

THIS DECISION HAS BEEN APPEALED. THE FOLLOWING
IS THE RELATED SOAH DECISION NUMBER:

SOAH DOCKET NO. 453-05-7674.M2



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NOTICE OF INDEPENDENT REVIEW DECISION

Date: June 9, 2005

Requester/ Respondent Address: TWCC
Attention: Rebecca Farless
7551 Metro Center Drive, Suite 100, MS-48
Austin, TX 78744-1609

Valley Total Healthcare Systems
Attn: Nick Kempisty
Fax: 214-943-9407
Phone: 214-943-9431

Specialty Risk Services
Attn: Julie Jansen
Fax: 972-807-4848
Phone: 888-777-4789

RE: Injured Worker:
MDR Tracking #: M2-05-1696-01
IRO Certificate #: 5242

Forté has been certified by the Texas Department of Insurance (TDI) as an independent review organization (IRO). The Texas Workers' Compensation Commission (TWCC) has assigned the above referenced case to Forté for independent review in accordance with TWCC Rule §133.308 which allows for medical dispute resolution by an IRO.

Forté has performed an independent review of the proposed care to determine if the adverse determination was appropriate. In performing this review, relevant medical records, any documents utilized by the parties referenced above in making the adverse determination, and any documentation and written information submitted in support of the appeal was reviewed.

The independent review was performed by a Psychiatric reviewer (who is board certified in Psychiatry) who has an ADL certification. The physician reviewer has signed a certification statement stating that no known conflicts of interest exist between him or her and any of the treating physicians or providers or any of the physicians 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 this case.

Submitted by Requester:

- Cover letter from Valley Total Healthcare Systems dated 5/20/05
- Notification of IRO assignment
- 123 pages of medical documentation

Submitted by Respondent:

- Notice of IRO assignment
- Rationale for non-authorizations
- Appeal letter from Valley Total Healthcare Systems
- Initial psychological evaluation from Valley Total Healthcare Systems
- FCE from Valley Total Healthcare Systems
- Letter of medical necessity from Dr. Chowdhury

Clinical History

The claimant reportedly injured her back and knee on _____. She had 2 knee surgeries and has had extensive evaluation and conservative treatments including physical therapy, multiple injections, and facet denervations with persistent pain. She was referred by Dr. Chowdhury to Valley Total Healthcare Systems. The claimant underwent evaluation on 1/5/05. This demonstrated an FCE indicating that she was functioning at a sedentary level. On the psychological evaluation they concluded that she had a chronic pain disorder. They recommended a chronic pain management program. Apparently this chronic pain management program was requested and non-authorized. The rationale for this is not included in either the provider's or carrier's documentation that was submitted. Subsequently Valley Total Healthcare Systems requested individual therapy and biofeedback therapy which was non-authorized based on the fact the request was not reasonable or necessary, that the clinical indication and necessity of this procedure could not be established and that the psychometric assessment was inadequate to support the diagnosis. Furthermore, the evaluation recommended a chronic pain management program in that there was no controlled studies that would suggest that a unimodal psychotherapeutic technique would produce reliable functional improvements in this type of chronic benign pain syndrome. This decision was appealed and was non-authorized again for similar rationale. I would note that it appears that the provider may have intended to appeal the chronic pain management program decision, though all of the submitted material from both the provider and carrier are addressed at the individual therapy and biofeedback therapy.

Requested Service(s)

Four individual psychotherapy sessions and 8 biofeedback sessions

Decision

I agree with the insurance carrier that the services in dispute are not medically necessary.

Rationale/Basis for Decision

This claimant has a 3.5 year old chronic pain condition that has been unresponsive to primary and secondary interventions. Studies do not suggest that psychotherapy alone, in the absence of a complete multidisciplinary chronic pain management program, is likely to result in substantive functional improvements. Therefore, the requested services are not medically necessary due to lack of potential effectiveness.

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 (28 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) calendar days of your receipt of this decision (28 Tex. Admin. Code 142.5(c)).

This decision is deemed received by you 5 (five) days after it was mailed or the date of fax (28 Tex. Admin. Code 102.5(d)). A request for a hearing and a **copy of this decision** must be sent to:

Chief Clerk of Proceedings / Appeals Clerk
P.O. Box 17787
Austin, Texas 78744

Fax: 512-804-4011

The party appealing this decision shall deliver a copy of its written request for a hearing to other party involved in this 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 patient, the requestor, the insurance carrier, and TWCC via facsimile or U.S. Postal Service from the office of the IRO on this 9th day of June 2005.

Signature of IRO Employee:

Printed Name of IRO Employee: Denise Schroeder