



## MEDICAL DISPUTE RESOLUTION FINDINGS AND DECISION

### PART I: GENERAL INFORMATION

<b>Type of Requestor:</b> (x) Health Care Provider ( ) Injured Employee ( ) Insurance Carrier	
Requestors Name and Address: Steven S. Callahan, PH.D. & Associates 4101 Greenbriar, Ste. 115 Houston, TX 77098	MDR Tracking No.: M4-05-9110-01
	Claim No.:
	Injured Employee's Name:
Respondent's Name: ARCH Insurance Co. Rep. Box #: 19	Date of Injury:
	Employer's Name: Alfred Conhagen, Inc.
	Insurance Carrier's No.: 002059000002WC01

### PART II: REQUESTOR'S PRINCIPLE DOCUMENTATION AND POSITION SUMMARY

Requestor's Position Summary states in part, "...The carrier has denied reimbursement for procedure 90801. The rationale used by the carrier is "no preauthorization." We disagree with the carrier's rationale as this service does not require preauthorization. Per TWCC guidelines, the carrier is responsible for all reasonable and necessary medical treatment. Per rule 134.600 the initial interview (90801) does NOT require preauthorization. The documentation clearly establishes the carrier's misinterpretation of fee guidelines."

Principle Documentation: 1. DWC 60 package  
2. CMS 1500's  
3. EOBs

### PART III: RESPONDENT'S PRINCIPLE DOCUMENTATION AND POSITION SUMMARY

Respondent's Position Summary states in part, "...According to 28 TAC §134.600, all psychological testing requires preauthorization, unless the testing is part of a preauthorized program. The requestor has failed to show that the testing underlying the disputed charge was part of a preauthorized program. Thus, preauthorization was required for the individual testing. Because preauthorization was not received prior to the testing, no reimbursement is due at this time..."

Principle Documentation: 1. Response to DWC 60

### PART IV: SUMMARY OF DISPUTE AND FINDINGS

Date(s) of Service	Denial Code	CPT Code(s) or Description	Part V Reference	Additional Amount Due (if any)
06/14/04	A	90801	1, 2	\$192.58
TOTAL DUE				\$192.58

### PART V: MEDICAL DISPUTE RESOLUTION REVIEW SUMMARY, METHODOLOGY, AND/OR EXPLANATION

Section 413.011(a-d) titled (Guidelines and Medical Policies), and Division Rule 134.202 titled (Medical Fee Guideline) effective August 1, 2003, sets out reimbursement guidelines.

1. This dispute relates to procedures 90801 (psychiatric diagnostic interview examination denied as "A – Service is denied for lack of proof of pre-authorization.")
2. CPT Code 90801 for date of service 06/14/04. According to §134.600(h)(4) all psychological testing and psychotherapy, repeat interviews, and biofeedback; except when any service is part of a preauthorized or exempt rehabilitation program requires preauthorization. The Respondent does not affirm that the service provided was a repeat interview, which would require preauthorization; therefore, reimbursement in the amount of \$192.58 is recommended.

**PART VI: GENERAL PAYMENT POLICIES/REFERENCES IMPACTING DECISION**

Texas Labor Code 413.011(a-d)  
28 Texas Administrative Code Sec. §134.1  
28 Texas Administrative Code Sec. §134.202 & §134.600(h)(4)

**PART VII: DIVISION DECISION AND ORDER**

Based upon the documentation submitted by the parties and in accordance with the provisions of Texas Labor Code, Sec. 413.031, the Division has determined that the Requestor is entitled to additional reimbursement in the amount of \$192.58. The Division hereby **ORDERS** the insurance carrier to remit this amount plus all accrued interest due at the time of payment to the Requestor within 30-days of receipt of this Order.

Ordered by:

Marguerite Foster

September 25, 2006

Authorized Signature

Typed Name

Date of Order

**PART VIII: YOUR RIGHT TO REQUEST JUDICIAL REVIEW**

Appeals of medical dispute resolution decisions and orders are procedurally made directly to a district court in Travis County [see Texas Labor Code, Sec. 413.031(k), as amended and effective Sept. 1, 2005]. An appeal to District Court must be filed not later than 30 days after the date on which the decision that is the subject of the appeal is final and appealable. The Division is not considered a party to the appeal.

**Si prefiere hablar con una persona en español acerca de ésta correspondencia, favor de llamar a 512-804-4812.**