

MDR Tracking Number: M5-04-2297-01

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 03-08-04.

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 medications Carisprodol, Clonidine, Hydro/APAP, Zithromax and Alprazolam for dates of service 08-01-03 through 02-19-04 were not medically necessary.

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 08-01-03 through 02-19-04 are denied and the Medical Review Division declines to issue an Order in this dispute.

This Decision is hereby issued this 21st day of June 2004.

Debra L. Hewitt
Medical Dispute Resolution Officer
Medical Review Division
DLH/dlh

June 11, 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 ___ 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.

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 Board Certified in Anesthesiology and Pain Management and is currently on the TWCC Approved Doctor List.

REVIEWER'S REPORT

Information Provided for Review:

TWCC-60, Table of Disputed Services, EOB's

Information provided by Requestor: correspondence and office notes.

Information provided by Treating Doctor: office notes.

Clinical History:

This patient suffered a wrist injury on _____. She eventually underwent bilateral carpal tunnel surgery. She is still complaining of bilateral wrist pain.

Disputed Services:

Medications carisprodol, clonidine, hydro/APAP, zithromax and alprazolam

Decision:

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

Rationale:

There is nothing in the notes provided for review as to the reason for the clonidine being given to this patient. It is an anti-hypertensive medication, and since there is no particular indication for its usage in this patient, it is not medically necessary or warranted at this time. Zithromax is an antibiotic. There is nothing in this patient's notes regarding the ____-old injury that would warrant an antibiotic to be medically necessary in this patient.

The other medications, carisprodol, hydrocodone, and alprazolam, are all meant to be short-term medications. Carisprodol is a muscle relaxant medication, which is meant for use after an initial injury in a patient with muscle spasm. It is not meant for use in a ____-old injury. It should be discontinued over the course of 4 weeks. Hydrocodone is a short-acting muscle relaxant. It is not meant for long-term use as it can be very addicting for the patient and is not medically necessary in a ____old injury. This should be tapered off over a course of 4 weeks. Alprazolam is an anti-anxiety medication. It is also to be used only for short-term use. It is not meant to be used in a patient over the course of ____ years and is not medically necessary in a patient with a ____-old injury. It does require a 4-week weaning program as well.

Sincerely,