

April 20, 2006

TX DEPT OF INS DIV OF WC  
AUSTIN, TX 78744-1609

CLAIMANT: \_\_\_

EMPLOYEE: \_\_\_

POLICY: M2-06-1026-01

CLIENT TRACKING NUMBER: M2-06-1026-01 / 5278

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Medical Review Institute of America (MRIOA) has been certified by the Texas Department of Insurance as an Independent Review Organization (IRO). The Texas Department of Insurance Division of Workers Compensation has assigned the above mentioned case to MRIOA for independent review in accordance with DWC Rule 133 which provides for medical dispute resolution by an IRO.

MRIOA has performed an independent review of the proposed care to determine if the adverse determination was appropriate. In performing this review all relevant medical records and documentation utilized to make the adverse determination, along with any documentation and written information submitted, was reviewed. Itemization of this information will follow.

The independent review was performed by a peer of the treating provider for this patient. The reviewer in this case is on the DWC approved doctor list (ADL). The reviewing provider has no known conflicts of interest existing between that provider and 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 IRO.

**Records Received:**

FROM THE STATE:

Request for production of documents 1 page

Notification of IRO assignment 4/3/06 1 page

Texas Department of Insurance Division of Workers Compensation form 4/3/06 1 page

Medical dispute resolution request/response form 2 pages

Provider form 1 page

Table of disputed services 1 page

Notification of review outcome 2/16/06 2 pages

Notification of appeal outcome 2/27/06 2 pages

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FROM THE REQUESTOR/Daniel Shalev, MD:

WC initial evaluation 10/11/05 3 pages  
MRI lumbar spine report 11/14/05 2 pages  
Lower extremity EMG and NCV report 12/7/05 2 pages  
Physician progress report 1/3/06 1 page  
Physician progress report 1/17/06 1 page  
Letter from Daniel Shalev, MD to Robert Silva, MD 2/2/06 6 pages  
Preauthorization request form 2/8/06 1 page  
Preauthorization request form 2/8/06 1 page  
Handwritten lumbar traction chart notes 2/22/06-3/7/06 1 page  
Handwritten lumbar ESI chart notes 2/22/06-3/7/06 1 page

FROM THE RESPONDENT/Starbucks/Gallagher Bassett:

