

DECISION AND ORDER

This case is decided pursuant to Chapter 410 of the Texas Workers' Compensation Act and Rules of the Division of Workers' Compensation adopted thereunder.

ISSUE

A contested case hearing was held on 06/20/08 to decide the following disputed issue:

1. Is respondent entitled to reimbursement in the amount of \$122.00 plus applicable accrued interest under CPT Code 99214 for services rendered on 04/03/07?

PARTIES PRESENT

Petitioner was represented by PM. Respondent was represented by SC, Collection Representative.

BACKGROUND INFORMATION

It is undisputed the Claimant was injured in the course and scope of his employment on _____. A Benefit Contested Case Hearing (BCCH) was held on 08/08/07. At that BCCH it was determined the compensable injury of _____ extends to and includes a right knee strain. There was no evidence that determination has been appealed.

It is undisputed the Respondent provided medical services to the Claimant, under CPT Code 99214, on 04/03/07, in the amount of \$122.00. This was for treatment of the Claimant's right knee. Petitioner denied payment for these services under Denial Code W12 stating the extent of the injury is not finally adjudicated. A request for Medical Dispute Resolution (DWC Form 60) was filed. A Medical Fee Dispute Resolution Findings and Decision was issued holding the Petitioner liable for the subject fees.

At the contested case hearing held on 06/20/08, the Petitioner again denied the bill stating the extent of injury was not yet adjudicated. No evidence was offered in support of this position.

The greater weight of the evidence is not contrary to the findings of Medical Review, and the Respondent is entitled to \$122.00, plus interest, under CPT Code 99214, for services rendered to the Claimant on 04/03/07.

Even though all the evidence presented was not discussed, it was considered. The Findings of Fact and Conclusions of Law are based on all of the evidence presented.

FINDINGS OF FACT

1. The parties stipulated to the following facts:

- A. Venue is proper in the (City) Field Office of the Texas Department of Insurance, Division of Workers' Compensation.
 - B. On _____, Claimant was the employee of (Employer).
 - C. Claimant was injured in the course and scope of his employment on _____.
- 2. Carrier delivered to Claimant a single document stating the true corporate name of Carrier, and the name and street address of Carrier's registered agent, which document was admitted into evidence as Hearing Officer's Exhibit Number 2.
 - 3. The compensable injury of _____ extends to and includes a right knee strain.
 - 4. On 04/03/07 the Respondent provided services to the Claimant, under CPT Code 99214, for injury to the right knee in the amount of \$122.00.

CONCLUSIONS OF LAW

- 1. The Texas Department of Insurance, Division of Workers' Compensation, has jurisdiction to hear this case.
- 2. Venue is proper in the (City) Field Office.
- 3. The preponderance of the evidence is not contrary to the Medical Fee Dispute Resolution Findings and Decision that the Respondent is entitled to be paid \$122.00 for services provided to the Claimant on 04/03/07.

DECISION

The preponderance of the evidence is not contrary to the Medical Fee Dispute Resolution Findings and Decision that the Respondent is entitled to be paid \$122.00 for services provided to the Claimant on 04/03/07.

ORDER

Carrier is ordered to pay benefits in accordance with this decision, the Texas Workers' Compensation Act, and the Commissioner's Rules.

The true corporate name of the insurance carrier is **AMCOMP ASSURANCE CORPORATION** and the name and address of its registered agent for service of process is:

**CORPORATION SERVICE COMPANY
800 BRAZOS, SUITE 330
AUSTIN, TEXAS 78701**

Signed this 7th day of July, 2008.

G. W. Quick
Hearings Officer