

MDR Tracking Number: M4-05-0472-01

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 September 14, 2004.

I. DISPUTE

Whether there should be reimbursement for CPT codes 63047-80 and 63048-80 rendered on October 31, 2003.

II. RATIONALE

Requestors' position statement dated 10-06-04 states in part "that the CPT codes 63047-80 and 63048-80 are not global to CPT code 22630 because the laminectomies performed were for decompression."

Although the respondent did not provide a position statement, according to the response, the respondents' rationale for the denial is "fair and reasonable reimbursement was made."

The requestor submitted a copy of the Operative report that supports delivery of services billed for CPT codes 63047-80 and 63048-80. The carrier denied CPT codes 63047-80 and 63048-80 as being global to CPT code 22630. Per Ingenix compliance edits, application of modifier 80 provides the basis for separate payment of procedure 63047 and therefore, is not global to CPT code 22630. There were no coding conflicts found in Ingenix for services billed on date of service 10-31-03. Therefore, this review will be in accordance with the Medicare Fee Schedule. Per rule 134.202 (d), reimbursement recommended in the amount of \$237.79.

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 code(s) **63047-80 and 63048-80** in the amount of **\$237.79**. Pursuant to Sections 402.042, 413.016, 413.031, and 413.019 the Division hereby **ORDERS** the Respondent to remit **\$237.79** 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 18th day of February 2005.

Medical Dispute Resolution Officer
Medical Review Division