**This is a synthetic sample for demonstration purposes only. The patient, dates, providers, and figures shown are fictional.**

# Future Care Projection

## 1. Causally Related Diagnoses

The patient is a 42-year-old restrained driver injured in a rear-end motor vehicle collision on 03/14/2025, sustaining primary injury to the lumbar spine and left shoulder [Bates p.4].

| Diagnosis | Causation Basis | Permanence | Source |
|---|---|---|---|
| L4-L5 disc herniation with left L5 radiculopathy | Direct | Permanent | [Bates p.42] |
| Left shoulder rotator cuff tear (supraspinatus, partial-thickness) | Direct | Permanent | [Bates p.78] |
| Cervical strain | Direct | Resolved | [Bates p.21] |
| Post-traumatic adjustment disorder with anxious mood | Direct | Permanent, progressive | [Bates p.115] |

## 2. Treatment to Date

Documented treatment period: 03/14/2025 through 02/18/2026 (11 months).

- Emergency department evaluation — 03/14/2025 — CT lumbar/cervical negative for fracture, discharged with NSAIDs — [Bates p.4–18]
- Orthopedic spine consultation — 04/02/2025 to 11/12/2025 — 6 visits, persistent L5 radicular symptoms — [Bates p.22–55]
- MRI lumbar spine — 04/18/2025 — L4-L5 paracentral disc herniation with mass effect on left L5 nerve root — [Bates p.42]
- MRI left shoulder — 06/09/2025 — partial-thickness supraspinatus tear, no full retraction — [Bates p.78]
- Physical therapy — 04/10/2025 to 10/30/2025 — 32 sessions, partial relief of mechanical low back pain, persistent radicular symptoms — [Bates p.56–77]
- Lumbar epidural steroid injection (L4-L5 transforaminal, left) — 07/22/2025 and 09/15/2025 — partial transient relief lasting 4–6 weeks — [Bates p.89–94]
- Pain management consultation — 08/05/2025 to 02/18/2026 — 4 visits, ongoing oral analgesic management — [Bates p.95–112]
- Behavioral health — 10/02/2025 to 02/10/2026 — 9 sessions CBT, ongoing — [Bates p.115–129]

## 3. Projected Future Care

Horizon. The projection period is 7 years, anchored on the documented permanence of L4-L5 disc herniation with radiculopathy (HORIZON ANCHORS guidance: Disc herniation w/ radiculopathy, non-surgical).

Cost figures reflect 100% of estimated reasonable and customary billed charges, adjusted to the patient's treating region. No probability weighting. No Medicare-based methodology. Present-value adjustment, if applicable, is performed by the retained forensic economist.

### 1. LUMBAR SPINE — Orthopedic and Interventional Pain Management

- Orthopedic spine follow-up visits (annual baseline; quarterly during surgical scenario peri-operative year); CPT 99213 [Bates p.42]
- Lumbar MRI surveillance (every 2 years conservative; pre-op and 1-year post-op surgical); CPT 72148 [Bates p.42]
- Lumbar transforaminal epidural steroid injection series (PRN flare management; 2/yr conservative, 1/yr surgical post-recovery); CPT 64483 [Bates p.89]
- Lumbar microdiscectomy — single-level L4-L5 (surgical scenario only, if conservative care fails); CPT 63030 [Bates p.42]
- Post-operative physical therapy (surgical scenario only, 24 sessions); CPT 97110 [Bates p.56]

*Clinical justification:* The patient has documented persistent L5 radicular symptoms despite 7 months of conservative care and two transforaminal injections with only transient relief [Bates p.89, 95]. Continued conservative management is reasonable, with a recognized surgical pathway if symptoms progress or fail to plateau. Both pathways are medically necessary depending on conservative-care response.

### 2. LEFT SHOULDER — Orthopedic

- Orthopedic shoulder follow-up (annual baseline; biannual surgical year); CPT 99213 [Bates p.78]
- Physical therapy (12 sessions conservative; 36 sessions surgical including post-op rehab); CPT 97110 [Bates p.78]
- Subacromial corticosteroid injection (1/yr PRN conservative; 1 pre-op surgical); CPT 20610 [Bates p.78]
- Arthroscopic rotator cuff repair (surgical scenario only); CPT 29827 [Bates p.78]

*Clinical justification:* Partial-thickness supraspinatus tear with documented impingement on examination [Bates p.78]. Conservative management remains appropriate at this clinical stage; arthroscopic repair becomes indicated if progressive tear or persistent functional limitation develops.

### 3. PSYCHIATRIC — Outpatient Mental Health

- Outpatient psychotherapy (CBT, 12 sessions/yr conservative; 24 sessions/yr surgical with peri-operative support); CPT 90834 [Bates p.115]
- Psychiatric medication management visits (3/yr conservative; 4/yr surgical); CPT 99213 [Bates p.115]

*Clinical justification:* Adjustment disorder with anxious mood documented over 4 months of treatment, with anticipated chronicity under both pathways and intensified support in the surgical scenario [Bates p.115–129].

