

IBecket Systems

An Independent Review Organization
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NOTICE OF INDEPENDENT REVIEW DECISION

DATE OF REVIEW: Jul/07/2010

IRO CASE #:

DESCRIPTION OF THE SERVICE OR SERVICES IN DISPUTE:

Myobloc Injections Outpatient 64612 x3 1 every 4 months

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

MD, Board Certified Neurologist with 30 years experience in clinical practice

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

Denial Letters, 3/26/10, 5/5/10

Neurological Clinic 6/14/10, 1/13/10, 8/16/09, 2/23/10, 8//31/09

Radiological Association 6/15/10

Official Disability Guidelines – Treatment for Workers' Compensation, Head, Botulinum toxin

PATIENT CLINICAL HISTORY SUMMARY

This patient has suffered a cerebellar stroke and had developed sialorrhea as a result as well as left sided spastic hemiplegia and is in a wheelchair. He is at risk for aspiration. Botulinum toxin injections have been effective controlling the sialorrhea for about 4 months at a time.

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

Patients with sialorrhea benefit from botulinum injections and decrease the risk of aspiration pneumonia. (See: Ann Otol Rhinol Laryngol. 2008 Feb;117(2):118-22; Botulinum toxin injection to the salivary glands for the treatment of sialorrhea with chronic aspiration.)

According to the records it has benefited this patient. The records document that injections have been effective controlling his sialorrhea for about 4 months at a time. The records document the degree of spasticity as well as the degree of disability from the spasticity to justify the use of botulinum toxin. He also is on medication to relieve spasm. The reviewer finds that medical necessity does exist for Myobloc Injections Outpatient 64612 x3 1 every 4 months.

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 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)

Ann Otol Rhinol Laryngol. 2008 Feb;117(2):118-22.

Botulinum toxin injection to the salivary glands for the treatment of sialorrhea with chronic aspiration.

OTHER EVIDENCE BASED, SCIENTIFICALLY VALID, OUTCOME FOCUSED GUIDELINES (PROVIDE A DESCRIPTION)