

**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 benefit contested case hearing was held on May 5, 2009, to decide the following disputed issue:

1. Is the preponderance of the evidence contrary to the decision of Medical Review rendered on January 22, 2009, that Respondent is entitled to reimbursement for an additional level code under CPT Code 97750-FC for services rendered on May 14, 2008, in the amount of an additional \$576.00 plus interest?

**PARTIES PRESENT**

Petitioner/Self-Insured appeared and was represented by BP, attorney. The Respondent/Provider was assisted by RJ, lay representative. Claimant did not appear and his appearance was waived.

**BACKGROUND**

On May 14, 2008, Dr. R, LPT, of (Healthcare Provider), administered physical therapy and services, to claimant. The petitioner claimed that the bill was not timely filed. The documentation and evidence demonstrated that the bill was timely filed by an electronic filing agent on May 21, 2008. The original bill was submitted with supporting documentation and a copy of the print delivery status document demonstrating that the bill for date of service was timely provided and filed with the carrier on 5/21/08 at 2:07 p.m. within 95 days. The Medical Fee Dispute Resolution ruled for the Respondent due to the aforementioned document demonstrating that the bill for the date of service was timely provided. The preponderance of the evidence is not contrary to the findings of Medical Review in the case. Respondent is entitled to \$576.00 plus interest under CPT Code 97750-FC.

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 (Self-Insured), Employer, when he sustained a compensable injury.

2. Self-Insured Carrier delivered to Respondent a single document stating the true corporate name of self-insured Carrier, and the name and street address of self-insured Carrier's registered agent, which document was admitted into evidence as Hearing Officer's Exhibit Number 2.
3. Respondent filed the bill for services rendered on May 14, 2008, in the amount of \$576.00 within 95 days.

### **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 decision of Medical Review rendered on January 22, 2009, that Respondent is entitled to reimbursement for payment under CPT Code 97750-FC for services rendered on May 14, 2008, in the amount of \$576.00 plus interest.

### **DECISION**

Respondent is entitled to reimbursement for payment under CPT Code 97750-FC for services rendered on May 14, 2008 in the amount of \$576.00 plus interest.

### **ORDER**

Carrier is ordered to pay benefits in accordance with this decision, the Texas Workers' Compensation Act, and the Commissioner's Rules. Accrued but unpaid medical benefits shall be paid in a lump sum together with interest as provided by law.

The true corporate name of the insurance carrier is (**SELF –INSURED**); and the name and address of its registered agent for service of process is:

**EE, COUNTY JUDGE  
(STREET ADDRESS)  
(CITY), TEXAS (ZIP CODE)**

Signed this 12th day of May, 2009.

Susan Meek  
Hearing Officer