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Notice of Independent Review Decision
Amended Report

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

The reviewer is a Medical Doctor who is board certified in X

REVIEW OUTCOME

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

X

INFORMATION PROVIDED TO THE IRO FOR REVIEW

X

PATIENT CLINICAL HISTORY [SUMMARY]:

This is a X who sustained an injury on X and is seeking authorization for X and X. Review of the medical records indicate X is being treated for X, X; X and X, X and X; X and X.

The X of the X has impressions of: X; X, X of the X, the X defined for a X from a X, associated X; X of the X with X and X, X and X; X.

The X note has X of X with X with X.

The X progress report is X. The X is X. X denies any X or X. X is X with use of X. Exam is deferred. Treatment plan is X was X and X was X.

The X progress report is X for X. The pain is X. X denies any X or X. X is X to the X with use of X. Past medical history included X, X, X, X. Exam reveals X on X. X noted on X of X to X. Well X noted. There is X noted in the X. Treatment plan included X, X as X.

The X of the X has X changes of X; X of the X and X, X may X or X, X and X the X, given the X of these X, X with X, X, X;X.

The X progress report has the X noting X is X. The previous treatment X the X. There is X in the X when X and X. X states X needs more treatment to X. X states X and X. Exam reveals X, X noted on X to X at X. There is X noted to the area. Treatment plan included X.

The X note has X with complaints of X and X. The pain is X, X and X, X, X, X, X. The symptoms are X and X. Exam reveals X and X on the X. There is pain on X, X, X. There is X and X noted on the X. X is noted as was a X. X, X, and X was X and X. Treatment plan included X with X, X, X, X, and X.

The X report has the X noting X is X. The previous treatment did not X. There is still X when X and X. X states X needs

more X. X is having X, X and down X and X. Exam reveals X to X, X noted on X to X at X. There is X noted to the X. Treatment plan included X.

The X progress report has X with X and X on X to X. Exam reveals X and X. X is X, X, X, X. There is X along the X. Treatment plan is for X for X.

The X study has X of: X a more X and X, as due to X and X, X, X and X and X response.

The X progress report has the X noting X is X. The previous treatment did not X. There is still X when X and X. X states X needs more X. X is having X and X and X. Exam reveals X, X noted on X to X. There is X noted to the X. Treatment plan included a X provided on this date; still trying to get approval for the X.

The X Utilization review non-certified the requested X and X. X states the only criteria not demonstrated in the medical records is a X. The provider states that this X has not been X, but X will have the patient in X and resubmit the request X.

The X progress report has the X with X. There is still X in the X when X and X. X states X needs more treatment to X. X is having X and X and X. Exam reveals X on X, X noted on X to X. Pain with X and X. There is X noted to the X. Treatment plan includes X which was provided on this date.

The X Utilization Review is an appeal for X and X. Recommendation is: Adverse Determination. Denial rationale states it is noted that although the provider performed a X per criteria, there was not enough time to evaluate the efficacy. Due to the stated reason, this request

is upheld. It is important to exhaust all measures of care and X vs benefits prior to patient X as the provider is requesting.

The X progress report has X with complaints of X, which has been an issue for X and is X and X, X, and X. X recently had an X that has X. X is still X. X has X in the X and X. Exam reveals X. There is X, X, X. Treatment plan includes X, X, follow-up, and X.

The X Utilization Review is an appeal for X.
Recommendation is: X, as it was referred to IRO.

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

This X sustained an injury on X and is being treated for X, X; other X and X, X and X and X. X is status X with X with X on X. X has undergone X and follow-up exams. X continued with X in the X, X and X. X notes the X. Provided documentation demonstrates X that are X. X and X of X, including X, has been documented. Therefore, the requested X is medically reasonable and 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**
- EUROPEAN GUIDELINES FOR MANAGEMENT
OF CHRONIC LOW BACK PAIN**
- INTERQUAL CRITERIA**
- MEDICAL JUDGEMENT, CLINICAL
EXPERIENCE AND EXPERTISE IN ACCORDANCE
WITH ACCEPTED MEDICAL STANDARDS**
- MERCY CENTER CONSENSUS CONFERENCE
GUIDELINES**
- MILLIMAN CARE GUIDELINES**
- ODG- OFFICIAL DISABILITY GUIDELINES &
TREATMENT GUIDELINES**
- PRESSLEY REED, THE MEDICAL DISABILITY
ADVISOR**

- TEXAS GUIDELINES FOR CHIROPRACTIC
QUALITY ASSURANCE & 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)**