

NOTICE OF INDEPENDENT REVIEW DETERMINATION

MDR Tracking Number: M2-04-1399-01
IRO Certificate Number: 5259

June 28, 2004

An independent review of the above-referenced case has been completed by a chiropractic doctor. The appropriateness of setting and medical necessity of proposed or rendered services is determined by the application of medical screening criteria published by Texas Medical Foundation, or by the application of medical screening criteria and protocols formally established by practicing physicians. All available clinical information, the medical necessity guidelines and the special circumstances of said case was considered in making the determination.

The independent review determination and reasons for the determination, including the clinical basis for the determination, is as follows:

See Attached Physician Determination

___ hereby certifies that the reviewing physician is on Texas Workers' Compensation Commission Approved Doctor List (ADL). Additionally, said physician has certified that no known conflicts of interest exist between him and any of the treating physicians or providers or any of the physicians or providers who reviewed the case for determination prior to referral to ___.

Sincerely,

CLINICAL HISTORY

Available documentation received and included for review is as follows:

1. Treatment / visit notes, ___: 09/23/03-06/02/04
2. Plain film x-ray report, cervical spine, 9/26/03
3. MRI report, cervical spine, ___ 10/27/03
4. RME Impairment rating report, ___ 1/21/04
5. Designated Doctor Impairment rating report, ___, 3/23/04
6. Initial preauthorization for manipulation under anesthesia request, ___ and ___ 3/30/04

7. Adverse determination for preauthorization, ____, 4/19/04
8. Request for reconsideration of preauthorization, ____ 4/20/04
9. Denial for reconsideration, ____ 4/23/04
10. Request for IRO, ____, 5/10/04
 - a. Copy of Medicare's local medical review policy on chiropractic services
11. JMPT case report on MUA.

____, a 46 year old female, sustained injuries to her neck while working as a _____. She had been working on displays moving merchandise and lifting heavy metal shelving at an elevated level when she developed pain in neck with increasing symptoms of next 24 hours. She presented to _____, chiropractor on _____. She subsequently presented to an urgent care center on 9/26/03 where x-rays were obtained. These revealed degenerative changes at C6/7 and she was given an injection of Toradol, along with a prescription of Ultracet. She subsequently underwent a fairly standard chiropractic course of care, which was successful in reducing her pain from an 8/10 level to 3-4/10 level by 11/21/03. MRI on 10/27/03 revealed a mildly compressive broad-based central disc protrusion at C5/6 with associated early disc desiccation/degeneration without evidence of central canal stenosis. Apparently some trigger point and / or facet joint injections were attempted by _____ in November, however I have no documentation to support this or their effectiveness. Subsequent care which included manipulation in combination with exercises failed to provide any change in the patient symptomatology. The patient was seen for an RME evaluation by _____ on 1/21/04. He found the patient to be straightforward in her presentation without symptom magnification or malingering, reported 50-60% improvement with care with continuing aggravation as a result of working with arms upward. He did not feel she was a surgical candidate. He believed that chiropractic care had been beneficial and appropriate although further manipulation was deemed unnecessary. He suggested a "wait-and-see" approach as far as her symptoms over the following three months, at which time he estimated that she would be at MMI. A Designated Doctor evaluation by _____ followed on 3/23/04. She believed that the patient was continuing to improve with the manipulation and injection therapy and believed that the patient should continue, estimating MMI within the following four months. Due to the patients continuing and fluctuating symptomatic complaints, _____ felt that the patient required

manipulation under anesthesia, however preauthorized requests were denied.

REQUESTED SERVICE(S)

Prospective medical necessity for three sessions of manipulation under anesthesia.

DECISION

Approved.

RATIONALE/BASIS FOR DECISION

The standard of medical necessity in Workers Comp, according to the Texas labor code 408.021 (entitlement to medical benefits) is that an employee who sustained a compensable injury is entitled to all healthcare reasonably required by the nature of the injury as and when needed. The employee is specifically entitled to healthcare 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.

Accepted clinical guidelines are generally in agreement that initial trial period of manual therapy is appropriate, with tapering of care and transition to a more active mode of care, eliminating passive modalities. Care has been rendered according to treatment guideline standards outlined above. Requirements for medical necessity were met. The patient was then evaluated by three independent physicians who concurred that the patient had continuing symptoms, and the majority of physicians opined that she required further intervention.

The patient was recommended for MUA by her treating and referral doctors. The arguments made by these physicians in support of her candidacy are persuasive, in contrast to those made by the peer review doctors who offer little credible support for their opinions that she is not.

She satisfies the qualifications for entry into a MUA course of care according to NAMUAP guidelines, Mercy guidelines and the TWCC Spine Treatment Guidelines.

The above analysis is based solely upon the medical records/tests submitted. It is assumed that the material provided is correct and complete in nature. If more information becomes available at a later

date, an additional report may be requested. Such and may or may not change the opinions rendered in this evaluation.

Opinions are based upon a reasonable degree of medical/chiropractic probability and are totally independent of the requesting client.

References:

National Academy of Manipulation Under Anesthesia Physicians Protocols.

Hansen DT: Topics in Clinical Chiropractic,

Haldeman S., Chapman-Smith D, Peterson DM., eds. Guidelines for Chiropractic Quality Assurance and Practice Parameters,

Souza T: Differential Diagnosis for a Chiropractor: Protocols and Algorithms,

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) calendar days of your receipt of this decision (20 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 **20** (twenty) calendar 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 or the date of fax (28 Tex. Admin. Code 102.4(h) or 102.5(d)). A request for a hearing and a **copy of this decision** must be sent to:

Chief Clerk of Proceedings/Appeals Clerk
Texas Workers' Compensation Commission
P.O. Box 17787
Austin, Texas 78744

Or fax the request to (512) 804-4011. A copy of this decision must be attached to the request.

The party appealing the decision shall deliver a copy of its written request for a hearing to the opposing party involved in the dispute.

In accordance with Commission Rule 102.4(h), 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 28th day of June, 2004.