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Notice of Independent Review Decision

DATE OF REVIEW:
04/03/2009

IRO CASE #:

DESCRIPTION OF THE SERVICE OR SERVICES IN DISPUTE
160 hours work hardening

A DESCRIPTION OF THE QUALIFICATIONS FOR EACH PHYSICIAN OR OTHER HEALTH CARE PROVIDER WHO REVIEWED THE DECISION
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 requested 160 hours work hardening is not medically necessary.

INFORMATION PROVIDED TO THE IRO FOR REVIEW
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PATIENT CLINICAL HISTORY [SUMMARY]:

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Records indicate that the above captioned individual is a female who allegedly sustained injuries as a result of an occupational incident. The history reveals that she was pulling a jack full of pallets and felt a sudden onset of severe low back pain. Two previous courses of physical therapy netted minimal therapeutic gains. A Functional Capacity Exam (FCE) revealed that the injured individual was performing at a level not consistent with a return to work. A psychological evaluation demonstrated significant evidence of depression and anxiety.

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

The appeal of the previously denied course of care was predicated on reports in the previous adverse determination that there was not a sufficient attempt at lower forms of care and that there was insufficient explanation for the two contemporary disparitous psychological evaluations. However the documentation does indicate that there were some initial gains in the initial course of physical therapy (PT) and evidence of a plateau in progress through the second course of PT. Moreover, the documentation makes and adequate explanation as to the seeming dramatic rise in depression and anxiety scores. The administration of the initial assessment was deemed flawed and a second more detailed and one on one interactive assessment revealed significant psychosocial issues that could have a negative impact on the injured individual's progress. Even though these factors suggest that the injured individual is an appropriate candidate for the consideration of a return to work multidisciplinary program, the request is inconsistent with the guidelines of the Official Disability Guideline which suggest a trial of two weeks with reassessment to determine the viability and necessity for any additional participation. A more reasonable request would have been two weeks, 80 hours. Given that the request was for 160 hours, the medical necessity is not established.

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

ODG- OFFICIAL DISABILITY GUIDELINES & TREATMENT GUIDELINES