

APPEAL OF DENIED PRIOR AUTHORIZATION – SPINAL SURGERY

Advanced Spine & Neuro Institute

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Patient Name	John Doe
DOB	01/14/1969
Subscriber ID	AET123456789
Group #	GRP445566
Authorization / Reference #	PA-987654321
Diagnosis	Lumbar spinal stenosis with radiculopathy

Date: March 18, 2026

Payer: Aetna Health Plans

ATTN: Appeals Department

P.O. Box 14079

Lexington, KY 40512■4079

Dear Appeals Reviewer,

I am writing to formally appeal the denial of coverage for lumbar decompression with instrumented fusion for my patient, **John Doe**. The denial cited failure to meet medical necessity criteria related to conservative therapy documentation. This appeal provides clarification and supporting clinical evidence demonstrating that all medical necessity requirements have been satisfied.

Patient Clinical History

John Doe is a 57■year■old male diagnosed with lumbar spinal stenosis and radiculopathy. He presents with chronic lower back pain, neurogenic claudication, and functional limitation refractory to conservative management.

Completed Conservative Therapy

- Formal supervised physical therapy for 12 weeks within the last 12 months
- Pharmacologic therapy including NSAIDs and neuropathic agents
- Three epidural steroid injections with inadequate durable relief

Patient Information (Duplicate)

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Imaging and Objective Findings

MRI of the lumbar spine demonstrates severe central canal stenosis and bilateral foraminal narrowing at L4–L5 and L5–S1. Neurological examination findings correlate with imaging results and support surgical decompression.

Treatment Rationale

Given the failure of conservative measures and objective findings, lumbar decompression with fusion is medically necessary to relieve neural compression, restore function, and prevent further neurological deterioration.

Summary and Request

All required criteria for surgical intervention have been met. I respectfully request reconsideration and approval of this prior authorization based on the enclosed documentation.

Sincerely,

Rebecca Lawson, MD

Board Certified Orthopedic Spine Surgeon

NPI: 1098765432