## EXHIBIT A — Future Medical Cost Projection

**COST METHODOLOGY STATEMENT**

All future care costs are sourced from estimated reasonable and customary billed charges, adjusted to the patient's treating region, applied at 100% with no probability weighting. The range reflects two clinically distinct treatment pathways — a conservative care scenario and a post-conservative surgical scenario — based on whether the patient achieves adequate response to conservative treatment. Both scenarios represent medically necessary care to a reasonable degree of medical probability.

### COST TABLE — ORTHOPEDIC SPECIALTY LANE

| Service | CPT | Unit Cost | Conservative Qty | Low Range | Surgical Qty | High Range |
|---|---|---|---|---|---|---|
| Orthopedic spine follow-up [Bates p.42] | 99213 | $214 | 7 | $1,498 | 12 | $2,568 |
| Lumbar MRI surveillance [Bates p.42] | 72148 | $2,140 | 3 | $6,420 | 2 | $4,280 |
| Lumbar microdiscectomy — L4-L5 [Bates p.42] | 63030 | $18,400 | — | not indicated | 1 | $18,400 |
| Orthopedic shoulder follow-up [Bates p.78] | 99213 | $214 | 7 | $1,498 | 9 | $1,926 |
| Subacromial corticosteroid injection [Bates p.78] | 20610 | $385 | 7 | $2,695 | 1 | $385 |
| Arthroscopic rotator cuff repair [Bates p.78] | 29827 | $24,800 | — | not indicated | 1 | $24,800 |
| Post-operative physical therapy [Bates p.56] | 97110 | $168 | — | not indicated | 24 | $4,032 |
| Conservative physical therapy [Bates p.78] | 97110 | $168 | 12 | $2,016 | 36 | $6,048 |
| Orthopedic subtotal | | | | $14,127 | | $62,439 |

### COST TABLE — PAIN MANAGEMENT SPECIALTY LANE

| Service | CPT | Unit Cost | Conservative Qty | Low Range | Surgical Qty | High Range |
|---|---|---|---|---|---|---|
| Pain management consultation [Bates p.95] | 99213 | $214 | 14 | $2,996 | 8 | $1,712 |
| Lumbar transforaminal epidural steroid injection [Bates p.89] | 64483 | $1,725 | 14 | $24,150 | 7 | $12,075 |

| | | | | | | |
|---|---|---|---|---|---|---|
| Pain Management subtotal | | | | $27,146 | | $13,787 |

**COST TABLE — MENTAL HEALTH SPECIALTY LANE**

| Service | CPT | Unit Cost | Conservative Qty | Low Range | Surgical Qty | High Range |
|---|---|---|---|---|---|---|
| Outpatient psychotherapy (CBT) [Bates p.115] | 90834 | $185 | 84 | $15,540 | 168 | $31,080 |
| Psychiatric medication management [Bates p.115] | 99213 | $214 | 21 | $4,494 | 28 | $5,992 |
| Mental Health subtotal | | | | $20,034 | | $37,072 |

| Service | CPT | Unit Cost | Conservative Qty | Low Range | Surgical Qty | High Range |
|---|---|---|---|---|---|---|
| Total projected future care _(estimated reasonable & customary)_ | | | | $61,307 | | $113,298 |

Source: estimated reasonable and customary billed charges, treating-region adjusted. A single unit cost is applied uniformly across both scenarios — the range reflects variation in treatment volume and clinical pathway, not pricing methodology. Present value adjustment, if applicable, is performed by the retained forensic economist.

*Contingency note: Surgical-pathway line items (lumbar microdiscectomy, rotator cuff repair, post-operative PT) are clinically reasonable but not yet indicated; they apply only if conservative care fails the documented response threshold. No pre-existing condition contributes independently to projected care on this record.*

## 4. Physician Attestation

> *All of the opinions expressed in this letter are to a reasonable degree of medical certainty. The future care described herein is reasonable, medically necessary, and causally related to the injuries sustained on 03/14/2025. These opinions are limited to future medical care only and exclude lost earnings, household services, or non-economic damages. These opinions are further limited to the records reviewed as of the report date; material new information may require revision of these opinions.*

## 5. Records Reviewed

The opinions expressed in this letter are based on my review of the following records.

| # | Provider / Facility | Record Type | Date(s) | Bates Range | Pages |
|---|---|---|---|---|---|
| 1 | Westside Regional ED | ED Visit | 03/14/2025 | [Bates p.1–18] | 18 |
| 2 | Pacific Spine & Orthopedics | Office Visits | 04/02/2025–11/12/2025 | [Bates p.22–41] | 20 |
| 3 | Coastal Imaging | Imaging report | 04/18/2025 | [Bates p.42] | 1 |
| 4 | Coastal Imaging | Imaging report | 06/09/2025 | [Bates p.78] | 1 |

| | | | | | |
|---|---|---|---|---|---|
| 5 | Pacific Physical Therapy | PT sessions | 04/10/2025–10/30/2025 | [Bates p.56–77] | 22 |
| 6 | Bay Interventional Pain | Injection procedures | 07/22/2025, 09/15/2025 | [Bates p.89–94] | 6 |
| 7 | Bay Pain Management | Office Visits | 08/05/2025–02/18/2026 | [Bates p.95–112] | 18 |
| 8 | Harbor Behavioral Health | Therapy sessions | 10/02/2025–02/10/2026 | [Bates p.115–129] | 15 |
| | | | | Total pages reviewed | 101 |