

# **Parker Healthcare Management Organization, Inc.**

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## **Notice of Independent Review Decision**

**DATE OF REVIEW:** FEBRUARY 23, 2012

**IRO CASE #:**

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

Medical necessity of proposed chronic pain management program per hour , 80 hours(97799)

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

This case was reviewed by a Medical Doctor licensed by the Texas State Board of Medical Examiners. The reviewer specializes in Physical Medicine and Rehabilitation and is engaged in the full time practice of medicine.

### **REVIEW OUTCOME**

### **PATIENT CLINICAL HISTORY [SUMMARY]:**

The patient sustained a work related injury on xx/xx/xx. He has had diagnostic testing, physical therapy, psychotherapy, surgeries and medication.

### **ANALYSIS AND EXPLANATION OF THE DECISION INCLUDE CLINICAL BASIS, FINDINGS AND CONCLUSIONS USED TO SUPPORT THE DECISION. IF THERE WAS ANY DIVERGENCE FROM DWC'S POLICIES/GUIDLEINES OR THE NETWORK'S TREATMENT GUIDELINES, THEN INDICATE BELOW WITH EXPLANATION.**

I reviewed the documents provided both and by xxxx, the URA in this case, and quite simply the facts are this individual does not have a significant psychological component of pain. He is working full-time at a lighter-duty position. His problem is crush injury to the hand with multiple reconstructive surgeries by Dr.. It is unlikely that he will have the capability to return to a PDC level of heavy and there is no indication that a chronic pain program focused on psychological support and therapy is the appropriate treatment.

In particular, he does not meet many of the required needs of chronic pain in regards to psychological dysfunction and depression and inability to handle his pain. The rationale given is

that it has been over two years since his injury, so he does not qualify for a work hardening program. I would have to agree with the URA. Just because he may not qualify for a work hardening or work conditioning program does not mean he is automatically a candidate for an alternate therapy such as chronic pain management.

In this case, the facts of the case do not support a treatment program of chronic pain management for this individual.

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

XX MEDICAL JUDGEMENT, CLINICAL EXPERIENCE AND EXPERTISE IN ACCORDANCE WITH ACCEPTED MEDICAL STANDARDS

XX ODG- OFFICIAL DISABILITY GUIDELINES & TREATMENT GUIDELINES