TEXAS DEPARTMENT OF INSURANCE
Division of Workers' Compensation - Medical Fee Dispute Resolution (MS-48)
7551 Metro Center Drive, Suite 100, Austin, Texas 78744-1645
(512) 804-4000 | F: (512) 804-4811 | (800) 252-7031 | TDI.texas.gov | @TexasTDI

MEDICAL FEE DISPUTE RESOLUTION FINDINGS AND DECISION

GENERAL INFORMATION

Requestor Name
TEXAS HEALTH FORT WORTH

Respondent Name
WEST AMERICAN INSURANCE COMPANY

MFDR Tracking Number
M4-18-3668-01

Carrier's Austin Representative
Box Number 01

MFDR Date Received
May 31, 2018

REQUESTOR'S POSITION SUMMARY

Requestor's Position Summary: "Physical therapy services have not been reimbursed per state fee schedule rules."

Amount in Dispute: $331.20

RESPONDENT'S POSITION SUMMARY

Respondent's Position Summary: "Physical therapy services are NOT reimbursed under OPPS they will reimburse to medical fee schedule."

Response Submitted by: Liberty Mutual

SUMMARY OF FINDINGS

Dates of Service	Disputed Services	Dispute Amount	Amount Due
January 3, 2018 to January 31, 2018	Outpatient Facility Services – Occupational Therapy	$331.20	$0.00

FINDINGS AND DECISION

This medical fee dispute is decided pursuant to Texas Labor Code §413.031 and applicable rules of the Texas Department of Insurance, Division of Workers' Compensation.

Background

1. 28 Texas Administrative Code §133.307 sets out the procedures for resolving medical fee disputes.
2. 28 Texas Administrative Code §134.403 sets out the hospital facility fee guideline for outpatient services.
3. 28 Texas Administrative Code §134.203 sets out the fee guideline for professional medical services.
4. The insurance carrier reduced payment for the disputed services with the following claim adjustment codes:
   - P12 – WORKERS' COMPENSATION JURISDICTIONAL FEE SCHEDULE ADJUSTMENT.
   - 96 – NON-COVERED CHARGE(S).
   - 97 – THE BENEFIT FOR THIS SERVICE IS INCLUDED IN THE PAYMENT/ALLOWANCE FOR ANOTHER SERVICE/PROCEDURE THAT HAS ALREADY BEEN ADJUDICATED.

Issues

1. What is the recommended payment for the services in dispute?
2. Is the requestor entitled to additional reimbursement?

Findings

1. This dispute regards occupational therapy services performed in an outpatient hospital facility setting. Such services are not paid under Medicare's Outpatient Prospective Payment System but rather are paid under Medicare's Physician Fee Schedule for professional services.

   Rule §134.403(h) requires that if Medicare pays using other Medicare fee schedules, reimbursement shall be made using the DWC fee guideline applicable to the code on the date the service was provided. Accordingly, payment for these services is calculated under the DWC Medical Fee Guideline for Professional Services, Rule §134.203(c):

   (1) For service categories of Evaluation & Management, General Medicine, Physical Medicine and Rehabilitation, Radiology, Pathology, Anesthesia, and Surgery when performed in an office setting, the established conversion factor to be applied is $52.83 . . .

   (2) The conversion factors listed in paragraph (1) . . . shall be the conversion factors for calendar year 2008. Subsequent year's conversion factors shall be determined by applying the annual percentage adjustment of the Medicare Economic Index (MEI) to the previous year's conversion factors. . . .

   The Medicare fee is the sum of the geographically adjusted work, practice expense and malpractice values multiplied by a conversion factor. The MAR is calculated by substituting the division conversion factor. The applicable division conversion factor for calendar year 2018 is $58.31.

   Per Medicare payment policy, when more than one unit of certain therapy services with multiple procedure payment indicator '5' is billed, the first unit of the code with the highest practice expense for that day is paid in full. Payment for each extra therapy unit performed on the same date is reduced by 50% of the practice expense.

