

Becket Systems

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NOTICE OF INDEPENDENT REVIEW DECISION

DATE OF REVIEW:

Jun/23/2010

IRO CASE #:

DESCRIPTION OF THE SERVICE OR SERVICES IN DISPUTE:

Continued Chronic Pain Management 5x2 80 hours Lumbar 97799

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

MD, Board Certified in Physical Medicine and Rehabilitation
Subspecialty Board Certified in Pain Management

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)

INFORMATION PROVIDED TO THE IRO FOR REVIEW

Official Disability Guidelines Treatment in Workers' Compensation, Chapter: Pain
Workers' Comp Services, Notifications, 4/9/10, 5/7/10
Family Practive 3/9/10
3/26/10, 4/20/10, 3/31/10

PATIENT CLINICAL HISTORY SUMMARY

This woman was reportedly injured on xx/xx/xx when she was lifting a 100-pound box. Her diagnosis was lumbar intervertebral disc displacement and lumbosacral radiculitis. Physical therapy was not successful. She failed back pain treatments including facet neurectomy. She completed 10 sessions of a pain program with reduction in pain medications. She has had reduction in symptoms of depression, anxiety, pain and fear avoidance regarding engagement in work activities. She has had some reduction of her pain from 9 to 7. She entered a vocational program. She has improved her sleep. A request for 10 additional pain management sessions has been made to focus on further decreasing her pain levels, increasing physical activity levels, maintaining her manageable levels of anxiety and depressive symptoms, and decrease her medication further. The additional sessions are requested to help the patient achieve a more comprehensive recovery.

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

ODG recommends treatment in a chronic pain program beyond the initial 10 days if the patient has had subjective and objective gains and improvement in function.

“(10) Treatment is not suggested for longer than 2 weeks without evidence of compliance and significant demonstrated efficacy as documented by subjective and objective gains. (Note: Patients may get worse before they get better. For example, objective gains may be moving joints that are stiff from lack of use, resulting in increased subjective pain.) However, it is also not suggested that a continuous course of treatment be interrupted at two weeks solely to document these gains, if there are preliminary indications that they are being made on a concurrent basis.”

According to the records reviewed, this patient has experienced a reduction in pain. She has also reduced her medications. She is in a vocational program and is on track to return to work. The notes indicate that there has been subjective and objective progress in this patient's case. The ODG criteria for continuation of the program has thus been satisfied. The reviewer finds that Continued Chronic Pain Management 5x2 80 hours Lumbar 97799 is medically necessary.

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

ACOEM-AMERICA COLLEGE OF OCCUPATIONAL & ENVIRONMENTAL MEDICINE UM KNOWLEDGBASE

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)