PROFESSIONAL ASSOCIATES

NOTICE OF INDEPENDENT REVIEW

NAME OF PATIENT:	
IRO CASE NUMBER:	M2-05-2228-01
NAME OF REQUESTOR:	Advantage Healthcare Systems
NAME OF PROVIDER:	George M. Cole, D.O.
REVIEWED BY:	Board Certified in Pain Management and Anesthesiology
IRO CERTIFICATION NO:	IRO 5288
DATE OF REPORT:	09/07/05

Dear Advantage Healthcare Systems:

Professional Associates has been certified by the Texas Department of Insurance (TDI) as an independent review organization (IRO) (#IRO5288). Texas Insurance Code Article 21.58C, effective September 1, 1997, allows a patient, in the event of a life-threatening condition or after having completed the utilization review agent's internal process, to appeal an adverse determination by requesting an independent review by an IRO.

In accordance with the requirement for Texas Workers' Compensation Commission (TWCC) to randomly assign cases to IROs, TWCC has assigned your case to Professional Associates for an independent review. The reviewing physician selected has performed an independent review of the proposed care to determine if the adverse determination was appropriate. In performing this review, the reviewing physician reviewed 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. determination, and any documentation and written information submitted in support of the appeal.

This case was reviewed by a physician reviewer who is Board Certified in the area of Pain Management and Anesthesiology and is currently listed on the TWCC Approved Doctor List.

I am the Secretary and General Counsel of Professional Associates 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 providers or any of the physicians or providers who reviewed this case for determination prior to referral to the Independent Review Organization.

REVIEWER REPORT

Information Provided for Review:

An Urgent Care Center Medical Record and lumbar x-rays from an unknown provider (the signature was illegible) on 10/06/04
An MRI of the lumbar spine that was interpreted by Richard Archer, Jr., M.D. on 10/14/04
An evaluation from Walter S. Piskun, M.D. at Southwest Neuroscience & Spine Center on 10/27/04
An evaluation from Dennis A. Ice, M.D. at the same clinic on 10/28/04
Epidural steroid injection (ESI) procedure notes by Dr. Ice on 11/16/04 and 01/10/05
A follow-up visit with Diane M. Reeves, P.A.-C. for Dr. Ice on 12/16/04
Evaluations by George M. Cole, M.D. at Family Orthopedics on 02/16/05, 02/23/05, 03/02/05, 03/17/05, 03/22/05, 04/12/05, 05/03/05, 06/16/05, and 07/13/05
A note from Billy Stone, L.P.C. at Advantage Healthcare Systems on 05/25/05
A request for reconsideration by Mr. Stone on 06/07/05
A notice of disputed issue(s) and refusal to pay benefits from Church Mutual Insurance Company on 06/20/05
Laboratory studies from Physicians Preferred Laboratories, Ltd. on 08/17/05

Clinical History Summarized:

X-rays of the lumbar spine on 10/06/04 showed spina bifida, anterior listhesis at L5-S1 with a bilateral pars defect, and mild retrolisthesis at L4-L5. An MRI of the lumbar spine on 10/14/04 revealed a disc bulge with narrowing at L4-L5, severe narrowing of the neural foraminal exits, and spondylolisthesis at L5-S1 with bilateral pars defects. Lumbar ESIs were performed by Dr. Ice on 11/16/04 and 01/10/05. Ms. Reeves evaluated the claimant for Dr. Ice on 12/16/04 and noted a history of drug addiction. She recommended Neurontin, Voltaren, and Zanaflex. The claimant was evaluated by Dr. Cole from 02/16/05 through 07/13/05 for a total of nine visits. Dr. Cole performed ESIs on 03/02/05, 03/17/05, and 03/22/05. Pain management was requested by Dr. Cole on 04/12/05. On 05/25/05, Mr. Stone, from Advantage Healthcare Systems, requested preauthorization for 10 sessions of a behavioral chronic pain management program.

Mr. Stone provided a request for reconsideration of the 10 sessions of the pain management program on 06/07/05. On 06/16/05 and 07/13/05, Dr. Cole again recommended the pain management program. On 06/20/05, Church Mutual Insurance Company provided a dispute for the chronic pain management program, as they disputed the necessity for treatment for anxiety and depression as related to the ___ original injury.

Disputed Services:

Ten sessions of a chronic behavioral pain management program

Decision:

I disagree with the requestor. The 10 sessions of the chronic behavioral pain management program would be neither reasonable or medically necessary.

Rationale/Basis for Decision:

The claimant had clear objective evidence of significant structural pathology in his lumbar spine, consisting of pars defect, significant anterolisthesis of L5 on S1, and disc pathology with bilateral foraminal stenosis at L4-L5. There was no medical documentation, however, of psychological distress or manifestation of psychological illness. There was also no medical documentation that the claimant has completed lesser levels of psychological care or, for that matter, even a trial of anti-depressants. Moreover, his psychological testing revealed minimal to no significant levels of anxiety and depression.

Therefore, in the absence of clinically significant psychological disease, trials of lesser levels of psychological care and anti-depressants, and with continuing structural pathology, there was no medical reason or necessity for 10 sessions of the chronic pain management program. The claimant has neither the objective test results nor subjective complaints to justify a tertiary level of care or the intensive nature of a chronic pain management program. He has remained morbidly obese, which, in all medical probability, was the sole cause for his episode of thromboembolism and subsequent necessity for Coumadin. Neither of those conditions would be indicative of a necessity for a chronic pain management program.

The letter from Mr. Stone of Advantage Healthcare Systems itself provided all of the reasons for this claimant to not be a valid candidate for a chronic pain management program: specifically, minimal psychological test score elevations, lack of lesser levels of psychological treatment, and lack of exhaustion of all appropriate medical treatment options.

This review was conducted on the basis of medical and administrative records provided with the assumption that the material is true and correct.

This decision by the reviewing physician with Professional Associates 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/Appeals Clerk **within ten (10) calendar days** of your receipt of this decision (28 Texas Administrative Code 1133.308 (v) (1)).

If disputing other prospective medical necessity (preauthorized) decisions a request for a hearing must be in writing and it must be received by the TWCC Chief Clerk of Proceedings/Appeals Clerk **within twenty (20) calendar days** of your receipt of this decision (28 Texas Administrative Code 148.3).

This decision is deemed received by you **five (5) calendar days** after it was mailed (28 Texas Administrative Code 102.5 (d)). A request for a hearing should be faxed to 512-804-4011 or sent to:

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

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's decision was sent to the respondent, the requestor, TWCC and the claimant via facsimile or U.S. Postal Service this day of 09/07/05 from the office of Professional Associates.

Sincerely,

_____
Lisa Christian
Secretary/General Counsel