

Case Number:	CM14-0214619		
Date Assigned:	01/07/2015	Date of Injury:	10/26/1990
Decision Date:	02/20/2015	UR Denial Date:	12/17/2014
Priority:	Standard	Application Received:	12/22/2014

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: New York
 Certification(s)/Specialty: Internal Medicine, Pulmonary Disease

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 retired 74 year old female with a date of injury of 10/28/1990. She has a listed diagnosis of generalized anxiety disorder, depression, fatigue and bipolar disorder. She has been treated with Xanax, Pristiq, Wellbutrin, Lithium, Lamictal and more recently Adderal was added.

IMR ISSUES, DECISIONS AND RATIONALES

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

Adderall 20mg #270: Upheld

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

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Adderal FDA approved package insert

Decision rationale: Adderal is FDA approved for the treatment of Narcolepsy and attention deficit disorder. This patient has neither diagnosis documented. Narcolepsy is not FDA approved for pain, depression, bipolar disorder or anxiety. It is not approved for the treatment of fatigue. The drug is a controlled substance stimulant and unless there is documentation of a FDA

approved indication and the drug must be used, it is not medically necessary in a 74 year old patient with the potential for heart disease.