

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 February 24, 2003.

I. DISPUTE

Whether there should be reimbursement for CPT Codes 99212, 99213, 95851, 97110, 97530, 97139-PH, 99070, and 99455-RP for dates of service 03/06/02 through 05/28/02.

II. FINDINGS

The submitted table of disputed listed dates of service 11/29/2001 and 12/04/2001; per §133.307(d)(1) dates of service 11/29/01 and 12/04/01 are greater than 365 days and outside the jurisdiction of Medical Dispute Resolution; therefore, these dates of service will not be reviewed.

III. RATIONALE

Neither party has submitted EOB's; therefore, disputed issues will be reviewed according to the 1996 Medical Fee Guideline; Texas Workers' Compensation Commission Act and Rules.

- CPT Code 99212 for date of service 03/06/02 – Per the 1996 Medical Fee Guideline (MFG)/Evaluation and Management (E&M) Ground Rule (IV)(C)(1) and the CPT descriptor, SOAP notes submitted support services were rendered as billed. Reimbursement in the amount of \$32.00 is recommended.
- CPT Code 99213 for date of service 03/11/02 – Per the 1996 MFG/E&M Ground Rule (IV)(C)(1) and the CPT descriptor, SOAP notes submitted support services were rendered as billed. Reimbursement in the amount of \$48.00 is recommended.
- CPT Code 95851 for date of service 03/11/02 – Per the 1996 MFG/Medicine Ground Rule (MGR)(I)(E)(4) the requestor states in the SOAP notes that range of motion (ROM) was measured; however, the ROM report was not submitted to support delivery of service. Therefore reimbursement is not recommended.
- CPT code 97110 for date of service 03/11/02 – Per the 1996 MFG/MGR (I)(A)(9)(b) the SOAP notes did not identify the severity of the injury warrant one-to-one therapy. Reimbursement not recommended.
- CPT code 97530 for date of service 03/11/02 – Per the 1996 MFG/MGR (I)(A)(9)(c) the SOAP notes did not support the procedures were supervised by the doctor or health care provider. Reimbursement not recommended.

- CPT code 97139-PH for date of service 03/11/02 – Per the 1996 MFG/MGR (I)(A)(9)(b) the SOAP notes do not support delivery of services as billed. Reimbursement not recommended.
- CPT code 99070 for date of service 03/11/02 – Per the 1996 MFG/MGR (I)(C)(6) SOAP notes support the use of 2% hydrocortisone cream; therefore, reimbursement in the amount of \$7.00 is recommended.
- CPT code 99455-RP for date of service 05/28/02 – Per the 1996 MFG/E&M Ground Rule (XXII)(D)(2) SOAP notes support the review of the impairment rating; therefore, reimbursement in the amount of \$50.00 is recommended.

IV. DECISION & ORDER

Based upon the review of the disputed healthcare services within this request, the Division has determined that the requestor is entitled to reimbursement for CPT codes 99212, 99213, 99070, and 99455-RP in the amount of \$137.00. Pursuant to Sections 402.042, 413.016, 413.031, and 413.019 the Division hereby ORDERS the Respondent to remit **\$137.00** plus all accrued interest due at the time of payment to the Requestor within 20 days receipt of this Order.

The above Findings, Decision and Order are hereby issued this 10th day of December 2003.

Marguerite Foster
Medical Dispute Resolution Officer
Medical Review Division

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