

Notice of Independent Review Decision

DATE OF REVIEW:

06/30/2008

IRO CASE #:

DESCRIPTION OF THE SERVICE OR SERVICES IN DISPUTE

(97799) Chronic pain management program for ten days.

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

Board Certified Chiropractor

REVIEW OUTCOME

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

Provide a description of the review outcome that clearly states whether or not medical necessity exists for each of the health care services in dispute.

The medical necessity for the application of the requested continuation of the chronic pain management (CPM) program is not established.

PATIENT CLINICAL HISTORY [SUMMARY]:

Records indicate that the above captioned individual is a xx year old male who was allegedly involved in an occupational incident that reportedly occurred on or about xx/xx/xx. The history reveals that he was lifting rolls of carpet into a dumpster and reported the onset of pain in his neck, back ribs and

right shoulder. He was taken off of work on 03/20/06. Electrodiagnostic testing dated 04/25/06 was suggestive of an S1 radiculopathy. MRI examination of the lumbar spine dated 04/26/06 revealed multiple disc lesions in the lumbar spine as well as an annular tear. A cervical spine MRI dated

07/20/06 revealed stenosis as well as degenerative changes. To date, the injured individual has undergone physical therapy, chiropractic management, medication management, injections and twenty sessions of a chronic pain management program.

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

The documentation fails to establish the medical necessity or the appropriateness for the continuation of the chronic pain management program. Specifically, the request for the continuation of the CPM is inconsistent with the guidelines of the Official Disability Guidelines (ODG). The ODG recommends no more than twenty visits of the program. Moreover, according to the ODG, negative predictors of outcome include long periods of disability and continued dependence to opioids. These specific negative predictors are present in this particular case.

Moreover, the interim data after the initial nineteen to twenty sessions is equivocal. The injured

individual continues to show opiate dependency, pain levels were increased, anxiety was decreased but depression was increased.

Lastly, according to the documentation and notations, the injured individual is capable of Medium Physical Demand Level (PDL) duty. The pre-injury job requirements were Medium to Medium Heavy. The American College of Occupational and Environmental Medicine (ACOEM) as well as the ODG favor a return to work over the participation of return to work programs as having the highest favorable outcome possibilities.

Given the equivocal interim data and consistent with the ODG, the medical necessity for the continuation of the requested CPM is not established.

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**
- **ODG- OFFICIAL DISABILITY GUIDELINES & TREATMENT GUIDELINES**