

January 30, 2004

MDR #: M2-04-0545-01
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.

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.

The independent review was performed by a matched peer with the treating health care provider. Your case was reviewed by a physician who is certified in Chiropractic Medicine.

Information Provided for Review:

Correspondence
History & Physical Exam
Neurological procedure notes – 12/23/03
Electrodiagnostic consultation - 12/23/03

Clinical History:

This 46-year-old male injured himself on his job on ____. Since the injury, he has complained of chronic headaches, left-sided neck pain and stiffness that worsened through the day, left scapular pain, and left retro-mastoid pain. A previous EMG study dated 4/16/03 was “without evidence of cervical radiculopathy,” However; the patient sustained a new injury on ___ and aggravated his neck.

Disputed Services:

Selective nerve block and EMG

Decision:

The reviewer disagrees with the determination of the insurance carrier and is of the opinion that the procedures in dispute as stated are medically necessary in this case.

Rationale:

Considering the patient's clinical presentation, a repeat EMG is reasonable and deemed medically necessary. In addition, the records also discuss a previous selective nerve block that yielded significant relief for the patient. Therefore, it is reasonable to repeat this procedure since, according to Texas Labor Code 408.021,

“a) An employee who sustains a compensable injury is entitled to all health care reasonably required by the nature of the injury as and when needed. **The employee is specifically entitled to health care that:**

- (1) Cures or relieves the effects naturally resulting from the compensable injury;
- (2) Promotes recovery; or
- (3) Enhances the ability of the employee to return to or retain employment.” [Emphasis added]

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, MS-48
7551 Metro Center Dr., Ste. 100
Austin, TX 78744-1609

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 January 30, 2004

Sincerely,