

**THIS DECISION HAS BEEN APPEALED. THE FOLLOWING  
IS THE RELATED SOAH DECISION NO.:**

**SOAH DOCKET NO. 453-03-4479.M5**

MDR: Tracking Number M5-03-1749-01

Under the provisions of Section 413.031 of the Texas Workers' Compensation Act, Title 5, Subtitle A of the Texas Labor Code, effective January 1, 2002 and Commission Rule 133.305 and 133.308 titled Medical Dispute Resolution by Independent Review Organizations, the Medical Review Division (Division) assigned an IRO to conduct a review of the disputed medical necessity issues between the requestor and the respondent.

The Division has reviewed the enclosed IRO decision and determined that **the requestor did not prevail** on the issues of medical necessity. The IRO agrees with the previous determination that the prescription medication, Mobic, was not medically necessary. Therefore, the requestor is not entitled to reimbursement of the IRO fee.

Based on review of the disputed issues within the request, the Division has determined that the prescription medication fees were the only fees involved in the medical dispute to be resolved. As the treatment was not found to be medically necessary, reimbursement for dates of service from 5/9/02 to 7/8/02 is denied and the Division declines to issue an Order in this dispute.

This Decision is hereby issued this 15<sup>th</sup> day of July 2003.

Carol R. Lawrence  
Medical Dispute Resolution Officer  
Medical Review Division

CRL/crl

**NOTICE OF INDEPENDENT REVIEW DECISION**

July 9, 2003

Program Administrator  
Medical Review Division  
Texas Workers Compensation Commission  
4000 South IH-35, MS 48  
Austin, TX 78704-7491

RE: MDR Tracking #:M5-03-1749-01  
IRO Certificate #: IRO 4326

\_\_\_ has been certified by the Texas Department of Insurance (TDI) as an independent review organization (IRO). The Texas Workers' Compensation Commission (TWCC) has assigned the above referenced case to \_\_\_ for independent review in accordance with TWCC §133.308 which allows for medical dispute resolution by an IRO.

\_\_\_ has performed an independent review of the rendered care to determine if the adverse determination was appropriate. In performing this review, relevant medical records, any documents utilized by the parties referenced above in making the adverse determination, and any documentation and written information submitted in support of the appeal was reviewed.

The independent review was performed by a \_\_\_ physician reviewer who is board certified in physical medicine and rehabilitation which is the same specialty as the treating physician. The \_\_\_ physician reviewer has signed a certification statement stating that no known conflicts of interest exist between him or her and any of the treating physicians or providers or any of the physicians 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 this case.

### Clinical History

This patient had a slip and near fall on \_\_\_. At that time she was diagnosed with lumbar strain and attended physical therapy. She was eventually declared at maximum medical improvement (MMI) on 11/03/99 with a 2% impairment rating. She later went to see a physical medicine physician. The physician re-started physical therapy and administered numerous epidural steroid injections.

### Requested Service(s)

Medications rendered from 05/09/02 through 07/08/02

### Decision

It is determined that the medications rendered from 05/09/02 through 07/08/02 were not medically necessary to treat this patient's condition

### Rationale/Basis for Decision

The lumbar strain sustained on \_\_\_ had improved enough that the patient reached maximum medical improvement on 11/03/99 with a 2% impairment rating. This injury did not require Mobic (meloxicam) for treatment one and a half years later for this condition. Therefore, the medications rendered from 05/09/02 through 07/08/02 were not medically necessary to treat this patient's condition.

Sincerely,