MDR Tracking Number: M5-02-2964-01

Under the provisions of Section 413.031 of the Texas Workers' Compensation Act, Title 5, Subtitle A of the Texas Labor Code, effective January 1, 2002 and Commission Rule 133.305 and 133.308 titled Medical Dispute Resolution by Independent Review Organizations, the Medical Review Division assigned an IRO to conduct a review of the disputed medical necessity issues between the requestor and the respondent.

The Medical Review Division has reviewed the IRO decision and determined that **the requestor prevailed** on the issues of medical necessity. Therefore, the IRO fee issue is moot since the respondent paid the fee.

In accordance with §413.031(e), it is a defense for the carrier if the carrier timely complies with the IRO decision.

Based on review of the disputed issues within the request, the Medical Review Division has determined that medical necessity was the only issue to be resolved. The prescription medications (Remeron, Wellbutrin, Amitriptylin, Topamax, Vioxx, Methocarbam, Lorazepam and Hydroco/Apap) were found to be medically necessary. The respondent raised no other reasons for denying reimbursement charges for the prescription medications (Remeron, Wellbutrin, Amitriptylin, Topamax, Vioxx, Methocarbam, Lorazepam.

This Finding and Decision is hereby issued this 21st day of October 2002.

Carol R. Lawrence
Medical Dispute Resolution Officer
Medical Review Division

On this basis, and pursuant to §§402.042, 413.016, 413.031, and 413.019 of the Act, the Medical Review Division hereby ORDERS the respondent to pay the unpaid medical fees in accordance with the fair and reasonable rate as set forth in Commission Rule 133.1(a)(8) plus all accrued interest due at the time of payment to the requestor within 20 days of receipt of this order. This Order is applicable to dates of service 11/9/01 through 7/12/02 in this dispute and IRO fee.

The respondent is prohibited from asserting additional denial reasons relative to this Decision upon issuing payment to the requestor in accordance with this Order (Rule 133.307(j)(2)).

This Order is hereby issued this 21st day of October 2002.

Roy Lewis, Supervisor
Medical Dispute Resolution
Medical Review Division

RL/cl

October 15, 2002

Re: Medical Dispute Resolution
MDR #: M5.02.2964.01
IRO Certificate No.: IRO 5055

Dear

___ has performed an independent review of the medical records of the above-named case to determine medical necessity. In performing this review, ___ 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. This case was reviewed by a physician who is Board Certified in Psychiatry.

Clinical History:
This is a 49-year-old female injured on the job by a shower rod falling on her head. Over the following two to three months she developed an anxiety disorder and major depressive disorder, which was treated successfully with psychotherapy and psychopharmacology.

Disputed Services:
Medications: Remeron, Wellbutrin, amitriptyline, Topamax, methocarbamine, Vioxx, Lorazepam, Hydrocodone/APAP, during the period 11.09.01 through 02.12.02.

Decision:
The reviewer disagrees with the determination of the insurance carrier. The reviewer is of the opinion that the medications listed above were medically necessary in this case.

Rationale for Decision:
The reviewer states that it is important to distinguish between psychological treatment with psychotherapy and psychopharmacological treatment with antidepressants, mood stabilizers, and anti-anxiety medications such as are in dispute. It is not correct to assume that either psychological or pharmacological treatment works equally well in treating the conditions. The psychological treatment was able to be ended; but it was felt that the pharmacological treatment needed to be continued.

It should be noted that at one point in the patient's treatment her doctor noted that the patient was having suicidal ideation. The doctor specifically stated these ideations were because she had been off the medicines, which he had

prescribed. At a later date, by re-establishing the medications, he was seeing an improvement in depression and lessening of suicidal ideation. The patient still requires ongoing pharmacological treatment for the same injury-induced mood and anxiety disorders. As reported by the *National Institute of Mental Health Guidelines*, it is reasonable in psychiatric treatment to note the necessity of continuing antidepressant and mood stabilizing medication indefinitely.

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.

Sincerely,