm.nih.gov/medlineplus/druginfo/meds/a688005.html>.

Decision rationale: Pursuant to Medline plus, BuSpar 15 mg one PO BID is not medically necessary. The Spartans used to treat anxiety disorders in the short term for symptoms of anxiety. For additional details see the attached link. In this case, the injured workers working diagnoses are coronary artery disease, status post coronary artery bypass graft; status post aortic valve replacement; and COPD. The medical record documentation contains 21 pages. There is one progress note in the medical record. The progress note is partly illegible and hand written. Progress note is dated February 23, 2015. The subject of section of the progress note indicates the injured worker suffers with anxiety. The treatment plan is cut off from the documentation. The treating physician requested a prescription for BuSpar 15 mg one PO BID #180 with three refills. The prescription was clearly written and included in the medical record. This prescription amounts to a nine-month supply. There is insufficient evidence in the medical record with prior treatment associated with Lorazepam. There is no documentation in the medical record referencing any other anxiety-based medications. Consequently, absent clinical documentation with objective functional improvement along with a medication history with prior anxiolytics and a clinical rationale/indication for a nine month supply of BuSpar 15 mg PO b.i.d., Buspar 15 mg one PO b.i.d. is not necessary.