

IRO Certificate #4599

NOTICE OF INDEPENDENT REVIEW DECISION

October 22, 2002

Re: IRO Case # M2-03-0033-01

Texas Worker's Compensation Commission:

___ has been certified as an independent review organization (IRO) and has been authorized to perform independent reviews of medical necessity for the Texas Worker's Compensation Commission (TWCC). Texas HB. 2600, Rule133.308 effective January 1, 2002, allows a claimant or provider who has received an adverse medical necessity determination from a carrier's internal process, to request an independent review by an IRO.

In accordance with the requirement that TWCC assign cases to certified IRO's, TWCC assigned this case to ___ for an independent review. ___ has performed an independent review of the proposed care to determine if the adverse determination was appropriate. For that purpose, ___ received relevant medical records, any documents obtained from parties in making the adverse determination, and any other documents and/or written information submitted in support of the appeal.

The case was reviewed by a psychologist who holds a Ph.D. in psychology. He or she has signed a certification statement attesting 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 referral to ___ for independent review. In addition, the certification statement further attests that the review was performed without bias for or against the carrier, medical provider, or any other party to this case.

The determination of the ___ reviewer who reviewed this case, based on the medical records provided, is as follows:

History

The patient was injured when she fell from a ladder in ___. She initially was diagnosed with subacute post traumatic lumbar sprain, lower abdominal pain, left groin pain, subacute post traumatic right shoulder sprain. She later was diagnosed with cervical sprain and muscle spasms as well. She has been making moderate progress in a work hardening program. It has been suspected that emotional factors may be hindering her progress.

Requested Service

Mental health Assessment Testing, PPA 2 modalities

Decision

I disagree with the carrier's decision to deny the requested treatment.

Rationale

There is a reasonable body of literature indicating that psychological testing helps clarify diagnostic issues and further can help clarify a direction for treatment. The patient's history suggests that psychological factors may be contributing to continued pain complaints, and further psychological testing is warranted to assist in determining the extent and nature of the relationship.

To the extent that anxiety is playing a role in perpetuating pain complaints or obstructing response to treatment, a PPA can help determine the physiological counterparts to the anxiety. Doing the PPA concurrently with the psychological testing can add data and facilitate continuity of care.

This medical necessity decision by an Independent Review Organization is deemed to be a Commission 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** (ten) days of your receipt of this decision (28 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 a hearing should be sent to:
Chief Clerk of Proceedings, Texas Worker's Compensation Commission, P O Box 40669,
Austin, TX 78704-0012. **A copy of this decision should be attached to the request.**

The party appealing this 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,