

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 7-1-03.

**I. DISPUTE**

Whether there should be reimbursement for office visits (99213), office visits with manipulation (99213MP), muscle testing (97750MT), work status report (99080-73) and physical therapy services (97113, 97116, 97250).

**II. FINDINGS**

1. On 8-8-03, the requestor's representative, Dr. Ben Higbee withdrew all medical necessity issues.
2. An updated table was sent to the Medical Review Division on 08-26-03. The updated table contained date of service 10-24-02 that was denied with EOB denial "V." Since the requestor withdrew the medical necessity issues, this date was not considered in the decision.
3. The insurance carrier submitted a timely response to the request for medical dispute resolution.

**III. RATIONALE**

No EOB: Neither party in the dispute submitted EOBs for some of the disputed services identified above. Since the insurance carrier did not raise the issue in their response that they had not had the opportunity to audit these bills and did not submit copies of the EOBs, the Medical Review Division will review these services per *Medical Fee Guideline*.

DOS	CPT CODE	Billed	Paid	EOB Denial Code	MARS (Maximum Allowable Reimbursement)	Reference	Rationale
09-23-02 10-3-02 10-7-02 10-8-02 10-9-02 10-10-02 5-5-03	99213	\$48.00	\$0.00	No EOB	\$48.00	Evaluation & Management GR (VI)	Office visit reports support delivery of service per MFG, reimbursement of 7 X \$48.00 = \$336.00.
03-03-03 04-21-03 04-28-03 5-12-03	99213MP	\$51.00	\$0.00	No EOB	\$48.00	Medicine GR (I)(B)(1)(b)	Office visit reports support delivery of service per MFG, reimbursement of 4 X \$48.00 = \$192.00.

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02-04-03	99080-73	\$15.00	\$0.00	No EOB	\$15.00	Rule 129.5(d)	<p>Rule 129.5(d) states, “The doctor shall file the Work Status Report:</p> <p>(1) after the initial examination of the employee, regardless of the employee’s work status;</p> <p>(2) when the employee experiences a change in work status or a substantial change in activity restrictions; and</p> <p>(3) on the schedule requested by the insurance carrier (carrier), its agent, or the employer requesting the report through its carrier, which shall not to exceed one report every two weeks and which shall be based upon the doctor’s scheduled appointments with the employee.”</p> <p>Work Status report indicates claimant was still off work. Billing of report does not comply with statute, no reimbursement is recommended.</p>
10-3-02	97113 (X2)	\$110.00	\$0.00	No EOB	\$52.00 / 15 min	See Rationale below	See Rationale below – No Reimbursement is recommended.
10-9-02	97113 (X3)	\$165.00	\$0.00	No EOB	\$52.00 / 15 min		
10-3-02 10-7-02 10-8-02 10-10-02	97116	\$38.00	\$0.00	No EOB	\$38.00		
10-3-02 10-7-02 10-8-02 10-9-02 10-10-02	97250	\$46.00	\$0.00	No EOB	\$43.00	CPT Code Descriptor	Reports support delivery of service per MFG. Reimbursement of 5 dates X \$43.00 = \$215.00.
10-7-02 10-8-02 10-10-02	97110 (X2)	\$74.00	\$0.00	No EOB	\$35.00 / 15 min	See Rationale below	See Rationale below – No Reimbursement is recommended.
10-8-02 10-10-02	97110 (X3)	\$111.00	\$0.00	No EOB	\$35.00 / 15 min		
10-10-02	97750MT	\$46.00	\$0.00	No EOB	\$43.00	Medicine GR (I)(D)(1)(e) and (I)(E)(3)(a – b)	Muscle testing report supports delivery of service per MFG, reimbursement of \$43.00 is recommended.
TOTAL							The requestor is entitled to reimbursement of <b>\$786.00</b> .

Rationale for 97110, 97113 and 97116:

- a. *Medical Fee* Guideline, Medicine Ground Rules, (I)(A)(9)(b), “Procedures (Supervision by the doctor of HCP, in either a group (97150) or one-to-one (97110-97139) setting, is

required).

- b. *Medical Fee* Guideline, Medicine Ground Rules, (I)(A)(11)(a), “Therapeutic procedures (97110) is defined as therapeutic exercise used to develop strength and endurance, range of motion and flexibility. Examples include the use of graded resistance ranging from manual resistance to a variety of equipment including isokinetic, isometric, or isoinertial in one or more planes.”
- c. *Medical Fee* Guideline, Medicine Ground Rules, (I)(C)(9), “If any of the procedures (97110-97139) are performed with two or more individuals, then 97150 is reported.”

Recent review of disputes involving one-on-one CPT code 97110, 97113 and 97116 by the Medical Dispute Resolution section indicate overall deficiencies in the adequacy of the documentation of this code both with respect to the medical necessity of one-on-one therapy and documentation reflecting that these individual services were provided as billed. Moreover, the disputes indicate confusion regarding what constitutes “one-on-one.” Therefore, consistent with the general obligation set forth in Section 413.016 of the Labor Code, the Medical Review Division has reviewed the matters in light all of the Commission requirements for proper documentation. The therapy notes for these dates of service do not support any clinical (mental or physical) reason as to why the patient could not have performed these exercises in a group setting, with supervision, as opposed to one-to-one therapy. The Requestor has failed to submit documentation to support reimbursement in accordance with the 1996 MFG and 133.307(g)(3). Therefore, reimbursement is not 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, 99213, 99213MP, 97250 and 97750MT in the amount of **\$ 786.00**. Pursuant to Sections 402.042, 413.016, 413.031, and 413.019 the Division hereby ORDERS the Respondent to remit **\$786.00** 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 19<sup>th</sup> day of August 2004.

Elizabeth Pickle  
Medical Dispute Resolution Officer  
Medical Review Division