

Case Number:	CM14-0181241		
Date Assigned:	11/05/2014	Date of Injury:	02/02/2012
Decision Date:	12/09/2014	UR Denial Date:	10/14/2014
Priority:	Standard	Application Received:	10/30/2014

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 Family Medicine and is licensed to practice in North Carolina. 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 claimant had a date of injury of 2/2/2012. Diagnoses include neck and back pain, headaches, shoulder pain, anxiety and depression. Details of the industrial injury are not included in the record. Past treatments have included physical therapy, steroid injections and medications. The request is for Sertraline 50 mg #15.

IMR ISSUES, DECISIONS AND RATIONALES

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

Sertraline HCL 50mg #15: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Antidepressants Page(s): 16.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Section 2 Page(s): 13-16.

Decision rationale: The CA MTUS includes extensive support for the use of antidepressants for neuropathic pain but the evidence for antidepressant use in non-neuropathic pain is less robust. However, The CA MTUS states that antidepressants are an option in non-neuropathic pain, especially with underlying depression present, the effectiveness may be limited. It has been suggested that the main role of SSRI medications, such as the sertraline prescribed in this case, is in controlling psychological symptoms associated with chronic pain. The medical records do

include a diagnosis of depression and anxiety and state that treatment is deferred to the psychiatrist but no records of response to treatment, any side effects or persistent symptoms of depression are documented in the record. Without adequate documentation of response to treatment with Sertraline, ongoing treatment with sertraline 50 mg #15 is not demonstrated to be medically necessary.