

March 3, 2003

David Martinez  
TWCC Medical Dispute Resolution  
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Austin, TX 78704

MDR Tracking #: M2-03-0143-01-SS  
IRO #: 5251

\_\_\_ has been certified by the Texas Department of Insurance as an Independent Review Organization. The Texas Worker's Compensation Commission has assigned this case to \_\_\_ for independent review in accordance with TWCC Rule 133.308 which allows for medical dispute resolution by an IRO.

\_\_\_ has performed an independent review of the proposed care to determine if the adverse determination was appropriate. In performing this review, all relevant medical records and documentation utilized to make the adverse determination, along with any documentation and written information submitted, was reviewed.

The independent review was performed by a matched peer with the treating doctor. This case was reviewed by a licensed Medical Doctor with a specialty and board certification in Orthopedic Surgery. The \_\_\_ health care professional has signed a certification statement stating that no known conflicts of interest exist between the reviewer and any of the treating doctors or providers or any of the doctors or providers who reviewed the case for a determination prior to the referral to \_\_\_ for independent review. In addition, the reviewer has certified that the review was performed without bias for or against any party to the dispute.

#### CLINICAL HISTORY

\_\_\_ is a 47-year-old gentleman with a longstanding history of chronic neck pain and bilateral arm pain. His back was injured on \_\_\_ while working for \_\_\_. At the time he was moving some stoves on a dolly. Initially the patient was seen by \_\_\_ and subsequently sent to \_\_\_. The patient came under the care of \_\_\_ on December 6, 1999. The diagnosis originally given was chronic cervical strain with possible discopathy and radiculopathy. The initial MRI demonstrated degenerative disc disease at C4/5 and C5/6.

On December 22, 1999 the patient had a MRI of the cervical spine that demonstrated disc protrusion at C4/5 and C5/6. There was mild space narrowing at C6/7 as well.

The patient, \_\_\_, had a second MRI on March 28, 2002. The MRI of the cervical spine demonstrated mild right-sided osteophytes at C3/4 with mild degenerative changes on the right at C4/5 and left sided disc osteophytes at C5/6 with hypertrophic disc

changes at that level. On May 8, 2002, the patient did have a cervical myelogram with a follow-up CT scan. This demonstrated mild foraminal narrowing at C3/4 on the right with hypertrophic degenerative changes on the left at C5/6 and mild degenerative changes on the right at C6/7 and left facet joint arthrosis at that level. The patient has been recommended an anterior discectomy, interbody fusion and plating of C5-C7. This procedure has been denied in August 2002. In December 2002 the patient had continued pain. He was getting depressed, and \_\_\_ has recommended psychological intervention.

The patient has seen \_\_\_, a psychologist in \_\_\_ for his chronic pain and his depression secondary to his neck pain.

#### REQUESTED SERVICE

Anterior discectomy, interbody fusion and plating of C5-C7 have been requested.

#### DECISION

The reviewer disagrees with the prior adverse determination.

#### BASIS FOR THE DECISION

This 46-year-old gentleman has a longstanding history of chronic neck pain with C5/6 cervical radiculitis. MRIs and CT myelograms confirmed significant cervical disc disease at C5/6 and C6/7. The patient has failed all conservative intervention to date.

The patient has objective evidence of chronic degenerative disc disease at C5/6 and C6/7 with persistent neck pain and intermittent C5/6 cervical radiculitis. The above-mentioned procedure would give this patient a good chance of being pain-free.

Based on the history, physical examinations reviewed and diagnostic studies, the reviewer does find medical necessity for the proposed anterior cervical discectomy and fusion with plating at C5/6 and C6/7 with an inpatient stay, as requested by \_\_\_.

\_\_\_ has performed an independent review solely to determine the medical necessity of the health services that are the subject of the review. \_\_\_ has made no determinations regarding benefits available under the injured employee's policy.

As an officer of \_\_\_, I certify that there is no known conflict between the reviewer, \_\_\_ and/or any officer/employee of the IRO with any person or entity that is a party to the dispute.

\_\_\_ is forwarding by mail and, in the case of time sensitive matters by facsimile, a copy of this finding to the treating doctor, payor and/or URA, patient and the TWCC.

Sincerely,

## YOUR RIGHT TO REQUEST A HEARING

Either party to this medical dispute may disagree with all or part of the decision and has a right to request a hearing.

In the case of prospective *spinal surgery* decision, a request for a hearing must be made in writing and it must be received by the TWCC Chief Clerk of Proceedings within 10 days of your receipt of this decision. (20 Tex. Admin. Code 142.5(c)).

In the case of other *prospective (preauthorization) medical necessity* disputes a request for a hearing must be in writing, and it must be received by the TWCC Chief Clerk of Proceedings within **20** (twenty) days of your receipt of this decision (28 Tex. Admin. Code 148.3).

This decision is deemed received by you 5 (five) days after it was mailed (28 Tex. Admin. Code 102.4(h) or 102.5(d)). A request for a hearing should be sent to: Chief Clerk of Proceedings, Texas Worker's Compensation Commission, P.O. Box 40669, Austin, TX 78704-0012. A copy of this decision should be attached to the request.

The party appealing this decision shall deliver a copy of its written request for a hearing to all other parties involved in the dispute, per TWCC rule 133.308(t)(2).

**I hereby certify, in accordance with TWCC Rule 102.4 (h), that a copy of this Independent Review Organization decision was sent to the carrier, requestor, claimant (and/or the claimant's representative) and the TWCC via facsimile, U.S. Postal Service or both on this 3rd day of March 2003.**