



Notice of Independent Review Decision

DATE OF REVIEW: 11/15/11

DATE OF AMENDED REVIEW: 11/16/11

IRO CASE #:

DESCRIPTION OF THE SERVICE OR SERVICES IN DISPUTE

OP Left L5-S1 Discectomy/Foramentatomy 63047 63048 77002 95861 95920

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

Board Certified in Orthopedic Surgery

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)

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.

OP Left L5-S1 Discectomy/Foramentatomy 63047 63048 77002 95861 95920 –
UPHELD

INFORMATION PROVIDED TO THE IRO FOR REVIEW

- Lumbar Spine MRI – 11/08/10
- Initial Pain Consultation, 01/31/11
- Operative Report, 02/09/11

- Phone Call, 02/14/11
- Evaluation, 02/28/11, 03/31/11, 04/25/11, 06/15/11
- Designated Doctor Evaluation, 03/24/11
- Electrodiagnostic Testing, 06/15/11
- Follow Up Note, 06/30/11, 07/21/11
- Evaluation, 08/31/11
- Utilization Review Referral, 09/08/11
- Denial Letters, 09/14/11, 10/12/11
- Correspondence, 09/26/11

PATIENT CLINICAL HISTORY [SUMMARY]:

The patient was hurt at work while throwing away the trash on xx/xx/xx. She had complaints of low back pain that radiated down the left leg with numbness and tingling. She had undergone physical therapy, without benefit. A lumbar ESI gave her 40% relief for two weeks. Neurontin was used with “some relief”. A lumbar MRI showed mild diffuse degenerative changes with a disc herniation at L5-S1 causing moderate left neural foraminal stenosis. Electrodiagnostic studies showed left L5 radiculopathy. A left L5-S1 laminectomy discectomy was recommended.

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

The patient has been evaluated by multiple physicians, and the physical examination findings are inconsistent from physician to physician with the only finding consistent being a positive straight leg raise. The patient has an MRI showing L5-S1 stenosis with a mild disc bulge. The electrical study notes an L5 radiculopathy on the left. Further, the two previous Peer Reviewers recommended non-certification with the notation being the patient had a normal sensory examination and no other neurological findings on physical examination with only the straight leg raise positive. With the lack of neurological findings supporting this request, it does not meet ODG criteria that indicate under Symptoms and Findings that a physical examination which confirms the presence of radiculopathy with objective findings needs to be present in association with straight leg raising, crossed straight leg raising, and reflex examination correlating. At this time such findings are not documented. Therefore, the patient does not meet ODG criteria.

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**
- 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)**
- AMA 5TH EDITION**