October 10, 2002

Re: Medical Dispute Resolution
MDR #: M5.02.2961.01
IRO Certificate No.: IRO 5055

Dear
IRI has performed an independent review of the medical records of the above-named case to determine medical necessity. In performing this review, IRI reviewed relevant medical records, any documents provided by the parties referenced above, and any documentation and written information submitted in support of the dispute.

The independent review was performed by a matched peer with the treating health care provider. Your case was reviewed by a physician who is Board Certified in Pain Management and Anesthesiology.

The physician reviewer **PARTIALLY AGREES** with the determination of the insurance carrier in this case. The reviewer is of the opinion that the use of Skelaxin from 07.30.01 through 02.19.02 **WAS NOT MEDICALLY NECESSARY.** The reviewer feels that the use of Celebrex from 07.30.01 through 02.19.02 **WAS MEDICALLY NECESSARY.**

I am the Secretary and General Counsel of ___ and I certify that the reviewing healthcare professional in this case has certified to our organization that there are no known conflicts of interest that exist between him and any of the treating physicians or other health care providers or any of the physicians or other health care providers who reviewed this case for determination prior to referral to the Independent Review Organization.

We are forwarding herewith a copy of the referenced Medical Case Review with reviewer's name redacted.

Sincerely,

MEDICAL CASE REVIEW

This is for ___. I have reviewed the medical information forwarded to me concerning MDR #M5-02-2961-01, in the area of Pain Management. The following documents were presented and reviewed:

A. <u>MEDICAL INFORMATION REVIEWED</u>:

1. Medical records, ___, 5/15/97 - 4/23/02.
2. Pharmacy records.

B. BRIEF CLINICAL HISTORY:

The claimant was allegedly injured on ___. No documentation is provided regarding the mechanism of that injury or subsequent pain complaints.

On 5/15/97, ___ performed left lumbar facet injections at L2-3, L3-4, and L5-S1. He documented that the claimant had undergone L4-5 posterior lumbar interbody fusion on 2/07/95, subsequently doing well but then developing recurrent pain in the low back and left leg.

The facet injections were performed on 5/15/97 with no follow-up documented until 8/18/98. At that time, the claimant returned to ___, again complaining of left lumbar pain radiating into the left leg. ___ indicated that the fact injections in 1997 had provided "improvement." Physical exam documented "positive bilateral facet signs," not otherwise explained. On 8/18/98, another set of facet injections was performed.

The claimant subsequently followed up on 6/06/01, continuing to complain of the same complaints. At this point, he was taking Celebrex, at an undocumented dosage; Skelaxin was prescribed for spasm. Physical examination demonstrated "positive facet signs" but no lumbar spasm.

The next follow-up is documented as 10/10/01, approximately four months later. The claimant had the same pain complaints, still taking Celebrex and Skelaxin, at unknown dosages. Similar follow-ups were documented on 1/23/02 and 4/23/02.

C. DISPUTED SERVICES:

Use of Celebrex and Skelaxin from 7/30/01 through 2/19/02.

D. DECISION:

I PARTIALLY AGREE WITH THE DETERMINATION OF THE INSURANCE CARRIER IN THIS CASE. I SPECIFICALLY AGREE THAT SKELAXIN IS NOT MEDICALLY NECESSARY. I SPECIFICALLY DISAGREE REGARDING CELEBREX AND FEEL IT IS MEDICALLY NECESSARY IN THIS CASE.

E. RATIONALE OR BASIS FOR DECISION:

Skelaxin is a muscle relaxant indicated for short-term use of muscle spasms following such acute injuries as sprains or strains. No physical examination documents any lumbar muscle spasms to justify the continued use of Skelaxin over the time period in question (7/30/01 - 2/19/02). However, Celebrex is an anti-inflammatory with significantly less risk of gastrointestinal toxicity compared to standard anti-inflammatories. Given this patient's complaint of low back pain, an anti-inflammatory is medically reasonable and necessary, and Celebrex is an excellent choice for that class of medications. Long-term use of other

standard anti-inflammatories would have significantly greater risk of developing gastrointestinal toxicity or gastrointestinal bleeding complications.

F. DISCLAIMER:

The opinions rendered in this case are the opinions of this evaluator. This medical evaluation has been conducted on the basis of the documentation as provided to me with the assumption that the material is true, complete and correct. If more information becomes available at a later date, then additional service, reports or consideration may be requested. Such information may or may not change the opinions rendered in this evaluation. My opinion is based on the clinical assessment from the documentation provided.

I certify that I have no past or present relationship with the patient and no significant past or present relationship with the attending physician. I further certify that there is no professional, familial, financial, or other affiliation, relationship, or interest with the developer or manufacturer of the principal drug, device, procedure, or other treatment being recommended for the patient whose treatment is the subject of this review. Any affiliation that I may have with this insurance carrier, or as a participating provider in this insurance carrier's network, at no time constitutes more than 10% of my gross annual income.

Date: 7 October 2002