

Case Number:	CM14-0141239		
Date Assigned:	09/10/2014	Date of Injury:	08/28/2003
Decision Date:	10/10/2014	UR Denial Date:	08/22/2014
Priority:	Standard	Application Received:	09/02/2014

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 Physical Medicine & Rehabilitation, has a subspecialty in Interventional Spine 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:

The patient is a 66 year-old male with an 8/28/2003 date of injury. According to the 8/5/14 psychology report from [REDACTED], the patient has chronic pain syndrome and major depression. He uses Celexa 20mg at night with Quazepam 14mg and has improved sleep and stable mood. [REDACTED] recommends over-the-counter melatonin 500mcg at night to help with sleep. On 8/22/14 UR authorized Celexa 20mg and 1 refill and denied 5 additional refills. UR denied the use of melatonin for sleep because the chronic pain syndrome and depression have resulted in the poor sleep.

IMR ISSUES, DECISIONS AND RATIONALES

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

Citalopram 10mg #120 with 6 refills: Overturned

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

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Antidepressants for chronic pain Page(s): 13-16.

Decision rationale: The patient is a 66 year-old male with an 8/28/2003 date of injury. According to the 8/5/14 psychology report from [REDACTED], the patient has chronic pain

syndrome and major depression. He uses Celexa 20mg at night with Quazepam 14mg and has improved sleep and stable mood. [REDACTED] recommends over-the-counter melatonin 500mcg at night to help with sleep. This IMR pertains to the use of Citalopram (Celexa) 10mg #120 with 6 refills. The MTUS guidelines state antidepressants are first line option for neuropathic and possible non-neuropathic pain. Celexa is a SSRI and MTUS for SSRI states they are useful for depression related to chronic pain. The patient has been diagnosed with depression and chronic pain. MTUS does not discuss limitation on refills. The request for use of Citalopram is in accordance with MTUS guidelines. Recommend authorization.

Melatonin 500mg: Overturned

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.odg-twc.com/odgtwc/pain.htm#Insomniatreatment>)

Decision rationale: The patient is a 66 year-old male with an 8/28/2003 date of injury. According to the 8/5/14 psychology report from [REDACTED], the patient has chronic pain syndrome and major depression. He uses Celexa 20mg at night with Quazepam 14mg and has improved sleep and stable mood. [REDACTED] recommends over-the-counter melatonin 500mcg at night to help with sleep. This IMR pertains to the trial of Melatonin 500mg. MTUS and ACOEM guidelines do not discuss Melatonin. ODG guidelines recommends treatment based on etiology and states melatonin/melatonin-receptor agonists are indicated for difficulty with sleep onset. The patient was reported to have difficulty with sleep due to chronic pain and depression. The requested trial of Melatonin for sleep appears to be in accordance with ODG guidelines. The request is medically necessary.