

<b>Case Number:</b>	CM15-0054510		
<b>Date Assigned:</b>	03/27/2015	<b>Date of Injury:</b>	09/15/2011
<b>Decision Date:</b>	05/01/2015	<b>UR Denial Date:</b>	03/10/2015
<b>Priority:</b>	Standard	<b>Application Received:</b>	03/23/2015

### 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: Texas, New York, California  
 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 applicant is a represented [REDACTED] employee who has filed a claim for chronic pain syndrome reportedly associated with an industrial injury of September 15, 2011. In a Utilization Review report dated March 10, 2015, the claims administrator failed to approve a request for Cymbalta. An RFA form dated February 26, 2015 was referenced in the determination, along with a progress note dated February 26, 2015. In a March 18, 2015 medical-legal evaluation, it was acknowledged that the applicant developed issues with anxiety and depression associated with her industrial injury. It was acknowledged that the applicant was not working. The applicant's attorney subsequently appealed. On April 3, 2015, the applicant's treating acupuncturist seemingly appealed previously denied acupuncture. In a progress note dated October 27, 2014, the applicant reported ongoing complaints of neck pain, low back pain, and shoulder pain with derivative complaints of depression and anxiety. Lyrica, Robaxin, and Norco were refilled. The applicant's work status was not detailed. The remainder of the file was surveyed. The reports on file did not contain any mention of the applicant's using Cymbalta, nor was it established that the applicant had benefited from the same.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Cymbalta 30mg, #60:** Upheld

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

**MAXIMUS guideline:** Decision based on MTUS ACOEM Chapter 15 Stress Related Conditions, Chapter 3 Initial Approaches to Treatment Page(s): 402; 47.

**Decision rationale:** No, the request for Cymbalta, an atypical antidepressant, was not medically necessary, medically appropriate, or indicated here. While the MTUS Guideline in ACOEM Chapter 15, page 402 does acknowledge that antidepressants such Cymbalta may be helpful to treat symptoms of depression, as were/are present here, this recommendation is, however, qualified by commentary made in ACOEM Chapter 3, page 47 to the effect that an attending provider should incorporate some discussion of efficacy of medication for the particular condition for which it is being prescribed into his choice of recommendations. Here, however, multiple progress notes on file contained no mention of ongoing usage of Cymbalta. There was no mention of whether or not ongoing usage of Cymbalta had or had not attenuated the applicant's various depressive issues, symptoms with anxiety, insomnia, etc. The fact that the applicant remained off of work, on total temporary disability, however, suggested a lack of functional improvement as defined in MTUS 9792.20f, despite ongoing usage of Cymbalta. Therefore, the request was not medically necessary.