   Reimbursement for the disputed services is calculated as follows:

   - Procedure code 97140, January 3, 2018, has a Work RVU of 0.43 multiplied by the Work GPCI of 1.007 is 0.43301. The practice expense RVU of 0.35 multiplied by the PE GPCI of 0.986 is 0.3451. The malpractice RVU of 0.01 multiplied by the malpractice GPCI of 0.747 is 0.00747. The PE for this code is not the highest. The PE reduced rate is $35.75.
   - Procedure code 97010, January 3, 2018, is a bundled code. Reimbursement is included with payment for other services performed on the same date.
   - Procedure code 97035, January 3, 2018, has a Work RVU of 0.21 multiplied by the Work GPCI of 1.007 is 0.21147. The practice expense RVU of 0.16 multiplied by the PE GPCI of 0.986 is 0.15776. The malpractice RVU of 0.01 multiplied by the malpractice GPCI of 0.747 is 0.00747. The PE for this code is not the highest. The PE reduced rate is $17.37.
   - Procedure code 97110, January 3, 2018, has a Work RVU of 0.45 multiplied by the Work GPCI of 1.007 is 0.45315. The practice expense RVU of 0.4 multiplied by the PE GPCI of 0.986 is 0.3944. The malpractice RVU of 0.02 multiplied by the malpractice GPCI of 0.747 is 0.01494. The sum is 0.86249 multiplied by the division conversion factor of $58.31 for a MAR of $50.29. This code has the highest PE for this date. The first unit is paid at $50.29.
   - Procedure code 97140, January 5, 2018, has a Work RVU of 0.43 multiplied by the Work GPCI of 1.007 is 0.43301. The practice expense RVU of 0.35 multiplied by the PE GPCI of 0.986 is 0.3451. The malpractice RVU of 0.01 multiplied by the malpractice GPCI of 0.747 is 0.00747. The PE for this code is not the highest. The PE reduced rate is $35.75.
   - Procedure code 97763, January 5, 2018, has a Work RVU of 0.48 multiplied by the Work GPCI of 1.007 is 0.48336. The practice expense RVU of 0.87 multiplied by the PE GPCI of 0.986 is 0.85782. The malpractice RVU of 0.02 multiplied by the malpractice GPCI of 0.747 is 0.01494. The sum is 1.35612 multiplied by the division conversion factor of $58.31 for a MAR of $79.08. This code has the highest PE for this date. The first unit is paid at $79.08. The PE reduced rate is $54.07. The total for 2 units is $133.15.

