

MEDICAL CONTESTED CASE HEARING NO 23009

Decision

For the reasons discussed, the administrative law judge determines that:

The claimant is not entitled to bilateral C2-C3 medial branch blocks under fluoroscopy with sedation, bilateral thoracic facet block medial branch of the dorsal ramus T6-T7 under fluoroscopy with sedation, or bilateral lumbar facet block medial branch of the dorsal ramus to L3-L4, L4-L5 under fluoroscopy with sedation for the compensable injury of (Date of Injury).

Statement of the Case

The claimant appealed the decision of the Independent Review Organization in Case Number (IRO Case Number). Judge Early Moye held a hearing on this appeal on August 9, 2023, to decide the following:

Is the preponderance of the evidence contrary to the decision of the IRO that the claimant is not entitled to bilateral C2-C3 medial branch blocks under fluoroscopy with sedation, bilateral thoracic facet block medial branch of the dorsal ramus T6-T7 under fluoroscopy with sedation, and bilateral lumbar facet block medial branch of the dorsal ramus to L3-L4, L4-L5 under fluoroscopy with sedation for the compensable injury of (Date of Injury)?

Persons Present

The claimant appeared and was assisted by SG, ombudsman. The insurance carrier appeared and was assisted by PK, attorney.

Evidence Presented

The following witnesses testified:

For the claimant:	The claimant
For the insurance carrier:	None

The judge admitted the following exhibits into evidence:

Judge's Exhibit:	ALJ-1
Claimant's Exhibits:	C-1 through C-5
Insurance Carrier's Exhibits:	CR-A through CR-E and CR-H through CR-M (CR-F and CR-G were withdrawn.)

The claimant affirmed there were 196 pages of Claimant's Exhibits including duplicates. The insurance carrier affirmed there were 44 (CR-A through CR-E and CR-H through CR-M) pages of Insurance Carrier's Exhibits.

Discussion

The claimant sustained a work injury on (Date of Injury), while transferring a patient to a bed. The parties stipulated that the claimant sustained a compensable injury that extends to and includes at least a thoracic strain and cervical strain.

The claimant treated with Dr. AT, a pain management doctor, who recommended bilateral C2-C3 medial branch blocks under fluoroscopy with sedation, bilateral thoracic facet block medial branch of the dorsal ramus T6-T7 under fluoroscopy with sedation, and bilateral lumbar facet block medial branch of the dorsal ramus to L3-L4, L4-L5 under fluoroscopy with sedation for the compensable injury of (Date of Injury).

Preauthorization from the insurance carrier's utilization review agent was requested and denied because the disputed conditions did not meet Official Disability Guidelines. The claimant then requested an Independent Review Organization review of the denials. In the decision letter, the Independent Review Organization agreed with the insurance carrier's denials. The claimant is now appealing the Independent Review Organization decision.

In this dispute, the claimant has the burden of showing by a preponderance of the evidence based medical evidence that the Independent Review Organization decision is wrong. The claimant relied on her testimony and the medical records in evidence to support her position of entitlement to the disputed treatment.

The insurance carrier relied on the medical records in evidence and the opinions of the utilization review agents and Independent Review Organization to support its position that the claimant is not entitled to the requested treatment.

According to the claimant, she would like to receive the disputed treatment because she wants to perform her daily activities without pain limitations. The claimant testified that she believes the treatment will help her reach this goal.

The claimant's testimony and medical records were considered; however, there was no persuasive evidence based medicine showing how the disputed treatment is medically necessary for the compensable injury.

The Official Disability Guidelines do not support the necessity of the disputed treatment. Therefore, the preponderance of the evidence is not contrary to the decision of the Independent Review Organization that the claimant is not entitled to the disputed treatment.

The judge considered all the evidence admitted and based the findings of fact and conclusions of law on the evidence, even if the judge did not specifically discuss all the evidence.

Findings of Fact

1. The parties stipulated to the following facts:
 - A. The (City) field office is the proper location for the hearing.
 - B. On (Date of Injury), the claimant was an employee of (Employee).
 - C. On (Date of Injury), the employer provided workers' compensation insurance with Indemnity Insurance Company of North America.
 - D. On (Date of Injury), the claimant sustained a compensable injury that extends to and includes at least a thoracic strain and cervical strain.
2. The insurance carrier delivered to the claimant a document stating the true corporate name of the insurance carrier, the name of the insurance carrier's registered agent, and the registered agent's street address, which was admitted into evidence.

3. The Independent Review Organization determined that the claimant should not have bilateral C2-C3 medial branch blocks under fluoroscopy with sedation, bilateral thoracic facet block medial branch of the dorsal ramus T6-T7 under fluoroscopy with sedation, or bilateral lumbar facet block medial branch of the dorsal ramus to L3-L4, L4-L5 under fluoroscopy with sedation for the compensable injury of (Date of Injury).
4. The preponderance of the evidence is not contrary to the decision of the IRO that the claimant is not entitled to bilateral C2-C3 medial branch blocks under fluoroscopy with sedation, bilateral thoracic facet block medial branch of the dorsal ramus T6-T7 under fluoroscopy with sedation, or bilateral lumbar facet block medial branch of the dorsal ramus to L3-L4, L4-L5 under fluoroscopy with sedation for the compensable injury of (Date of Injury).

Conclusions of Law

1. The Texas Department of Insurance, Division of Workers' Compensation has jurisdiction to hear this case.
2. Venue is proper in the (City) field office.
3. The claimant is not entitled to bilateral C2-C3 medial branch blocks under fluoroscopy with sedation, bilateral thoracic facet block medial branch of the dorsal ramus T6-T7 under fluoroscopy with sedation, or bilateral lumbar facet block medial branch of the dorsal ramus to L3-L4, L4-L5 under fluoroscopy with sedation for the compensable injury of (Date of Injury).

Order

The insurance carrier is not liable for the benefits at issue in this decision. The claimant remains entitled to medical benefits for the compensable injury.

The true corporate name of the insurance carrier is **INDEMNITY INSURANCE COMPANY OF NORTH AMERICA**, and the name and address of its registered agent for service of process is:

**CT CORPORATION SYSTEM
1999 BRYAN STREET, SUITE 900
DALLAS TX 75201-3136**

Signed on August 9, 2023.

Early Moye
Administrative Law Judge