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**IRO Certificate #4599**

DATE OF REVIEW: 6/30/16

IRO CASE NO.

DESCRIPTION OF THE SERVICE OR SERVICES IN DISPUTE

Lumbar laminectomy, discectomy at L5-S1, CPT code 63047, one day length of stay at

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

Physician Board Certified in Neurosurgery

REVIEW OUTCOME

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

Upheld (Agree)

**Overturned (Disagree) X**

Partially Overturned (Agree in part/Disagree in part)

PATIENT CLINICAL HISTORY SUMMARY

XX is a female with a long and unfortunate history of multiple spine surgeries (7). She was injured at work in XX/XX. Her most recent surgery was in XX at which time the hardware was removed at L5-S1 and the fusion was re-done. She continued to have pain in her back and right leg. Earlier this year she underwent the transforaminal injection X/XX/XX of the L5 nerve root which resulted in temporary 100% relief of her symptoms; the next day her pain returned and based on the response to the injection, her surgeon recommended an L5-S1 laminectomy and right sided foraminotomy. Apparently this was put in as a (CPT code) 63042 with a 1 day stay and was approved. There was some confusion as to the right coding which ultimately is (CPT code) 63047 with a 1 day stay and when re-submitted, it was denied.

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

**Opinion: I disagree with the benefit company's decision to deny the requested service(s).**

Rationale: I reviewed Ms XX MRI scan. She has not, as stated in the summary, had a laminectomy at L5-S1. She has actually had a right sided L5-S1 hemilaminectomy and thus has the entire midline and left sided bone intact. Also, a review of the MRI scan does show foraminal stenosis on the right and some compression of the right L5-S1 nerve root. That's why I think, overall, a decompressive surgery is reasonable, particularly given her response to the injection at that level. As in regard to the correct codes, since she has an intact left hemilamina at L5, the correct code would, in fact, be 63047 rather than 63042 which is for a recurring laminectomy when one has already been performed. Given her long history of multiple lumbar spine surgeries and pain management needs, I think a one day stay is certainly reasonable.

This is easily one of the more unusual cases I've been asked to review. Nobody seems to dispute the need for decompression of the affected nerve roots and a one day stay in the hospital for post operative care. It seems that regardless of the CPT code this is done under, I'm not sure what the fuss is for. Regardless, she does in fact, have intact hemilamina on the left, thus, 63047 is the more accurate CPT code, again with a one day stay in the hospital given the patient's history.

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

ACOEM-AMERICAN COLLEGE OF OCCUPATIONAL & ENVIRONMENTAL  
MEDICINE UM KNOWLEDGE BASE

AHCPR-AGENCY FOR HEALTH CARE 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 & EXPERTISE IN ACCORDANCE WITH  
ACCEPTED MEDICAL STANDARDS X**

MERCY CENTER CONSENSUS CONFERENCE GUIDELINES

MILLIMAN CARE GUIDELINES

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

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 DESCRIPTION)

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