

Case Number:	CM13-0068464		
Date Assigned:	01/03/2014	Date of Injury:	09/05/2007
Decision Date:	09/22/2014	UR Denial Date:	12/10/2013
Priority:	Standard	Application Received:	12/19/2013

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. The expert reviewer is Board Certified in Psychiatry and is licensed to practice in California. 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/services. He/she is familiar with governing laws and regulations, including the strength of evidence hierarchy that applies to Independent Medical Review determinations.

CLINICAL CASE SUMMARY

The expert reviewer developed the following clinical case summary based on a review of the case file, including all medical records:

This is a 58-year-old male with a 9/5/07 date of injury. The mechanism of injury occurred when a coworker dropped the end of a pipe on his head. According to a psychiatric progress report dated 12/2/13, the patient complained that his neck and shoulder area continue to be a stressful issue for him and he is not managing the pain or stress well. He is having sleepless nights and having "bad thoughts". He stated that the last time he had "bad thought" he broke down and became suicidal. The patient's depression was getting worse and his thoughts were becoming disorganized. According to the provider, the mood disorder is causally related to his chronic pain syndrome. The patient's thoughts are disorganized and he is getting worse by the week. A major depression of this type can and frequently does develop into a psychotic depression and this decompensation starts with disorganized thinking. The patient has been having trouble controlling his thoughts which could mean he is becoming suicidal again. Risperidone is being used to treat the disorganized thinking associated with an emerging suicidal depression. The Risperidone is intended to block the aberrant thinking and to sedate the patient enough so he can get the restorative sleep he needs. Diagnostic impression: chronic pain complicated by severe depression requiring hospitalization. Treatment to date: medication management, activity modification, triggers point injection. A UR decision dated 12/10/13 modified the request for Risperidone from #30 with 5 refills to #30 with 1 refill. A specific rationale for modification was not provided.

IMR ISSUES, DECISIONS AND RATIONALES

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

Risperidone 1 mg #30 with 5 refills: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines, Mental Illness & Stress, Atypical anti-psychotics.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines 9792.24.2. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Pain Chapter Other Medical Treatment Guideline or Medical Evidence: FDA (Risperdal).

Decision rationale: MTUS Chronic Pain Medical Treatment Guidelines states that anxiety medications in chronic pain are recommend for diagnosing and controlling anxiety as an important part of chronic pain treatment, including treatment with anxiety medications. ODG identifies that anxiety medications in chronic pain are recommend for diagnosing and controlling anxiety as an important part of chronic pain treatment. In addition, the FDA identifies that Risperdal is indicated for the acute and maintenance treatment of schizophrenia, the short-term treatment of acute manic or mixed episodes associated with Bipolar I Disorder, and the treatment of irritability associated with autistic disorder in children and adolescents. A UR decision dated 12/10/13 modified this request for a 6-month supply of medication to a 2-month supply. This is a new medication that has been prescribed for this patient following an acute psychotic episode. Frequent and continuous evaluation is necessary for medication management of patients to determine efficacy and adverse effects. Therefore, the request for Risperidone 1mg #30 with 5 refills was not medically necessary.