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Notice of Independent Review Decision

### **IRO REVIEWER REPORT**

Date: X

**IRO CASE #:** X

**DESCRIPTION OF THE SERVICE OR SERVICES IN DISPUTE:** X

A DESCRIPTION OF THE QUALIFICATIONS FOR EACH PHYSICIAN OR OTHER HEALTH CARE PROVIDER WHO REVIEWED THE DECISION: X

**REVIEW OUTCOME: X** 

### INFORMATION PROVIDED TO THE IRO FOR REVIEW: X

## **PATIENT CLINICAL HISTORY [SUMMARY]:**

X is a X with a date of injury X. X is an X. X was X and when X was X on the X, it X and X. Then, X and X the X and X on the X. X stated it X as well as X. When it happened, X and had X in X. X was diagnosed with X or X, not specified as X. On X, X was seen by X, MD for X. X was X without X. X had X with X of the X as well as X. On examination of the X, there was X with X. X had X with X. There was X to X over the X and X with X. X sign was X. X and X were X. At the time, X had X including X. X continued to have X and X in any activities of X. Dr. X recommended X, X, and X. An X of the X dated X revealed X at the X, X into the X. There was X. There was X and X of the X and X and X, and X. An X of the X and X dated X revealed X and X at the X, X more than X, without X. The findings were supportive of X (X) X with X and X. Treatment to date included X (X and X), X, X, and X (not helpful). Per a Utilization Review Decision letter dated X, the request for X, X, X was denied by X, MD. Rationale: "Per evidence-based guidelines, X is reserved for patients with evidence of X and objective findings corroborated by X that would be suggestive of X and X on the X after the provision of X. In this case, the patient's chief complaint was X. Examination of the X revealed X with X of X and X with X. There was X to X over X, there was X and X, X, X noted. A request for X, X, and X was made; however, there were X presented in the most recent office visit to assess the patient's X as the X and X were not quantified. Also, although it was documented that X, there was no mention if X had X, and X which are X. Clarification is needed regarding the request and how it might affect the patient's clinical outcomes." Dr. X wrote an appeal letter on X regarding the recent denial of X. The X was denied based on the X guidelines recommending X for X for patients over X. X is a X and suffered from a X, X, and X. X required X. X was limited in X and was X to work. Dr. X requested to reconsider denial of the X. Per an Adverse Determination letter dated X, the prior denial was upheld by X, MD. Rationale: "Based on the clinical information for this review and using the evidence-based, peer-reviewed guidelines referenced above, this request is not certified. An appeal request was made for X with X, X, and X: however, the previous reasons for denial were not addressed to warrant the current request. Furthermore, after speaking with X PA, the patient has had X and X, with a subsequent X. The X has no plan of action. There are X with the X and the X, it was

strictly X and X in the X. The patient has X of the X. No X has X. After this discussion, the patient did not have X of X. The above request does not meet medical necessity, therefore is not authorized."

## ANALYSIS AND EXPLANATION OF THE DECISION INCLUDE CLINICAL BASIS, FINDINGS, AND CONCLUSIONS USED TO SUPPORT THE DECISION:

The X recommends X following a X of X of X with X, X or X, X over the X, X, or X, X, X of an X in the X, and no X during X prior to X. The X recommends X of X prior to X unless earlier X are met for other associated X. The X recommends X following a X of X of X with X and X, X, and X on X. The provided documentation indicates the worker has X and X from injury despite treatment with X, X, and X. The X examination findings include X with X, X with X, X to X over the X, X with X, and X and X. A X showed a X of the X, X into the X and in X on a X, X, and X. While prior reviewer suggested X, it is documented that the worker has X and X from injury despite X. Given the persistent X from injury with X, X, X, and X on X, X is supported. As there is X on X with X on X, X is supported at the time of X. While there is no evidence of a X, as there is X with X to X and X with X on X examination, this X needs to be addressed at the time of X as failure to do so would result in X and X with need for a X in the future.

Based on the available information, X with X, X, and X and X, X, X and X are

Based on the available information, X with X, X, and X and X, X, X and X are medically necessary.

# A DESCRIPTION AND THE SOURCE OF THE SCREENING CRITERIA OR OTHER CLINICAL BASIS USED TO MAKE THE DECISION:

☐ ACOEM- AMERICAN COLLEGE OF OCCUPATIONAL & ENVIRONMENTAL MEDICINE UM KNOWLEDGEBASE
☐ AHRQ- AGENCY FOR HEALTHCARE RESEARCH & QUALITY GUIDELINES
☐ DWC- DIVISION OF WORKERS COMPENSATION POLICIES OR GUIDELINES
$\hfill \square$ European Guidelines for management of Chronic Low back pain
☐ INTERQUAL CRITERIA
☐ MERCY CENTER CONSENSUS CONFERENCE GUIDELINES
☐ MILLIMAN CARE GUIDELINES
☑ ODG- OFFICIAL DISABILITY GUIDELINES & TREATMENT GUIDELINES
☐ OTHER EVIDENCE BASED, SCIENTIFICALLY VALID, OUTCOME FOCUSED GUIDELINES (PROVIDE A DESCRIPTION)
$\square$ PEER REVIEWED NATIONALLY ACCEPTED MEDICAL LITERATURE (PROVIDE A DESCRIPTION)
$\square$ PRESLEY REED, THE MEDICAL DISABILITY ADVISOR
☐ TEXAS GUIDELINES FOR CHIROPRACTIC QUALITY ASSURANCE & PRACTICE PARAMETERS
☐ TMF SCREENING CRITERIA MANUAL