Letter from Courtney B. Leech/Ayers & Ayers 4/4/06 1 page  
Letter from Julie B. Tebbets/Ayers & Ayers 3/22/06 1 page  
Information on the appeal process - workers compensation 2 pages  
HCFA billings 10/11/05 2 pages  
Physician initial report 10/11/05 2 pages  
Work status report 10/11/05 1 page  
Lumbar spine radiology report 10/11/05 1 page  
HCFA billing 10/12/05 1 page  
Kclinic Rehabilitation Centers Treatment program notes 10/9/05 1 page  
Occupational therapy initial evaluation 10/12/05 3 pages  
HCFA billing 10/18/05 1 page  
Physician progress report 10/18/05 1 page  
HCFA billing 10/19/05 1 page  
Progress SOAP notes 10/19/05 1 page  
HCFA billing 10/20/05 1 page  
Progress SOAP notes 10/20/05 1 page  
HCFA billing 10/25/05 1 page  
Physician progress report 10/25/05 1 page  
HCFA billing 10/26/05 1 page  
Progress SOAP notes 10/28/05 1 page  
HCFA billing 10/28/05 1 page  
Kclinic Rehabilitation Centers Treatment program notes 10/9/05 1 page  
Progress SOAP notes 10/28/05 1 page  
HCFA billing 11/2/05 1 page  
Progress SOAP notes 11/2/05 1 page  
HCFA billing 11/3/05 1 page  
Progress SOAP notes 11/3/05 1 page  
Kclinic Rehabilitation Centers treatment program notes 10/11/05 1 page  
HCFA billing 11/8/05 1 page  
Physician progress report 11/8/05 1 page  
Statement of pharmacy services 11/14/05 3 pages  
HCFA billing 11/9/05 1 page  
Physician progress report 11/9/05 1 page  
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HCFA billing 11/10/05 1 page  
Progress SOAP notes 11/10/05 1 page  
HCFA billing 11/11/05 1 page  
Progress SOAP notes 11/11/05 1 page  
Kclinic Rehabilitation Centers Treatment program notes 11/10/05-11/11/05 1 page  
HCFA billing 11/10/05 1 page  
HCFA billing 11/15/05 1 page  
Physician progress report 11/15/05 1 page  
Kclinic Rehabilitation Centers Treatment program notes 11/23/05 1 page  
HCFA billing 11/16/05 1 page  
Occupational therapy functional capacity evaluation 11/16/05 3 pages  
Progress SOAP notes 11/16/05 1 page  
Progress SOAP notes 11/23/05 1 page  
HCFA billing 11/23/05 1 page  
HCFA billing 11/29/05 2 pages  
Physician progress report 11/29/05 1 page  
History and Physical 11/29/05 3 pages  
HCFA billing 12/1/05 1 page  
HCFA billing 12/2/05 1 page  
Progress SOAP notes 12/2/05 1 page  
Kclinic Rehabilitation Centers treatment program notes 12/2/05 1 page  
HCFA billing 12/7/05 1 page  
History and Physical 12/7/05 2 pages  
HCFA billing 12/9/05 1 page  
Kclinic Rehabilitation Centers treatment program notes 12/9/05 1 page  
Progress SOAP notes 12/9/05 1 page  
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HCFA billing 12/20/05 1 page  
Statement of pharmacy services 12/23/05 2 pages  
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GB reconsiderations 1/27/06 1 page  
HCFA billing 1/3/06 1 page  
Letter from Carla Barnett/K clinic to Amy Marecle/Gallagher Bassett 1/11/06 1 page  
HCFA billing 1/17/06 1 page  
HCFA billing 1/18/06 1 page  
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Statement of pharmacy services 1/26/06 2 pages  
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Physician progress report 2/22/06 1 page  
Physician progress report 3/8/06 1 page  
HCFA billing 3/8/06 1 page  
Statement of pharmacy services 3/9/06 2 pages  
Work status report 3/8/06 1 page

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FROM DR. SILVA:

Prescription fro PT/OT 10/9/05 2 pages  
Handwritten prescription from Dr. Silva 11/8/05 2 pages  
Walgreen's prescription request 10/25/05 3 pages  
Handwritten prescriptions 10/11/05 1 page  
Discharge summary 2/8/06 1 page  
Patient information sheet 12/7/05 1 page  
Chart notes 1/4/06 2 pages  
Work status report 10/25/05 1 page  
Work status report 11/15/05 1 page  
Work status report 1/3/06 1 page  
Work status report 2/22/06 1 page  
Work status report 4/5/06 1 page  
Physicians progress report 11/22/05 1 page  
Physicians progress report 1/3/06 1 page  
Physicians progress report 1/17/06 1 page  
Physicians progress report 1/31/06 1 page  
Physicians progress report 2/24/06 1 page  
Physicians progress report 3/22/06 1 page  
Physicians progress report 3/24/06 1 page  
Physicians progress report 4/5/06 1 page  
Request for production of documents 2 pages

All of the additional clinical documentation has been reviewed, and the opinion was not altered.

**Summary of Treatment/Case History:**

The claimant is a 25 year old gentleman who allegedly suffered a workplace injury on \_\_\_\_.  
Subsequently he developed low back pain. Physical examination revealed decreased range of motion of the lumbar spine, negative straight leg raising test and normal neurological findings. An EMG/NCV reveals changes consistent with left L5 radiculopathy. An MRI revealed a small left-sided disc herniation at L5-S1. He has been treated with physical therapy modalities including traction.

