



PROFESSIONAL ASSOCIATES

NOTICE OF INDEPENDENT REVIEW

NAME OF PATIENT: _____
IRO CASE NUMBER: M2-06-0975-01
NAME OF REQUESTOR: _____
NAME OF PROVIDER: Robert Urrea, M.D.
REVIEWED BY: Board Certified in Orthopedic Surgery
IRO CERTIFICATION NO: IRO 5288
DATE OF REPORT: 04/13/06

Dear Mr. ____:

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 TDI-Division of Workers' Compensation (DWC) to randomly assign cases to IROs, DWC 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.

This case was reviewed by a physician reviewer who is Board Certified in the area of Orthopedic Surgery and is currently listed on the DWC 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

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conflicts of interest that exist between him the provider, the injured employee, the injured employee's employer, the injured employee's insurance carrier, the utilization review agent, or any of the treating doctors or insurance carrier health care providers who reviewed the case for decision before referral to the Independent Review Organization.

REVIEWER REPORT

Information Provided for Review:

Evaluations with Robert Urrea, M.D. dated 01/11/05, 06/27/05, 08/05/05, 12/09/05, 02/01/06, and 02/17/06

An MRI of the lumbar spine interpreted by William Boushka, M.D. dated 05/05/05

A procedure note from Dr. Urrea dated 07/21/05

Letters of denial from St. Paul Travelers dated 11/22/05, 01/10/06, and 02/10/06

Clinical History Summarized:

On 01/11/05, Dr. Urrea recommended an EMG/NCV study. An MRI of the lumbar spine interpreted by Dr. Boushka on 05/05/05 revealed severe left neural foraminal stenosis and moderate right foraminal stenosis and spinal canal stenosis at L5-S1 secondary to a large left sided disc protrusion. On 07/21/05, Dr. Urrea performed a left L5-S1 transforaminal epidural steroid injection (ESI). On 08/05/05, Dr. Urrea recommended spinal decompression. Letters of denial for the spinal decompression were provided by St. Paul Travelers on 11/22/05, 01/10/06, and 02/10/06. On 02/01/06, Dr. Urrea continued to recommend the surgery. On 02/17/06, Dr. Urrea noted that reconsideration of the surgery was being requested.

Disputed Services:

A lumbar endoscopic decompression

Decision:

I disagree with the requestor. The lumbar endoscopic decompression would be neither reasonable nor necessary.

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Rationale/Basis for Decision:

The proposed surgery would be neither reasonable nor necessary as related to the original injury. The proposed procedure, a lumbar endoscopic decompression, is a procedure that has not yet been proven to be effective in the treatment of this patient's condition. This patient's anatomy, which may not be related to his injury, suggested significant foraminal narrowing. The best results of endoscopic decompression are for soft disc herniations and not for bony stenosis. (Guiotbh et. al, A Minimally Invasive Technique for Decompression of the Lumbar Spine, Spine 2002-27 4:432-8.) Therefore, in my opinion as a board certified orthopedic surgeon, with a specialty in spinal diseases, the proposed surgical procedure would not be appropriate for this patient's pathology and, therefore, neither reasonable nor necessary.

The rationale for the opinions stated in this report are based on clinical experience and standards of care in the area as well as broadly accepted literature which includes numerous textbooks, professional journals, nationally recognized treatment guidelines and peer consensus.

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 Division decision and order.

YOUR RIGHT TO REQUEST A HEARING

If you are unhappy with all or part of this decision, you have the right to appeal the decision. The decision of the Independent Review Organization is binding during the appeal process.

If you are disputing the decision (other than a spinal surgery prospective decision), the appeal must be made directly to a district court in Travis County (see Texas Labor Code §413.031). An appeal to District Court must be filed not later than 30 days after the date on which the decision that is the subject of the appeal is final and appealable.

If you are disputing a spinal surgery prospective decision, a request for a hearing must be in writing and it must be received by the Division of Workers' Compensation, Chief Clerk of

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Proceedings, within ten (10) days of your receipt of this decision. A request for a hearing should be faxed to 512-804-4011 or sent to:

Chief Clerk of Proceedings/Appeals Clerk
TDI-Division of Workers' Compensation
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, DWC, and the patient via facsimile or U.S. Postal Service this day of 04/13/06 from the office of Professional Associates.

Sincerely,

Lisa Christian
Secretary/General Counsel