

MDR Tracking Number: M5-04-2283-01

Under the provisions of Section 413.031 of the Texas Workers' Compensation Act, Title 5, Subtitle A of the Texas Labor Code, effective June 17, 2001 and Commission Rule 133.305 titled Medical Dispute Resolution - General 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 dispute was received on 3-23-04.

The Medical Review Division has reviewed the enclosed IRO decision and determined that **the requestor did not prevail** on the issues of medical necessity. The IRO agrees with the previous determination that the office visits, therapeutic exercises, neuromuscular re-education, joint mobilization, and therapeutic procedures from 7/10/03 through 9/05/03 were not medically necessary. Therefore, the requestor is not entitled to reimbursement of the IRO fee.

Based on review of the disputed issues within the request, the Medical Review Division has determined that medical necessity fees were the only fees involved in the medical dispute to be resolved. As the services listed above were not found to be medically necessary, reimbursement for dates of service 7/10/03 through 9/05/03 are denied and the Medical Review Division declines to issue an Order in this dispute.

This Decision is hereby issued this 3<sup>rd</sup> day of June 2004.

Regina L. Cleave  
Medical Dispute Resolution Officer  
Medical Review Division

RLC/rlc

May 21, 2004

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IRO Certificate No.: 5055

\_\_\_ 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.

I am the Secretary and General Counsel of \_\_\_\_ 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.

Information and medical records pertinent to this medical dispute were requested from the Requestor and every named provider of care, as well as from the Respondent. The independent review was performed by a matched peer with the treating health care provider. This case was reviewed by a physician who is certified in the area of Physical Medicine & Rehabilitation and is currently on the TWCC Approved Doctor List.

## **REVIEWER'S REPORT**

### **Information Provided for Review:**

TWCC-60, Table of Disputed Services, EOB's  
Office notes, FCE, physical therapy notes and correspondence 06/03 through 09/03.

Letter of medical necessity 04/03/04

### **Clinical History:**

The patient is a 51-year-old gentleman who during the scope of his employment sustained injury to his "4th digit". Although it is not relevant to this dispute, it is unclear from the records provided for review whether the 4th digit means the small finger or the ring finger, because both ring finger and small finger are listed as having been injured.

On 9/05/03 the patient was having trouble with carrying, climbing, sleeping. The therapy includes carpal tunnel syndrome stretching, treadmill for 15 minutes, stationery bike training for 15 minutes, and upper extremity passive activities. One goal is to reduce myofascial pain and improve muscle tone. He was getting approximately 1 hours worth of therapy, i.e., 4 units at 15 minutes a piece, 30 minutes of that being the treadmill and the stationery bicycle. He is proceeding with everything well, and he is getting good cardiovascular exercise. He is getting ultrasound, paraffin baths, hot and cold packs to the finger

### **Disputed Services:**

Office visits, therapeutic exercises, therapeutic procedures, joint mobilization and neuromuscular re-education during the period of 07/10/03 through 09/05/03.

**Decision:**

The reviewer agrees with the determination of the insurance carrier and is of the opinion that the treatment and services in dispute as stated above were not medically necessary in this case.

**Rationale:**

It is difficult to understand the need for this extensive amount of therapy for the loss of a finger from the distal interphalangeal joint. The goals are very commendable; however, it is unclear as to how one improves muscle tone in the small finger or the ring finger interphalangeal joint distally. It is certainly responsible for strength when one holds a hammer, the ring and small finger are very much responsible for the force.

Possibly, this gentleman was suffering from complex regional pain syndrome. If this is the case, then this extensive amount of therapy might be indicated. However, there is nothing in the notes to indicate that he was suffering from such a pain syndrome. It is not in the daily progress notes.

The entire documentation of the physical therapy endowed treatments is pretty much the same. The patient is better on every visit over the entire period. However, he has the same problems with carrying and climbing as he has at the beginning of the treatments. In extreme cases, the reviewer has seen this kind of therapy for chronic regional pain syndrome, or extensive burn scars, for example ultrasound underwater. The letter of medical necessity does not really address the reason for the extensive amount of treatment for the loss of the distal portion of this 4th digit. There is no evidence to indicate that the hand had become infected and the entire hand needed work. This extensive level of treatment may have been necessary if somehow the entire hand had become involved, which is very much possible, and the patient had developed complex regional pain syndrome or an infection of the whole hand. There is no evidence or documentation that this is the case.

Sincerely,