

Case Number:	CM14-0210332		
Date Assigned:	12/23/2014	Date of Injury:	10/29/2012
Decision Date:	02/27/2015	UR Denial Date:	11/17/2014
Priority:	Standard	Application Received:	12/16/2014

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. 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, Ohio, 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 neck pain, back pain, shoulder pain, and hand pain reportedly associated with an industrial injury of October 29, 2012. In a Utilization Review Report dated November 17, 2014, the claims administrator denied a request for sertraline (Zoloft). The claims administrator did allude to historical progress notes, including April 18, 2013 progress note, in which the applicant apparently had presented with issues including emotional distress. The claims administrator stated that the request represented a retrospective request for sertraline apparently dispensed on July 3, 2013. The claims administrator contended that the attending provider had failed to attach any progress notes alongside the July 3, 2013 bill. In a March 1, 2014 psychiatric Medical-legal Evaluation, the applicant reported ongoing issues with depression and anxiety reportedly associated with hostility and harassment by her former employer. The applicant had not worked since having been terminated by her former employer. The applicant was status post earlier cervical fusion surgery. The applicant had not worked since 2012. The applicant was using hydrochlorothiazide, Coreg, Catapres, diltiazem, and Motrin, it was stated. The applicant was not using any psychotropic medications as of this point in time, it was stated. The applicant was given a Global Assessment of Functioning (GAF) 67 with associated 5% whole-person impairment rating. The medical-legal evaluator stated that the applicant's prognosis from a mental health perspective was good. The remainder of the file was surveyed, including the claims administrator's medical records list. The July 3, 2013 office visit on which sertraline (Zoloft) was dispensed was not incorporated into the Independent Medical Review packet.

IMR ISSUES, DECISIONS AND RATIONALES

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

Sertraline HCL 25 mg QTY: 1.00: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Drugs.com

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

Decision rationale: While the ACOEM Guidelines Chapter 15, page 402 does acknowledge that antidepressants such as sertraline (Zoloft) may be helpful to alleviate symptoms of depression, as were apparently present here at various points in time, 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 into his choice of recommendations. Here, however, the attending provider did not clearly incorporate any discussion of medication efficacy insofar as sertraline (Zoloft) was concerned in any of the progress notes, referenced above. As suggested by the claims administrator, it appears that the attending provider simply submitted the bill for Zoloft without attaching any accompanying progress notes and/or associated discussion of medication efficacy. Therefore, the request is not medically necessary.