

# MATUTECH, INC.

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## Notice of Independent Review Decision

**DATE OF REVIEW:** August 30, 2011

**IRO CASE #:**

**DESCRIPTION OF THE SERVICE OR SERVICES IN DISPUTE**

Outpatient work conditioning program 5 x week for 4 weeks as related to the lumbar spine

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

Fellow American Academy of Physical Medicine and Rehabilitation

**REVIEW OUTCOME**

Upon independent review the reviewer finds that the previous adverse determination/adverse determinations should be:

X Upheld (Agree)

Medical documentation **does not support** the medical necessity of the health care services in dispute.

**INFORMATION PROVIDED TO THE IRO FOR REVIEW**

- Diagnostics (07/01/11)
- FCE (07/19/11)
- Utilization Reviews (08/02/11– 08/03/11)
  
- Office visits (06/05/11 – 06/23/11)
- Diagnostics (07/01/11)
- FCE (07/19/11)
  
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- FCE (07/19/11)
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- Utilization Reviews (08/02/11– 08/03/11)

[ODG has been utilized for the denials.](#)

**PATIENT CLINICAL HISTORY [SUMMARY]:**

The patient is a male who suffered injury to his low back on xx/xx/xxxx. He was taken via ambulance to the Medical Center emergency room (ER) for low back pain radiating into the right leg. On examination there was moderate pain in the right lower back. He was also noted to have high blood pressure. The patient was diagnosed with back pain with sciatica and was prescribed Norco and prednisone.

Two weeks later, the patient was seen at Healthcare and was noted to have positive straight leg raise (SLR) testing, Braggard's, Yeoman's, and Kemps on the right and positive Goldthwaites test bilaterally. Range of motion (ROM) was reduced with flexion and extension on the left and with lateral flexion bilaterally. Magnetic resonance imaging (MRI) of the lumbar spine was unremarkable. Functional capacity evaluation (FCE) placed the patient at the medium physical demand level (PDL) versus heavy PDL. The patient was diagnosed with lumbosacral sprain and lumbar disc displacement and was released to work with restrictions.

The provider M.D. recommended outpatient work conditioning program five times a week for four weeks. But this was denied by M.D., with the following rationale: *"ODG Work Conditioning Physical Therapy Guidelines amounts an additional series or intensive physical therapy (PT) visits required beyond a normal course of PT, primarily for exercise training/supervision (and would be contraindicated if there are already significant psychosocial, drug or attitudinal barriers to recovery not addressed by these programs). Work conditioning visits will typically be more intensive than regular PT visits, lasting two or three times as long. And, as with all PT programs, work Conditioning participation does not preclude concurrently being at work. Timelines: 10 visits over 4 weeks, equivalent to up to 30 hours with the apparent level of pain indicated and with the only conservative treatment noted was the PT. There is not sufficient documentation rational for outpatient work Conditioning. Program five times a week for four weeks as related to the lumbar spine, thus the request is not medically reasonable or necessary."*

On August 3, 2011, the appeal was denied, rationale: *"The claimant injured his low back in xx/xxxx. MRI of the lumbar spine was normal and the claimant has undergone 10 sessions of PT. He is currently at a medium PDL and according to Dr. on 07/19/2011 showed moderate signs of decreased functional abilities and decreased endurance. This appeal is for the previously requested 20 sessions of work conditioning (5 days per week times 4 weeks). The ODG states: Work conditioning amounts to an additional series of intensive PT visits required beyond a normal course of PT, primarily for exercise training/supervision (and would be contraindicated if there are already significant psychosocial, drug or attitudinal barriers to recovery not addressed by these programs). Work conditioning visits will typically be more intensive than regular PT visits, lasting 2 or 3 times as long. And, as with all PT programs. Work conditioning participation does not preclude concurrently being at work. Timelines: 10 visits over 4 weeks, equivalent to up to 30 hours. The request as written is not medically reasonable and necessary. The claimant should be performing home exercise program (HEP) to increase his endurance."*

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

Based on ODG the request for twenty sessions of work conditioning is not recommended as the accepted time is ten sessions over four weeks. In addition, the request came only four weeks post injury and deconditioning should not be an issue.

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

**X ODG- OFFICIAL DISABILITY GUIDELINES & TREATMENT GUIDELINES**