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Description of the service or services in dispute:

X

Description of the qualifications for each physician or other health care provider who reviewed the decision:

Board Certified X

Upon Independent review, the reviewer finds that the previous adverse determination / adverse determinations should be:

X

Patient Clinical History (Summary)

X who sustained an injury on X. X was X and as X went to X. X and X. The diagnoses included X.

X was seen by X, MD on X for X. X saw Dr. X who had been writing X, but X had X and X had been referred for further management. On examination, X had a X. X had a X. X was X. X and X.

A X was performed by X, MEd, X, PhD on X. X reported that the X. X reported X when X when X. The X was described X. X included X and X. X reported X and X. X reported following X. X denied that X and X and X. X reported that X was X. X score was X. X, which X. Per summary, X pain resulted from X. X reported X. X reported X. X would X. It would X and X. It was recommended that X should be X with both X and X. Those X would X.

A X was performed by X on X. X demonstrated X. It was noted that X was X; however, X was X or X and X. X to X. X to X and X. X and X and X and X. X demonstrated an X. X demonstrated the X. The X should X and X.

An MRI of the X, there was X. At X, there were X and likely X and X and X. Per the note, an MRI of the X. There was X and X and X.

Treatment to date X.

Per an X by X, MD on X, the request for X was non-certified. Rationale: "Based on the clinical information submitted for this review and using the evidence-based, peer-reviewed guidelines referenced above, this request is noncertified. There was insufficient objective evidence of previous X. There was also unclear documentation of X to compare with X. There was unclear documentation that the patient has the X.

In an appeal letter dated X by X, MEd, X, PhD, and Dr. X, was denied the request for X. The reviewer reported there was insufficient objective evidence that previous methods of treating X. The report also stated there were X, but there were X available from X. In the evaluation X reported X desire to X. X met ODG guidelines for the X.

Per a review by X, MD on X, the request for X was non-certified. Rationale: "Based on the clinical information submitted for this review and using the evidence-based, peer reviewed guidelines referenced above, this request is non-certified. Although it was mentioned that X received X. Moreover, there were no additional medicals noting significant X submitted to address the previous reasons for the denial. Clarification is also needed on how the request would affect the patient's treatment recommendations and overall health outcomes."

Analysis and Explanation of the Decision include Clinical Basis, Findings and Conclusions used to support the decision.

X reviews denied the X. An appeal letter addressed some of the deficiencies noting that there were records of X. However, the review X would X and X. This is not clearly X. The X for this patient are X. There are X. Given the documentation available, the requested service(s) is considered not medically necessary.

A description and the source of the screening criteria or other clinical basis used to make the decision:

- ACOEM-America College of Occupational and Environmental Medicine
- AHRQ-Agency for Healthcare Research and Quality Guidelines
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- DWC-Division of Workers Compensation Policies and Guidelines
- European Guidelines for Management of Chronic Low Back Pain
- Interqual Criteria
- Medical Judgment, Clinical Experience, and expertise in accordance with accepted medical standards
- Mercy Center Consensus Conference Guidelines
- Milliman Care Guidelines
- ODG-Official Disability Guidelines and Treatment Guidelines
- Pressley Reed, the Medical Disability Advisor
- Texas Guidelines for Chiropractic Quality Assurance and Practice Parameters
- TMF Screening Criteria Manual
- Peer Reviewed Nationally Accepted Medical Literature (Provide a description)
- Other evidence based, scientifically valid, outcome focused guidelines (Provide a description)