

MCMC

IRO Medical Dispute Resolution M2 Prospective Medical Necessity IRO Decision Notification Letter

Date:	09/20/2005
Injured Employee:	
Address:	
MDR #:	M2-05-2267-01
TWCC #:	
MCMC Certification #:	IRO 5294

REQUESTED SERVICES:

Please review the item(s) in dispute: Pre-authorization request work hardening for ten sessions.

DECISION: Upheld

IRO MCMC llc (MCMC) has been certified by the Texas Department of Insurance as an Independent Review Organization (IRO) to render a recommendation regarding the medical necessity of the above disputed service.

Please be advised that a MCMC Physician Advisor has determined that your request for an M2 Prospective Medical Dispute Resolution on 09/20/2005, concerning the medical necessity of the above referenced requested service, hereby finds the following:

Uphold denial for the continuation of work hardening for 10 sessions.

CLINICAL SUMMARY:

Records indicate that the above captioned individual, a 58-year old female, was injured during the course of her employment on or about _____. The history reveals that she twisted her left knee while stepping down out of a high vehicle. An MRI of the left knee dated 12/22/2004 revealed a tear of the medial meniscus of the left knee. Surgery was performed to repair this tear and a course of post-surgical rehab was initiated. An FCE dated 05/06/2005 revealed functional deficits as well as cardiovascular deficits. A course of work hardening was initiated. A follow-up FCE was performed on 06/30/2005 revealed sharply decreased ranges of motion. This FCE also indicated that the injured individual's physical demand level had not improved beyond a medium level.

RATIONALE:

The documentation, especially including comparative data from two consecutive functional capacity exams (FCE's), does not establish the medical necessity for the continuation of work hardening. Specifically, prior to the initiation of work hardening, an FCE was administered on 05/06/2005. At the conclusion of the work hardening, a follow-up FCE was performed dated

06/30/2005. It should be noted that these two FCE's were completed at two different facilities. Therefore, given the differing techniques of evaluation, it is difficult at best to accurately compare these results. However, it is clear that during the initial course of work hardening that ranges of motion in the lumbar spine significantly decreased. It is even more note worthy that ranges of motion in the affected knee were sharply decreased as well during the initial course of work hardening. Furthermore, the injured individual's physical demand category did not effectively increase during the initial course of work hardening. Therefore, the medical necessity for a similar course of work hardening is not established. It does appear that the injured individual did make progress in regards to cardiovascular issues and endurance. The documentation suggests that the injured individual, throughout the initial course of work hardening, was able to increase her repetitions and endurance. While this is an important aspect of work hardening and this individual's overall success upon return to work, this single issue could be effectively addressed outside of provider driven care and certainly outside of the confines of a multi-disciplinary return to work program such as work hardening. Given the fact that this cardiovascular issue can be dealt with outside of the confines of a work hardening program, and given the apparent poor comparative results of the serial FCE's, the medical necessity for continued or additional participation in the work hardening program is not established.

RECORDS REVIEWED:

- TWCC Notification of IRO Assignment dated 08/16/05
- MCMC: IRO Medical Dispute Resolution Prospective dated 09/12/05
- MCMC: IRO Medical Dispute Resolution M2 Prospective Pre-Authorization dated 08/16/05
- MR-117 dated 08/08/05
- TWCC-60
- State Office of Risk Management: Letter dated 08/26/05 from Jennifer Dawson, Senior Medical Dispute & Audit Specialist
- Forte: Notice of Utilization Review Findings dated 07/28/05 and 07/11/05
- Talina Tovar: Memo dated 07/28/05
- Forte: Acknowledgement of Reconsideration Request dated 07/22/05 from Joel Wilk, MD
- Ennis: Request for Reconsideration dated 07/20/05 from Ennis Healthcare Systems
- Case notes for patient regarding injury date of ___ with case being closed on 07/08/05
- Advantage Healthcare Systems: Daily Program Progress and Symptom Reports dated 07/06/05, 07/05/05, 06/29/05, 06/28/05, 06/27/05, 06/24/05, 06/23/05, 06/22/05
- Ennis: Letter dated 07/05/05 from Raymond Baker, DC
- Advantage Healthcare Systems: Work Conditioning/Hardening Weekly Progress Notes dated 07/05/05 and 06/22/05
- Interdisciplinary Pain Rehabilitation Program: Notes dated 07/01/05 and 06/30/05
- Ennis Healthcare Systems: Functional Capacities Evaluation report dated 06/30/05
- Interdisciplinary Pain Rehabilitation Program: Psychology Progress Note dated 06/22/05
- Physical Therapy Notes for weeks 06/22/05 to 06/24/05, 06/27/05 to 07/01/05, 07/05/05 to 07/08/05
- Ennis: Evaluation dated 06/02/05 from George Esterly, LPC

- Navarro Health & Industrial Center: Functional Capacity Evaluation Discharge dated 05/26/05 from Terry Williams, DC
- FCE Long Version dated 05/06/05
- Park Cities Surgery Center: Procedure Note dated 01/20/05 from Thomas Schott, MD
- Radiographs of the chest dated 01/13/05
- Office note dated 01/05/05 from Thomas Schott, MD with handwritten Progress Note
- Wide Open MRI: MRI of the left knee dated 12/22/04
- TWCC Employer's First Report of Injury or Illness dated 12/17/04
- Enviva Health Services: Letters of Medical Necessity for Physical Medicine dated 12/17/04 and 02/16/05 from Kalman Shwarts, MD
- Enviva Health Services: Physical Medicine Progress Notes dated 12/20/04 through 04/28/05

The reviewing provider is a **Licensed/Boarded Chiropractor** and certifies that no known conflict of interest exists between the reviewing Chiropractor and any of the treating providers or any providers who reviewed the case for determination prior to referral to the IRO. The reviewing physician is on TWCC's Approved Doctor List.

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 or your receipt of this decision (28Tex.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) days of your receipt of this decision (28Tex.Admin. Code 148.3©.)

This decision is deemed received by you 5 (five) days after it was mailed (28Tex.Admin. Code 102.4(h)(2) or 102.5(d)). A request for a hearing **and a copy of this decision** should be sent to:

Chief Clerk of Proceedings / Appeals Clerk
Texas Workers' Compensation commission
P.O. Box 17787
Austin, Texas, 78744
Fax: 512-804-4011

The party appealing the decision shall deliver a copy of its written request for a hearing to all other parties 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

20th day of September 2005.

Signature of IRO Employee: _____

Printed Name of IRO Employee: _____