

IRO AMERICA - Ziroc

September 5, 2003

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

Patient:

TWCC #:

MDR Tracking #:

IRO #:

M5-03-2546-01

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.

The independent review was performed by a matched peer with the treating doctor. 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 Days Inn as a housekeeper and was pushing a cart full of laundry when she had an immediate onset of pain in the low back shooting into the right knee. The next morning she was unable to get out of bed due to the pain. She initially underwent PT for the pain. With a lack of response, she had a MRI. The results of the MRI are not presented in the documentation. She changed providers to Atlantis Health Care and began extensive physical medicine treatment. She was deemed to be a candidate for psychological evaluation by her treating doctor and was referred to Phil Bohart and Felicia Hernandez by the treating clinic. She was deemed to be a candidate for a chronic pain program by the evaluators and a chronic pain program was approved and initiated.

DISPUTED SERVICES

Under dispute is the medical necessity of psych services (diagnostic and preparation of progress report) and psychiatric evaluation performed on 9/26/02.

DECISION

The reviewer disagrees with the prior adverse determination.

BASIS FOR THE DECISION

The treating doctor used reasonable protocol when he discovered that the patient had likely become a chronic pain patient. The patient was reasonably referred to a pain management clinic for evaluation and a chronic pain program was initiated upon referral by the treating doctor. The carrier's URA approved the chronic pain program based on the results of the initial evaluation. No documentation contradicts the accuracy of the treating clinic's records and significant documentation does show that the initial evaluation was performed in good practice by the requesting providers. As a result, the evaluation was reasonable in this case and was a necessary evaluation to initiate the chronic pain program.

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