

February 19, 2004

NOTICE OF INDEPENDENT REVIEW DECISION

RE: MDR Tracking #: M2-04-0691-01

___ has been certified by the Texas Department of Insurance (TDI) as an independent review organization (IRO). The ___ IRO Certificate Number is 5348. Texas Worker's Compensation Commission (TWCC) Rule §133.308 allows for a claimant or provider to request an independent review of a Carrier's adverse medical necessity determination. TWCC assigned the above-reference case to ___ for independent review in accordance with this Rule.

___ has performed an independent review of the proposed care to determine whether or not the adverse determination was appropriate. Relevant medical records, documentation provided by the parties referenced above and other documentation and written information submitted regarding this appeal was reviewed during the performance of this independent review.

This case was reviewed by a practicing physician on the ___ external review panel. The reviewer has met the requirements for the ADL of TWCC or has been approved as an exception to the ADL requirement. This physician is board certified in orthopedic surgery. The ___ physician reviewer signed a statement certifying that no known conflicts of interest exist between this physician and any of the treating physicians or providers or any of the physicians or providers who reviewed this case for a determination prior to the referral to ___ for independent review. In addition, the ___ physician reviewer certified that the review was performed without bias for or against any party in this case.

Clinical History

This case concerns a 63 year-old male who sustained a work related injury on ___. The patient reported that while at work he was shoveling some asphalt when he bent down and felt immediate pain in his lower back. Plain radiographs taken on 6/20/03 of the patient's lumbar spine indicated degenerative changes throughout the discs of the lumbar spine along with anterior vertebral body spurring, but no spondylolisthesis, instabilities or fractures were noted. The diagnoses for this patient have included mechanical low back pain, right SI joint dysfunction, and right hip pain. On 7/31/03 the patient underwent a SI joint injection under fluoroscopy. The patient has also been treated with physical therapy that included manual therapy, trunk stabilization, and modalities. The patient has been prescribed an interferential neuromuscular stimulator to reduce edema, promote healing, relieve pain effects from injury, increase blood flow to injured area, and alleviate muscle spasms.

Requested Services

Purchase of Interferential Muscle Stimulator.

Decision

The Carrier's denial of authorization for the requested services is upheld.

Rationale/Basis for Decision

The ___ physician reviewer noted that this case concerns a 63 year-old male who sustained an injury to his low back on ____. The ___ physician reviewer indicated that the diagnosis for this patient was low back pain. The ___ physician reviewer also indicated that the patient had also been diagnosed with SI joint dysfunction and degenerative disc disease of the lumbar spine.

The ___ physician reviewer noted that the patient had been treated with physical therapy, SI joint injections, and an interferential muscle stimulator. The ___ physician reviewer also noted that the patient reported a decrease in low back after several months of treatment with the interferential muscle stimulator and that the purchase of the interferential muscle stimulator is recommended.

The ___ physician reviewer explained that the interferential stimulator is indicated to promote healing, reduce edema, relieve pain effects from a compensable injury, increase blood flow to the injured area and alleviated muscle spasms. However, the ___ physician reviewer also explained that the documents provided did not demonstrate that this patient had a specific injury sustained on the job for which healing promotion, edema, poor blood flow, or muscle spasms required treatment. The ___ physician reviewer indicated that the patient complains of low back pain that could be related to his other diagnoses of arthritic spine disease and degenerative disc disease. The ___ physician reviewer also indicated that this patient's degenerative disc disease and spine osteoarthritis anteceded the work related injury of ____. The ___ physician reviewer explained that the documentation provided does not support the medical necessity for treatment of chronic pain syndrome with an interferential muscle stimulator. Therefore, the ___ physician consultant concluded that the requested purchase of an Interferential Muscle Stimulator is not medically necessary at this time.

This decision 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 (ten)** 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 a hearing should be sent to:

Chief Clerk of Proceedings/Appeals Clerk
P.O. Box 17787
Austin, TX 78744
Fax: 512-804-4011

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,

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 this 19th day of February 2004.