

DATE OF REVIEW: 3/12/07**IRO CASE #:****DESCRIPTION OF THE SERVICE OR SERVICES IN DISPUTE**

Preauthorization for chronic pain management 5 x wk x 2 wks.

A DESCRIPTION OF THE QUALIFICATIONS FOR EACH PHYSICIAN OR OTHER HEALTH CARE PROVIDER WHO REVIEWED THE DECISION

This case was reviewed by a practicing physician who is board certified in psychiatry on the external review panel who is familiar with the condition and treatment options at issue in this appeal.

REVIEW OUTCOME

Upon independent review the reviewer finds that the previous adverse determination/adverse determinations should be:

- Upheld (Agree)
- Overturned (Disagree)
- Partially Overturned (Agree in part/Disagree in part)

<i>Primary Diag Code</i>	<i>Service Being Denied</i>	<i>Billing Mod</i>	<i>Type Review</i>	<i>Units</i>	<i>DOS</i>	<i>Amt Billed</i>	<i>Date of Injury</i>	<i>DWC Claim #</i>	<i>Uphold/ Overturned</i>
724.2	97799	N/A	prospective	N/A		N/A			<i>Overturned</i>
724.2	97799	N/A	prospective	N/A		N/A			<i>Overturned</i>

INFORMATION PROVIDED TO THE IRO FOR REVIEW

1. Determination Notices – 12/20/06, 1/3/07
2. Records and Correspondence – 12/6/06-12/22/06
3. Records and Correspondence – 12/6/05

PATIENT CLINICAL HISTORY:

This case concerns an adult male who sustained a work related injury. Records indicate that while working as an equipment sales associate, he bent over to up a mixer and felt pain in his back and leg. He also indicated he could not move.

Diagnoses have included lumbar pain, ruptured and bulging discs, chronic pain syndrome and depression. Evaluation and treatment for this injury has included x-rays, MRIs, surgery, injections, physical therapy, passive therapy, work hardening, medications, psychological testing and a spinal cord stimulator.

ANALYSIS AND EXPLANATION OF THE DECISION INCLUDE CLINICAL BASIS, FINDINGS AND CONCLUSIONS USED TO SUPPORT THE DECISION.

This case concerns an adult male who sustained a work related injury with subsequent ruptured and bulging lumbar discs resulting in three separate surgeries including a fusion procedure. He suffers chronic low back pain said to be 9 on a scale of 1-10. He received varied conservative treatment, a recent spinal cord stimulator and he takes Elavil, Soma, Celebrex and Norco tablets. All treatments to date have failed to reduce his pain or to relieve his disability. Psychological testing revealed a high degree of anxiety and serious depression. Given his now severe, persistent, chronic pain with depression, lack of motivation and capacity to improve, despite all the various treatment, there is a strong possibility that some improvement could be expected with a well structured attack on the psychological personality and addictive medications aspects of his chronic pain. The requested chronic pain management should provide him with skills to reduce his pain and medication dependency that is central to his persistent pain. The patient is showing abundant psychological factors to justify the medical necessity of chronic pain management to further his recovery.

A DESCRIPTION AND THE SOURCE OF THE SCREENING CRITERIA OR OTHER CLINICAL BASIS USED TO MAKE THE DECISION:

- ACOEM- AMERICAN COLLEGE OF OCCUPATIONAL & ENVIRONMENTAL MEDICINE UM KNOWLEDGEBASE
- AHCPR- AGENCY FOR HEALTHCARE RESEARCH & QUALITY GUIDELINES
- DWC- DIVISION OF WORKERS COMPENSATION POLICIES OR GUIDELINES
- EUROPEAN GUIDELINES FOR MANAGEMENT OF CHRONIC LOW BACK PAIN
- INTERQUAL CRITERIA
- MEDICAL JUDGEMENT, CLINICAL EXPERIENCE AND EXPERTISE IN ACCORDANCE WITH ACCEPTED MEDICAL STANDARDS
- MERCY CENTER CONSENSUS CONFERENCE GUIDELINES

- MILLIMAN CARE GUIDELINES**
- ODG- OFFICIAL DISABILITY GUIDELINES & TREATMENT GUIDELINES**
- PRESSLEY REED, THE MEDICAL DISABILITY ADVISOR**
- TEXAS GUIDELINES FOR CHIROPRACTIC QUALITY ASSURANCE & PRACTICE PARAMETERS**
- TEXAS TACADA GUIDELINES**
- TMF SCREENING CRITERIA MANUAL**
- PEER REVIEWED NATIONALLY ACCEPTED MEDICAL LITERATURE (PROVIDE A DESCRIPTION)**
- OTHER EVIDENCE BASED, SCIENTIFICALLY VALID, OUTCOME FOCUSED GUIDELINES (PROVIDE A DESCRIPTION)**

AMERICAN PSYCHIATRIC ASSOCIATION GUIDELINES TO THE TREATMENT OF PSYCHIATRIC DISORDERS, COMPENDIUM, 2002, 2006.