

MDR Tracking Number: M5-03-1304-01

Under the provisions of Section 413.031 of the Texas Workers' Compensation Act, Title 5, Subtitle A of the Texas Labor Code, effective June 17, 2001 and Commission Rule 133.305, titled Medical Dispute Resolution-General, and 133.307, titled Medical Dispute Resolution of a Medical Fee Dispute, a review was conducted by the Division regarding a medical fee dispute between the requestor and the respondent named above. This dispute was received on 1/30/03.

I. DISPUTE

Whether there should be reimbursement for 97112, 97032 , 97035, 97265, 99213, 97124, 97250, 99080-73, 97110, 97018, 95927 x 6, 95904 x 4, 95903 x 4, 99090, 97018, 97010, 76536 and 76800 from 10/16/02 through 11/21/02 denied by the carrier on the basis of “L” – not the treating doctor.

II. RATIONALE

Rule 126.9 (c) states, “The first doctor who provides health care to an injured employee shall be known as the injured employee’s initial choice of treating doctor.”...

The injured worker identified E. Dan Udonta, M.D. as the treating doctor when a TWCC-53 was filed on 12/11/02 to change treating doctors from Udonta to the requestor, William C. Denman, D.C.

The change of treating doctors did not occur until approved by the Commission on 12/12/02. On this basis, reimbursement for services from 10/16/02 through 11/21/02 are not recommended.

III. DECISION

Based upon the review of the disputed healthcare services within this request, the Division has determined that the requestor **is not** entitled to reimbursement for 97112, 97032 , 97035, 97265, 99213, 97124, 97250, 99080-73, 97110, 97018, 95927 x 6, 95904 x 4, 95903 x 4, 99090, 97018, 97010, 76536 and 76800 from 10/16/02 through 11/21/02.

The above Findings and Decision are hereby issued this 27th day of April 2004.

Noel L. Beavers
Medical Dispute Resolution Officer
Medical Review Division

NLB/nlb