

## IRO AMERICA - Ziroc

June 2, 2003

TWCC Medical Dispute Resolution  
4000 IH 35 South, MS 48  
Austin, TX 78704

Patient:

TWCC #:

MDR Tracking #: M5 03 1225 01

IRO #: 5251

Ziroc 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 Ziroc for independent review in accordance with TWCC Rule 133.308 which allows for medical dispute resolution by an IRO.

Ziroc has performed an independent review of the care rendered 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.

This case was reviewed by a licensed Doctor of Chiropractic. The Ziroc 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 Ziroc 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

This patient was working for \_\_\_\_ Tire Store when he was in the unenviable position of falling while carrying a tire from an 18-wheeler. He had an onset of low back pain radiating into both legs and sought care about 2 weeks after the incident from East Texas Chiropractic. The documentation demonstrates numerous positive orthopedic and neurological tests. X-rays were negative for frank pathology. Initially the patient was treated with passive therapy, later increased to active treatment and then after some time it was reverted to passive for palliative reasons. MRI of the lumbar spine indicated a disc herniation "prominently indenting" the anterior thecal sac. This was considered to be a very large herniation. A thoracic MRI demonstrated a 3 mm right paracentral disc herniation at T11/T12. There was a contact with, but no indenting of, the spinal cord. Discogram was performed on May 13, 2002 which indicated an abnormal response at L2/3, L4/5 and L5/S1. Myelogram was also positive at L2/3 and L4/5.

It is noted that the patient lived 60 miles from the clinic and had no transportation. The clinic provided the transportation to the office. The position statement of the treating doctor indicates that the treating clinic was the closest to the patient's home.

A peer review was performed by Stephen Tomko, DC which approved care for this patient up to May 10, 2002. He denied the necessity of the MRI because of what he apparently deemed inappropriate procedures on the case.

#### DISPUTED SERVICES

The carrier has denied the medical necessity of MRI (thoracic and lumbar), office visits, physical medicine sessions, X-rays, physician education services, unusual travel, analysis of information data, physician team conference and hospital initial observation care from January 26, 2002 through September 26, 2002.

#### DECISION

The reviewer disagrees with the prior adverse determination regarding both MRI's, X-rays and unusual travel.

The reviewer agrees with the prior adverse determination for all other disputed services.

#### BASIS FOR THE DECISION

The level of care rendered initially was appropriate, but the care became excessive due to the fact that the patient was clearly not progressing as expected. Instead of reducing the care and referring for other types of care, the provider seemed to revert to passive care in this case, which was not necessary at the points rendered. The physical medicine rendered on this case unfortunately did not have a positive outcome and it should have been obvious from early on in the treatment plan that this patient was not responding. I do believe the treating doctor acted responsibly in performing the MRI's and X-rays and the travel clearly was necessary to get the patient to the office. As a result, the MRI, X-ray and travel disputes are the only part that can be considered medically necessary.

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

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

Ziroc is forwarding this finding by US Postal Service to the TWCC.

Sincerely,

Nan Cunningham  
President/CEO

CC: Ziroc Medical Director