

EXAMPLE OF A MEDICAL RESPONSE WRITTEN TO AN INDEPENDENT REVIEW ORGANIZATION (IRO)

[Company Letterhead Redacted]

[Date redacted]

[Name and address of addressee redacted]

Dear **[Name redacted]**:

This letter will support that **[IRO name redacted]** should arrive at the same conclusion we did regarding the hospitalization of **[patient name redacted]** on **[date redacted]**. Specifically, the facts set forth below will show that our disallowance of an inpatient level of care was correct from both a clinical and evidence-based standpoint.

[Provider redacted]'s request by letter for external independent review and dated **[date redacted]** has been received. A review of the provider's letter, related clinical and administrative documents, and medical records for the acute inpatient stay for dates of service **[dates redacted]** has been completed. The result is that the Health Plan continues to uphold the denial of authorization for payment of services based on medical necessity, for reasons as follows.

The member was a **[age redacted]**-year-old female with a history of fibromyalgia diagnosed four years prior, who was admitted for the evaluation and management of low back pain "spasms" for four weeks per the admission history; she had been prescribed oral gabapentin for this but discontinued it due to lack of efficacy. She was recently evaluated in the emergency department and had a lumbar spine magnetic resonance imaging study performed, which was without acute fracture, disc herniation, foraminal stenosis, or canal stenosis. No neurologic deficit was documented on the admission note physical examination. In addition, the emergency department physical examination noted the member was in no acute distress, which is not consistent with severe pain, and noted there were no focal neurologic deficits. The physician admission note stated that the member was advised by the emergency department to be discharged home, but she refused discharge; this is not consistent with a medical need for acute inpatient hospital admission. Per the medication administration record, she was treated with various oral analgesic medications. She was also treated with physical therapy, which does not require acute inpatient hospital admission and can be rendered at a lower level of care.

The provider's letter dated **[date redacted]** opined that the key factors which justify an acute inpatient hospital admission were progressive or severe neurologic deficit and severe pain requiring acute inpatient management per **[SPECIFIC CLINICAL GUIDELINES REDACTED]**. Contrary to the provider's letter, no severe or persistent neurologic deficit was documented in the emergency department or admission notes, and the member did not meet **[SPECIFIC CLINICAL GUIDELINES REDACTED]** criteria for inpatient pain management because no intravenous analgesia was required or administered.

The information provided in the medical record and the provider's letter dated **[date redacted]** does not support that criteria were met for acute inpatient hospitalization, per evidence-based **[SPECIFIC CLINICAL GUIDELINES REDACTED]**. This is because per these guidelines, there is no indication for acute

inpatient hospital admission without one or more of the following: **[ITEMIZATION OF SPECIFIC CLINICAL GUIDELINE CLINICAL CRITERIA REDACTED]**.

The primary issue at hand is whether medical services were required at an acute inpatient hospital level of care. The provider's letter dated **[date redacted]** has not referenced any objective and evidence-based criteria which support its claim that acute inpatient hospital admission was necessary or indicated, nor do the submitted medical records support this claim. Therefore, we anticipate a favorable decision after **[IRO name redacted]** completes its independent review of this case.

Should you need any additional information or have additional questions, feel free to contact me.

Sincerely,

[My signature redacted]

Stephen E., M.D., Diplomate of the American Board of Internal Medicine

Medical Director of Appeals and Grievances

[Contact information redacted]

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