

were not addressed by the IRO; MRD ordered Carrier to reimburse Provider \$177.62 for those services. Carrier subsequently withdrew its challenge of that portion of the MRD decision ordering Carrier to reimburse Provider \$177.62.³

Therefore, the only remaining issue is whether the therapeutic procedures, therapeutic activities, massage, manual therapy technique, unattended electrical stimulation, ultrasound, and neuromuscular reeducation that Work Rehab provided Claimant from December 15, 2003, through March 3, 2004, were medically necessary.⁴

As set out below, the Administrative Law Judge (ALJ) finds that those medical services were medically necessary and grants Provider's request for reimbursement.

II. Findings of Fact

1. On ____, ____ (Claimant) sustained a work-related injury to her hands and wrists as a result of her work activities (compensable injury).
2. On the date of her injury, Claimant's employer was ____ and ____, and its workers' compensation insurance carrier was Liberty Mutual Fire Insurance Company (Carrier).

³ At the hearing, Carrier indicated it had already paid Provider this amount.

⁴ The medical service provided on September 19, 2003, a massage, was denied with a "G" code rather than a "V" code; thus, the service provided on September 19, 2003, is not considered in this decision.

3. As a result of the compensable injury, Claimant suffered pain and numbness in her hands, wrist, fingers, and forearms. She was first diagnosed with left carpal tunnel syndrome and left cubital tunnel syndrome. She subsequently was diagnosed with bilateral carpal tunnel syndrome, bilateral cubital tunnel syndrome, and ulnar neuropathy of both upper extremities.
4. On September 30, 2002, Claimant was evaluated at the Lawson Chiropractic Clinic, and Claimant requested that William M. Lawson, D. C., become her treating doctor.
5. On February 3, 2003, Manish Patel, M.D., an orthopedic hand surgeon, performed on Claimant a left open carpal tunnel release, a left anterior ulnar nerve transposition, and a Z-plasty lengthening of the left forearm muscles and tendons.
6. Claimant was referred to Capitol Work Rehab & Therapy (Work Rehab or Provider), owned by Dr. Lawson, for physical therapy. Her initial visit with Provider was on February 27, 2003.
7. On June 9, 2003, Dr. Patel performed on Claimant a right open carpal tunnel release, a right ulnar nerve transposition, and a right forearm flexor tendon lengthening.
8. On June 19, 2003, Claimant had a post-operative appointment with Dr. Patel, who determined that Claimant should again have physical therapy with Dr. Lawson.
9. By July 24, 2003, Claimant exhibited symptoms of early stage Reflex Sympathetic Dystrophy (RSD), now known as Chronic Regional Pain Syndrome (CRPS).
10. On August 21 and August 28, 2003, Claimant received stellate ganglion blocks from Vivek Mahendru, M.D., a pain management specialist, for her CRPS.
11. On September 2, 2003, Dr. Patel determined that, as a complication of her four surgical procedures, Claimant had atrophy of her rotator cuff and bilateral shoulder impingement. Dr. Patel recommended physical therapy to strengthen Claimant's rotator cuff.
12. Claimant on November 13, 2003, received a cervical continuous epidural infusion from Dr. Mahendru for pain management.
13. On December 9, 2003, Dr. Patel saw Claimant, and his assessment of her condition was chronic pain syndrome and causalgia.

14. On December 15, 2003, upon Dr. Patel's referral, Work Rehab performed an initial evaluation of Claimant for additional physical therapy services.
15. Work Rehab provided the following medical services for Claimant:

CURRENT PROCEDURAL TERMINOLOGY (CPT) CODE	SERVICE DESCRIPTIONS	DATES
97124	Massage	December 15,16, 18, and 22, 2003; January 23, 26, 28, and 30, 2004; February 3, 6, 9, 11, 13, 17, 19, 20, 24, 25, and 27, 2004; March 1, 2, and 3, 2004
97110	Therapeutic Procedures	December 15, 16, 18, and 22, 2003; Jan. 23, 26, 28, and 30, 2004; February 3, 6, 9, 11, 13, 17, 19, 20, 24, 25, and 27, 2004; March 1, 2, 3, 2004
97530	Therapeutic Activities	December 15, 2003; Feb. 6, 9, 11, 13, 17, 19, 20, 24, 25, and 27, 2004; March 1, 2, and 3, 2004
97140	Manual Therapy Technique	December 16, 18, and 22, 2003
G0283	Electrical Stimulation, Unattended	December 16, 18, and 22, 2003; Jan. 23, 24, 26, 28, and 30, 2004; Feb. 3, 6, 9, 11, 13, 17, 19, 20, 24, and 25, 2004; March 2, 2004
97035	Ultrasound	January 23 and 26, 2004
97261	Manipulation	Jan. 28 and 30, 2004; February 3, 2004
97112	Neuromuscular reeducation	February 27, 2004; March 1, 2, 3, 2004

