

Case Number:	CM15-0139854		
Date Assigned:	07/29/2015	Date of Injury:	09/17/2011
Decision Date:	09/24/2015	UR Denial Date:	07/13/2015
Priority:	Standard	Application Received:	07/20/2015

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: California, Texas

Certification(s)/Specialty: Psychiatry, Geriatric Psychiatry, Addiction Psychiatry

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 injured worker is a 31 year old female who sustained an industrial injury on 09/17/2011. She reported being bitten by a K9 police dog in her upper thigh and fingers. Diagnoses include PTSD, pain disorder, body dysmorphic disorder, and major depressive disorder single episode moderate. Treatment to date has included diagnostics, physical therapy, psychotherapy, and medications. On 06/11/15, a PR2 by [REDACTED] showed that the patient currently reports a 12-pound weight gain with inability to lose it despite exercise and watching her nutrition. She complained of nausea. She had discontinued her Viibryd around 3 1/2 weeks ago. She had apparently had an episode of nightmares after not taking the Viibryd for one day. She reported previously that it was helpful. She ran out of Bupropion XL and received a letter stating that her medications would not be covered. She struggled with intrusive thoughts. She felt better when on Bupropion XL, and without it felt more anxious, disorganized, and had lower energy. She was presently off Prazosin, Bupropion XL, and Viibryd. She was alert and oriented x4, with anxious mood. Psychotherapy focused on prevention of maladaptive medical behaviors such as self-mutilation via seeking medical/surgical procedures. It was reviewed that it was necessary to be on anti-depressants, with anticipation of one year of treatment. Also reviewed was the option of gene testing to determine what medication was most appropriate. The treatment plan included pharmacogenic testing and restart Bupropion XL.

IMR ISSUES, DECISIONS AND RATIONALES

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

Pharmacogenetic test: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG).

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) pharmacogenetic testing.

Decision rationale: Studies have shown that clinically useful predictors are scarce for antidepressant therapy, and the results are inconsistent. They have shown that there is only marginal clinical association between CYP450 enzyme system (to which CYP2D6 belongs) variants and drug metabolism, efficacy, and tolerability in the treatment of depression. No large randomized trials have been conducted which would support the use of genetic testing. The existing studies have also indicated that there was no significant correlation between either the CYP450 genotype or antidepressant serum concentration and response to antidepressant treatment. Current evidence does not support the use of pharmacogenetic testing when choosing an antidepressant. Even less is understood about its utility in the treatment of anxiety disorders. Genetic testing lacks evidence based research to show its effective use in guiding the clinician towards choosing a medication regimen. Its use is considered investigational in nature. In addition, this patient appears to have been tried on only two antidepressants, with reportedly good results on bupropion XL. There is no rationale to this request, and it is therefore not medically necessary.