



Medical Review Institute of America, Inc.
America's External Review Network

DATE OF REVIEW: November 16, 2010

IRO Case #:

Description of the services in dispute:

Chronic pain management program (10 sessions/80 hours) CPT #97799

A description of the qualifications for each physician or other health care provider who reviewed the decision:

This physician reviewer is board certified by the American Board of Anesthesiology in General Anesthesiology and Pain Medicine. This reviewer is a member of American Society of Anesthesiology, American Society of Interventional Pain Physicians, and American Society of Regional Anesthesia.

Review Outcome:

Upon independent review the reviewer finds that the previous adverse determination/adverse determinations should be upheld. The requested chronic pain management program (10 sessions/80 hours) CPT #97799 is not medically necessary.

Information provided to the IRO for review:

Received from the State 11/09/10:

- Notice to of Case Assignment 11/09/10 – 1 page.
- Notice of Assignment of Independent Review Organization 11/09/10 – 1 page.
- Confirmation of Receipt of a Request for a Review by an Independent Review Organization 11/08/10 – 5 pages.
- Request for a Review by an Independent Review Organization 08/31/10, 10/12/10 – 4 pages.
- Utilization Review 07/14/10 – 8 pages.
- Utilization Review 08/06/10 – 8 pages.

Received from the Provider 11/15/10:

- Rehabilitation Request for 10 Additional Sessions of Interdisciplinary Chronic Pain Management 08/20/10 – 2 pages.
- Rehabilitation Request for 10 Additional Sessions of Interdisciplinary Chronic Pain Management 07/22/10 – 2 pages.
- Letter from MD 06/22/10 – 1 page.
- Pain Management Follow Up Evaluation of MD 06/15/10 – 2 pages.
- Rehabilitation Team Treatment Plan 06/04/10 – 8 pages.

- Letter from MD 04/20/10 – 1 page.
- Rehabilitation Request for 10 Additional Sessions of Interdisciplinary Chronic Pain Management 06/04/10 – 9 pages.
- Pain Management Follow Up Evaluation of MD 03/02/10 – 2 pages.
- Letter from MD 02/04/10 – 1 page.

Patient clinical history [summary]:

The patient is a male who sustained an injury to the low back on xx/xx/xx while attempting to load a 150 pound steel jack onto a flat bed service truck. The patient is status post lumbar laminectomy in 11/09. The patient saw Dr. on 02/04/10 for follow up. The patient states he has been undergoing therapy and reports some improvement. Physical exam reveals forward flexion to about 25 degrees. The patient reports pain with attempted straight leg raise on the right side, but there are no true nerve root tension signs. No motor weakness is detected. The patient is recommended to continue physical therapy. The patient saw Dr. on 03/02/10 with complaints of low back pain that radiates into the right lower extremity. The patient rates the pain at 6/10. The patient also reports numbness, tingling, and weakness of the right lower extremity. The patient denies bowel or bladder dysfunction. Current medications include hydrocodone. Physical exam reveals diminished lumbosacral range of motion. Straight leg raise is positive on the right. There is decreased sensation to light touch in the right L4 dermatomal distribution. The patient is prescribed Lyrica 75mg. The patient saw Dr. on 04/20/10. The note states the patient has been started on Neurontin. At low doses the Neurontin is not helpful. At high doses the medication is helpful but makes driving difficult. Physical exam reveals tenderness to palpation of the incision. Forward flexion is to 20 degrees. Reflexes are normal. The patient is recommended for further pain management and therapy.

The patient is seen for psychological diagnostic interview on 06/04/10. The patient complains of pain in the lumbar region. The patient rates the pain at 6/10. Current medications include Lyrica 150 mg and hydrocodone, although the patient states he has run out of hydrocodone. The note states the patient is depressed, hopeless, aggravated, and frustrated about his ongoing pain. The patient states he is functioning at approximately 50% of his pre-injury capacity. The patient reports sleep disturbance due to pain. At this time, the patient has completed 8 out of 10 sessions of an interdisciplinary pain management program. On 04/21/10, the patient's BDI score was 6 and on 06/01/10, the score was 11. On 04/21/10, the patient's BAI score was 5 and on 06/01/10, the score was 3. On 04/21/10, the patient's Oswestry score was 50 out of 100, and on 06/01/10 the score was 44 out of 100. The patient is assessed with pain disorder associated with both psychological factors and general medical condition. The patient is recommended for 10 additional sessions of a chronic pain management program. The patient saw Dr. on 06/15/10. The patient complains of low back pain with radiation into the right lower extremity. The patient rates the pain at 8/10. The patient denies bowel or bladder dysfunction. Current medications include Lyrica 150 mg. The patient is not currently taking any narcotics. Physical exam reveals diminished lumbosacral range of motion. Straight leg raise is positive on the right. Sensation of the lower extremities is decreased to light touch in the right L4 dermatomal distribution. The patient is

assessed with continuation of low back pain with radiation to the right lower extremity. The patient is continued on Lyrica 150 mg.

The patient saw Dr. on 06/22/10 with complaints of pain in the incision area. Physical exam reveals tenderness to palpation around the incision. Forward flexion is to 20 degrees. There are no true nerve root tension signs. The patient is recommended to continue with non-operative management and possibly pain management. The request for 10 sessions of chronic pain management program was denied by utilization review on 07/14/10 due to lack of significant improvement in BAI and BDI scores. The average pain level only decreased to 5 from the previous 6. The patient is not actively seeking pain medication and is only on Lyrica. There is evidence of symptom magnification. The benefit of additional sessions of a chronic pain management program is unclear at this time. The request for was denied by utilization review on 08/06/10 due to no significant improvement in pain score. The patient's depression score has increased, and his physical demand level has barely changed. There is lack of sufficient positive progress to warrant continuing this program.

Analysis and explanation of the decision include clinical basis, findings and conclusions used to support the decision.

Based on the clinical documentation provided for review, there is insufficient objective evidence of significant functional improvement with the initial chronic pain management program to warrant additional sessions. The patient had minimal scores on BDI and BAI testing with no significant improvement noted. The patient currently is not taking a significant amount of medications that would reasonably require further therapy to reduce medication intake. The patient did not make any significant improvement with pain scores and did not exhibit any significant functional improvement with therapy. The patient's elevated pain scores exhibit possible symptom magnification. Current evidence-based guidelines recommend that there be clinical documentation regarding objective functional improvement to warrant additional chronic pain management program sessions. Given that the patient does not exhibit significant improvement with therapy, additional sessions would not be indicated. As such, the prior denials are upheld.

The patient did not exhibit significant objective functional improvement with the initial chronic pain management program provided as recommended in current evidence-based guidelines. Further chronic pain management program sessions are not medically necessary. Based on the clinical information submitted for this review and using the evidence-based, peer-reviewed guidelines referenced below, the prior denials are upheld.

A description and the source of the screening criteria or other clinical basis used to make the decision:

Official Disability Guidelines, Online Version, Pain Chapter