16. After her physical therapy, Claimant demonstrated improved shoulder active range of motion and strength.
17. Provider sought reimbursement from Carrier for the provided medical services.
18. Carrier sent explanations of benefits (EOBs) to Provider using denial code "V" (unnecessary treatment with peer review) to deny the requested reimbursements.
19. On August 30, 2004, Provider filed a request for medical dispute resolution with the Texas Workers' Compensation Commission's (TWCC).
20. An independent review organization (IRO) reviewed the medical dispute and found that the services Work Rehab provided Claimant from September 19, 2003, through March 3, 2004, were not medically necessary to treat Claimant's compensable injury because the carpal tunnel release and ulnar nerve transportation surgeries did not require intensive rehabilitation.
21. TWCC's Medical Review Division (MRD), relying on the IRO's determination, found that the services Work Rehab provided Claimant from September 19, 2003, through March 3, 2004, were not medically necessary. However, MRD determined that other services that Work Rehab provided Claimant from December 16, 2003, through December 22, 2003, were not addressed by the IRO. MRD ordered Carrier to reimburse Provider \$177.62 for those services.
22. After the MRD order was issued, both Provider and Carrier asked for a contested-case hearing by a State Office of Administrative Hearings (SOAH) Administrative Law Judge (ALJ).
23. Notice of a contested-case hearing concerning the dispute was mailed on December 16, 2004, to Carrier and Provider. The notice informed the parties of the time, place, and nature of the hearing; the legal authority and jurisdiction under which the hearing was to be held; the particular sections of the statutes and rules involved; and the matters to be considered.
24. On August 17, 2005, Carol Wood, a SOAH ALJ, held a contested-case hearing concerning the dispute at the William P. Clements Office Building, Fourth Floor, 300 West 15th Street, Austin, Texas. The hearing concluded, and the record closed that same day.
25. Carrier appeared at the hearing through its attorney, Kevin Franta.

26. Dr. Lawson appeared at the hearing for Provider.
27. At the hearing, Carrier withdrew its challenge of that portion of the MRD decision ordering Carrier to reimburse Provider \$177.62.
28. The treatments in dispute were necessary to treat the atrophy of Claimant's rotator cuff and bilateral shoulder impingement, and not Claimant's carpal tunnel release and ulnar nerve transportation surgeries

III. Conclusions of Law

1. SOAH has jurisdiction over matters related to the hearing in this proceeding, including the authority to issue a decision and order, pursuant to TEX. LABOR CODE ANN. (Labor Code) §§ 402.073(b) and 413.031(k) (Vernon Supp. 2004-2005) and TEX. GOV'T CODE ANN. (Gov't Code) ch. 2003 (Vernon 2000).
2. Adequate and timely notice of the hearing was provided in accordance with Gov't Code §§ 2001.051 and 2001.052.
3. Based on the above Findings of Fact and Gov't Code § 2003.050 (a) and (b), 1 TEX. ADMIN. CODE (TAC) § 155.41(b) (2005), and 28 TAC §§ 133.308(v) and 148.14(a) (2005), Provider has the burden of proof in this case.
4. An employee who sustains a compensable injury is entitled to all health care reasonably required by the nature of the injury as and when needed that cures or relieves the effects naturally resulting from the compensable injury, promotes recovery, or enhances the ability of the employee to return to or retain employment. Labor Code § 408.021 (a) (Vernon 1996).
5. Based on the above Findings of Fact, Provider has shown by a preponderance of the evidence that the treatments in issue were medically necessary for Claimant's compensable injury.
6. Based on the above Findings of Fact and Conclusions of Law, the request of Capitol Work Rehab & Therapy to be reimbursed for the services it provided Claimant from December 15, 2003, through March 3, 2004, should be granted.

ORDER

THEREFORE, IT IS ORDERED that Liberty Mutual Fire Insurance Company **shall reimburse Capitol Work Rehab & Therapy** for the therapeutic procedures, therapeutic activities, massage, manual therapy techniques, unattended electrical stimulation, ultrasound, and neuromuscular reeducation that **Capitol Work Rehab & Therapy** provided Claimant from December 15, 2003, through March 3, 2004, and for which Liberty Mutual Insurance Company has not previously reimbursed Capitol Work Rehab & Therapy.

SIGNED October 17, 2005.

**CAROL WOOD
ADMINISTRATIVE LAW JUDGE
STATE OFFICE OF ADMINISTRATIVE HEARINGS**