NOTICE OF INDEPENDENT REVIEW DECISION

September 18, 2002

RE: MDR Tracking #: M2-02-0910-01
IRO Certificate #: 4326

___ has been certified by the Texas Department of Insurance (TDI) as an independent review organization (IRO). The Texas Workers' Compensation Commission (TWCC) has assigned the above referenced case to ___ for independent review in accordance with TWCC Rule §133.308 which allows for medical dispute resolution by an IRO.

___ has performed an independent review of the proposed care to determine if the adverse determination was appropriate. In performing this review, relevant medical records, any documents utilized by the parties referenced above in making the adverse determination, and any documentation and written information submitted in support of the appeal was reviewed.

The independent review was performed by a ___ physician reviewer who is board certified in neurosurgery which is the same specialty as the treating physician. The ___ physician reviewer has signed a certification statement stating that no known conflicts of interest exist between him or her and any of the treating physicians or providers or any of the physicians or providers who reviewed the case for a determination prior to the referral to __ for independent review. In addition, the reviewer has certified that the review was performed without bias for or against any party to this case.

Clinical History

This 60 year old male sustained a work-related back injury on ___ after he jumped off the back of a truck. Subsequent to the injury, the patient underwent L5-S1 posterolateral instrumented fusion with bone graft and implantation of bone stimulator on 04/24/00 and an anterior lumbar interbody fusion (ALIF) and removal of hardware on 10/01/01. Postoperative management included a recommendation and referral for a work hardening program.

Requested Service(s)

Work hardening program

Decision

It has been determined that a work hardening program is not medically necessary.

Rationale/Basis for Decision

This 60 year old man underwent an L5-S1 decompressive laminectomy and posterolateral instrumentation fusion with screws and rods coupled with a posterolateral lumbar fusion and bone graft on 04/24/00 and an ALIF and hardware removal on 10/01/01. He has been disabled for almost three and a half years and has not been employed since the date of injury. Numerous studies in the literature of Occupational Medicine and Pain Management give a slim to nil statistical likelihood of a disabled worker who has been disabled for longer than one year returning to work. Therefore, the work hardening program is not medically necessary. However, the patient may benefit from an exercise program (not physical therapy) given in a non-medical setting for the specific purpose of restoring his muscle tone and conditioning after three years of disability at home.

This decision by the IRO is deemed to be a TWCC decision and order.

YOUR RIGHT TO REQUEST A HEARING

Either party to this medical dispute may disagree with all or part of the decision and has a right to request a hearing.

If disputing a spinal surgery prospective decision a request for a hearing must be in writing and it must be received by the TWCC Chief Clerk of Proceedings within **10** (10) days of your receipt of this decision (20 Tex. Admin. Code 142.5 (c)).

If disputing other prospective medical necessity (preauthorization) decisions a request for a hearing must be in writing and it must be received by the TWCC Chief Clerk of Proceedings within **20** (twenty) days of your receipt of this decision (28 Tex. Admin Code 148.3).

This Decision is deemed received by you 5 (five) days after it was mailed (28 Tex. Admin Code 102.4(h) or 102.5(d)). A request for hearing should be sent to: Chief Clerk of Proceedings, Texas Workers' Compensation Commission, P.O. Box 40669, Austin, Texas, 78704-0012. **A copy of this decision should be attached to the request.**

The party appealing the decision shall deliver a copy of its written request for a hearing to all other parties involved in the dispute (Commission Rule 133.308 (t)(2)).

Sincerely,