**Questions for Review:**

1. Item(s) in Dispute: Pre-Authorization denied for 97012 x 3 sessions of mechanical traction. Medical Necessity?

**Explanation of Findings:**

Several studies of the use of lumbar traction for the treatment of disc disease over a period of almost 30 years, cited below, have provided little or no evidence of efficacy of this modality. Given this lack of substantiation of effect in multiple clinical trials, its use cannot be considered to be medically necessary.

**Conclusion/Decision to Not Certify:**

1. Item(s) in Dispute: Pre-Authorization denied for 97012 x 3 sessions of mechanical traction. Medical Necessity?

(continued)

The proposed lumbar spinal traction treatments are not medically necessary based on the above rationale.

**Applicable Clinical of Scientific Criteria or Guidelines Applied in Arriving at Decision:**

In order to be considered to be standard medical care and not experimental or investigational, a new treatment must have been shown to be safe and effective in at least two independent scientifically-valid randomized controlled trials from two unrelated institutions or research groups, or at least one randomized controlled multi-center study that reports data separately from each center. These studies must have been carried out by investigators who are independent of and not receiving support from the manufacturer or sponsor of the new treatment and must have been published in the reputable peer-reviewed medical journals, which are accepted for indexing in the standard medical bibliographic indices such as Index Medicus.

**References Used in Support of Decision:**

Borman, et al. (2003). The efficacy of lumbar traction in the management of patients with low back pain. *Rheumatol Int* 23:82-6.

van der Heijden, et al. (1995). The efficacy of traction for back and neck pain: a systematic, blinded review of randomized clinical trial methods. *Phys Ther* 75:93-104.

Beurskens, et al. (1995). Efficacy of traction for non-specific low back pain: a randomized clinical trial. *Lancet* 346:1596-600.

Saunders (1983). Use of spinal traction in the treatment of neck and back conditions. *Clin Orthop* 31-8.

Mathews and Hickling (1975). Lumbar traction: a double-blind controlled study for sciatica. *Rheumatol Rehabil* 14:222-5.

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The physician providing this review is board certified in Anesthesiology. The reviewer holds additional certification in Pain Medicine from the American Board of Pain Medicine. The reviewer is a diplomate of the National Board of Medical Examiners. The reviewer has served as a research associate in the department of physics at MIT. The reviewer has received his PhD in Physics from MIT. The reviewer is currently the chief of Anesthesiology at a local hospital and is the co-chairman of Anesthesiology at another area hospital. The reviewer has been in active practice since 1978.

**Your Right To Appeal**

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).

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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 Proceedings, within ten (10) days of your receipt of this decision.

Chief Clerk of Proceedings / Appeals Clerk  
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. MRIOA is forwarding this decision by mail, and in the case of time sensitive matters by facsimile, a copy of this finding to the DWC.

It is the policy of Medical Review Institute of America to keep the names of its reviewing physicians confidential. Accordingly, the identity of the reviewing physician will only be released as required by state or federal regulations. If release of the review to a third party, including an insured and/or provider, is necessary, all applicable state and federal regulations must be followed.

Medical Review Institute of America retains qualified independent physician reviewers and clinical advisors who perform peer case reviews as requested by MRIOA clients. These physician reviewers and clinical advisors are independent contractors who are credentialed in accordance with their particular specialties, the standards of the American Accreditation Health Care Commission (URAC), and/or other state and federal regulatory requirements.

The written opinions provided by MRIOA represent the opinions of the physician reviewers and clinical advisors who reviewed the case. These case review opinions are provided in good faith, based on the medical records and information submitted to MRIOA for review, the published scientific medical literature, and other relevant information such as that available through federal agencies, institutes and professional associations. Medical Review Institute of America assumes no liability for the opinions of its contracted physicians and/or clinician advisors. The health plan, organization or other party authorizing this case review agrees to hold MRIOA harmless for any and all claims which may arise as a result of this case review. The health plan, organization or other third party requesting or authorizing this review is responsible for policy interpretation and for the final determination made regarding coverage and/or eligibility for this case.

1220309.1

Case Analyst: Cherstin B ext 597

cc: Requestor, Respondent