

April 14, 2003

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TWCC Medical Dispute Resolution
4000 IH 35 South, MS 48
Austin, TX 78704

MDR Tracking #: M2-03-0769-01
IRO #: 5251

___ has been certified by the Texas Department of Insurance as an Independent Review Organization. The Texas Worker's Compensation Commission has assigned this 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, all relevant medical records and documentation utilized to make the adverse determination, along with any documentation and written information submitted, was reviewed.

The independent review was performed by a matched peer with the treating doctor. This case was reviewed by a licensed Medical Doctor with a specialty and board certification in Physical Medicine and Rehabilitation. The ___ health care professional has signed a certification statement stating that no known conflicts of interest exist between the reviewer and any of the treating doctors or providers or any of the doctors 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 the dispute.

CLINICAL HISTORY

___ was a 47-year-old woman on ___, when she fell and twisted her left knee while chasing a shoplifter. In the course of her treatment, she was found on MRI to have a torn left medial meniscus (April 16, 1991). ___ was consulted and performed a left knee partial medial meniscectomy and chondral debridement of the medial femoral condyle. He reports very severe post-traumatic changes in the femoral condyle on the articular surface. After recovery, she was given a 25% impairment rating by ___ on August 30, 1991. In recent years, she has had cortisone and hyaluronic acid injections that have given her transient relief. The cortisone helps more than the hyaluronic acid. On September 9, 2002, ___ noted in his records that the claimant had end-stage degenerative changes. She was requiring a great deal of pain medication for the pain in the left knee. She was taking Glucosamine, Nexium and Prevacid. A request was made at that time for a right knee medial unloader brace. The request for the medial unloader brace was reviewed by ___. He opined that her present condition was more related to changes in her progressive degenerative condition of life, and not as a result of her injury, and that he

felt she was a candidate for total knee arthroplasty and that she did not need any further injections. Requests for the custom molded unloader knee brace were denied by the carrier. Reason proposed was a lack of medical documentation that other treatments had been tried. In appealing the request for authorization for the medial unloader, one of the options that was suggested, that an off-the-shelf, non-custom right knee medial unloading brace be tried first. The provider was willing to agree to that, but the carrier denied providing the non-custom brace as well.

REQUESTED SERVICE

The purchase of a medial functional knee brace is requested for this patient.

DECISION

The reviewer disagrees with the prior adverse determination.

BASIS FOR THE DECISION

The provider of the knee brace orthosis has listed a number of peer review articles supporting the use of knee braces for patients who are too young to undergo a total knee replacement to improve function and to decrease pain during the activities of daily living. Because of the limited life expectancy of total knee replacement parts, it is important for people to postpone or delay that surgical intervention for as long as possible. The reviewer finds ___ approach to this problem to be very appropriate medical treatment. The carrier's reason for denying the brace is very weak, since the carrier is well aware of the treatments that have already been tried, because ___, in his Peer Review, noted that she had cortisone as well as hyaluronic acid injections.

___ has performed an independent review solely to determine the medical necessity of the health services that are the subject of the review. ___ has made no determinations regarding benefits available under the injured employee's policy.

As an officer of ___, I certify that there is no known conflict between the reviewer, ___ and/or any officer/employee of the IRO with any person or entity that is a party to the dispute.

___ is forwarding by mail and, in the case of time sensitive matters by facsimile, a copy of this finding to the treating doctor, payor and/or URA, patient and the TWCC.

Sincerely,

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.

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

In the case of other *prospective (preauthorization) medical necessity* disputes 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, per TWCC rule 133.308(t)(2).

I hereby certify, in accordance with TWCC Rule 102.4 (h), that a copy of this Independent Review Organization decision was sent to the carrier, requestor, claimant (and/or the claimant's representative) and the TWCC via facsimile, U.S. Postal Service or both on this 14th day of April 2003.