

June 30, 2003

Re: Medical Dispute Resolution
MDR #: M2-03-1159-01
IRO Certificate No.: 5055

In accordance with the requirement for TWCC to randomly assign cases to IROs, TWCC assigned your case to ___ for an independent review. ___ has performed an independent review of the medical records 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.

The independent review was performed by a matched peer with the treating health care provider. Your case was reviewed by a physician who is Board Certified in Anesthesia and Pain Management.

Clinical History:

This 76-year-old female reported low back pain with extension to the right leg following a work-related injury on _____. Laminectomy and fusion were recommended, but, apparently, no surgery was performed. An EMG on 12/17/97 was consistent with bilateral L5-S1 radiculopathy and peripheral neuropathy. Sometime prior to August 1998, a myelogram CT reportedly showed entrapment of the L-5 nerve root. At least two lumbar epidural steroid injections were performed several years prior to the present, with short-term relief noted.

The patient now re-presents with lumbar back pain radiating to the right leg. Neurologic examination reveals decreased light touch sensation on the lateral right leg and the posterior right foot. She is managed with hydrocodone.

Disputed Services:

Selective nerve root block at L-5.

Decision:

The reviewer agrees with the determination of the insurance carrier. The reviewer is of the opinion that the nerve root block is not medically necessary in this case.

Rationale for Decision:

The present anatomy and pathology should be established. At a minimum, MRI should be repeated to help establish either a link

with the original anatomy and pathology and its progression, or the onset of a new pathology (spinal stenosis, etc.).

If the present chronic pain syndrome is the result of the ongoing degenerative spinal and disc disease, the proposed block will either be of no value or of little lasting value. There is nothing in the presented data to suggest any acute process amenable to local/steroid injection.

I am the Secretary and General Counsel of ___ and I certify that the reviewing physician 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 care for determination prior to referral to the Independent Review Organization.

We are simultaneously forwarding copies of this report to the payor and the Texas Workers' Compensation Commission. This decision by ___ 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 this 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 ten (10) days** of your receipt of this decision (28 Tex. Admin. Code 142.5©).

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 twenty (20) days** of your receipt of this decision (28 Tex. Admin. Code 148.3).

This Decision is deemed received by you **five (5) 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 Workers' Compensation Commission
P.O. Box 40669
Austin, TX 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.

I hereby verify that a copy of this Independent Review Organization (IRO) Decision was sent to the carrier, the requestor and claimant via facsimile or U.S. Postal Service from the office of the IRO on June 30, 2003.

Sincerely,