



MEDICAL DISPUTE RESOLUTION FINDINGS AND DECISION

PART I: GENERAL INFORMATION

| | | |
|--|--------------------------|--------------------------------|
| Requestor's Name and Address: Glenn J. Bricken, Psy. D. 25810 Oak Ridge Drive The Woodlands, TX 77380 | MDR Tracking #: | M4-07-3877-01 |
| | Claim #: | |
| | Injured Employee's Name: | |
| Respondent's Name and Box #: TRAVELERS INDEMNITY CO OF CONN REP BOX # : 05 | Date of Injury: | |
| | Employer's Name: | Quality Electric Steel Casting |
| | Insurance Carrier's #: | 478 CBDRP 6783 |

PART II: REQUESTOR'S PRINCIPLE DOCUMENTATION AND POSITION SUMMARY

Requestor's Position Summary states, "The interpretation of all records received regarding the patients' care (CPT 90885), which is completed prior to the initial visit by the patient, and the consultation with the care professionals (CPT 90887), which include communication with the treating doctor, treating specialist, adjustor and case manager, are fundamental part of the comprehensive evaluation by Dr. Bricken. By asserting that the 90885, and the 90887 were to be included with another service, the carrier is attempting to deny the claims under the auspices of "unbundling," this is not applicable due to the fact that each is distinct procedure. The services provided were not unbundled."

- Principle Documentation:
1. DWC 60 package
 2. CMS 1500's
 3. EOB'S
 4. Medical Reports

PART III: RESPONDENT'S PRINCIPLE DOCUMENTATION AND POSITION SUMMARY

Respondent's Position Summary states, "The invoice was paid in accordance with medical fee guidelines. Payment is included in allowance for another service procedure. This procedure is considered intergral to the primary procedure cole 90801. The original invoice was paid timely, received on 04/25/2006 and paid on 05/06/2006. The resubmission was received on 08/28/2006 and processed on 08/29/2006."

- Principle Documentation:
1. Position Summary
 2. EOB

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) |
|--------------------|-------------|----------------------------|------------------|--------------------------------|
| 03/02/2006 | W1 | 90801 x 2 units | 1-4 | \$0.00 |
| 03/02/2006 | 97, Z014 | 90885 x 1 | 1-3, 5 | \$0.00 |
| 03/02/2006 | 97, Z014 | 90887 x 30 | 1-3, 6 | \$0.00 |
| TOTAL DUE | | | | \$0.00 |

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/services that were billed under CPT codes 90801, 90885, and 90887 for DOS 03/02/2006.

2. Per Rule 133.307(d), the request for medical dispute resolution was received in the Division on 02/27/2007.
3. Based on Division Rule 133.307(d)(1-2), the only date of service eligible for review is 03/02/2006.
4. CPT code 90801 is defined as psychiatric diagnostic interview examination, which includes taking the patient's history and assessing his/her mental status, as well as disposition. The psychiatrist may spend time communicating with family, friends, co-workers, or other sources as part of this examination and may even perform the diagnostic interview on the patient entirely through other informative sources. Laboratory or other medical studies and their interpretation are also included. Per rule 134.202(b) CPT code 90801 is not a timed code. Additional reimbursement is not recommended.

Per CMS-1500, the zip code 77380 is located in Montgomery County. The MFG MAR for CPT code 90801 in Montgomery County is \$183.81/per unit. The Respondent paid \$183.81; therefore, additional reimbursement is not recommended.

5. CPT code 90885 is defined as psychiatric evaluation of hospital records, other psychiatric reports, psychometric and/or projective tests, and other accumulated data for medical diagnostic purposes. The insurance carrier denied reimbursement based upon "97" & "Z014"- payment is included in the allowance for another service/px. The services listed under this px code are included in a more comp code which accurately describes the entire px(s) per-med." Per Rule 134.202(b) this is a bundled code and is not reimbursable.

6. CPT code 90887 is defined as interpretation or explanation of results of psychiatric, other medical examinations and procedures, or other accumulated data to family or other responsible persons, or advising them how to assist patient. The insurance carrier denied reimbursement based upon "97" & "Z014"- payment is included in the allowance for another service/px. The services listed under this px code are included in a more comp code which accurately describes the entire px(s) per-med." Per Rule 134.202(b), this is a bundled code and is not reimbursable.

Therefore it is the conclusion of the Medical Dispute Resolution that reimbursement is not due the Requestor.

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

PART VII: DIVISION DECISION

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 not entitled to reimbursement.

Decision by:

05/17/07

 Authorized Signature

 Medical Fee Dispute Resolution Officer

 Date

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.