- Procedure code 97010, January 5, 2018, is a bundled code. Reimbursement is included with payment for other services performed on the same date.
- Procedure code 97035, January 5, 2018, has a Work RVU of 0.21 multiplied by the Work GPCI of 1.007 is 0.21147. The practice expense RVU of 0.16 multiplied by the PE GPCI of 0.986 is 0.15776. The malpractice RVU of 0.01 multiplied by the malpractice GPCI of 0.747 is 0.00747. The PE for this code is not the highest. The PE reduced rate is $17.37.
- Per Medicare policy, procedure code 97140, January 10, 2018, may not be reported with code 97760 billed on this same claim.
- Procedure code 97760, January 10, 2018, has a Work RVU of 0.5 multiplied by the Work GPCI of 1.007 is 0.5035. The practice expense RVU of 0.81 multiplied by the PE GPCI of 0.986 is 0.79866. The malpractice RVU of 0.02 multiplied by the malpractice GPCI of 0.747 is 0.01494. The sum is 1.3171 multiplied by the division conversion factor of $58.31 for a MAR of $76.80. This code has the highest PE for this date. The first unit is paid at $76.80.
- Procedure code 97010, January 10, 2018, is a bundled code. Reimbursement is included with payment for other services performed on the same date.
- Procedure code 97035, January 10, 2018, has a Work RVU of 0.21 multiplied by the Work GPCI of 1.007 is 0.21147. The practice expense RVU of 0.16 multiplied by the PE GPCI of 0.986 is 0.15776. The malpractice RVU of 0.01 multiplied by the malpractice GPCI of 0.747 is 0.00747. The PE for this code is not the highest. The PE reduced rate is $17.37.
- Procedure code 97010, January 12, 2018, is a bundled code. Reimbursement is included with payment for other services performed on the same date.
- Procedure code 97035, January 12, 2018, has a Work RVU of 0.21 multiplied by the Work GPCI of 1.007 is 0.21147. The practice expense RVU of 0.16 multiplied by the PE GPCI of 0.986 is 0.15776. The malpractice RVU of 0.01 multiplied by the malpractice GPCI of 0.747 is 0.00747. The PE for this code is not the highest. The PE reduced rate is $17.37.
- Procedure code 97110, January 12, 2018, has a Work RVU of 0.45 multiplied by the Work GPCI of 1.007 is 0.45315. The practice expense RVU of 0.4 multiplied by the PE GPCI of 0.986 is 0.3944. The malpractice RVU of 0.02 multiplied by the malpractice GPCI of 0.747 is 0.01494. The sum is 0.86249 multiplied by the division conversion factor of $58.31 for a MAR of $50.29. This code has the highest PE for this date. The first unit is paid at $50.29.
- Procedure code 97140, January 17, 2018, has a Work RVU of 0.43 multiplied by the Work GPCI of 1.007 is 0.43301. The practice expense RVU of 0.35 multiplied by the PE GPCI of 0.986 is 0.3451. The malpractice RVU of 0.01 multiplied by the malpractice GPCI of 0.747 is 0.00747. The PE for this code is not the highest. The PE reduced rate is $35.75.
- Procedure code 97010, January 17, 2018, is a bundled code. Reimbursement is included with payment for other services performed on the same date.
- Procedure code 97035, January 17, 2018, has a Work RVU of 0.21 multiplied by the Work GPCI of 1.007 is 0.21147. The practice expense RVU of 0.16 multiplied by the PE GPCI of 0.986 is 0.15776. The malpractice RVU of 0.01 multiplied by the malpractice GPCI of 0.747 is 0.00747. The PE for this code is not the highest. The PE reduced rate is $17.37.
- Procedure code 97110, January 17, 2018, has a Work RVU of 0.45 multiplied by the Work GPCI of 1.007 is 0.45315. The practice expense RVU of 0.4 multiplied by the PE GPCI of 0.986 is 0.3944. The malpractice RVU of 0.02 multiplied by the malpractice GPCI of 0.747 is 0.01494. The sum is 0.86249 multiplied by the division conversion factor of $58.31 for a MAR of $50.29. This code has the highest PE for this date. The first unit is paid at $50.29.
- Procedure code 97140, January 19, 2018, has a Work RVU of 0.43 multiplied by the Work GPCI of 1.007 is 0.43301. The practice expense RVU of 0.35 multiplied by the PE GPCI of 0.986 is 0.3451. The malpractice RVU of 0.01 multiplied by the malpractice GPCI of 0.747 is 0.00747. The PE for this code is not the highest. The PE reduced rate is $35.75.

- Procedure code 97010, January 19, 2018, is a bundled code. Reimbursement is included with payment for other services performed on the same date.
- Procedure code 97035, January 19, 2018, has a Work RVU of 0.21 multiplied by the Work GPCI of 1.007 is 0.21147. The practice expense RVU of 0.16 multiplied by the PE GPCI of 0.986 is 0.15776. The malpractice RVU of 0.01 multiplied by the malpractice GPCI of 0.747 is 0.00747. The PE for this code is not the highest. The PE reduced rate is $17.37.
- Procedure code 97110, January 19, 2018, has a Work RVU of 0.45 multiplied by the Work GPCI of 1.007 is 0.45315. The practice expense RVU of 0.4 multiplied by the PE GPCI of 0.986 is 0.3944. The malpractice RVU of 0.02 multiplied by the malpractice GPCI of 0.747 is 0.01494. The sum is 0.86249 multiplied by the division conversion factor of $58.31 for a MAR of $50.29. This code has the highest PE for this date. The first unit is paid at $50.29.
- Procedure code 97140, January 24, 2018, has a Work RVU of 0.43 multiplied by the Work GPCI of 1.007 is 0.43301. The practice expense RVU of 0.35 multiplied by the PE GPCI of 0.986 is 0.3451. The malpractice RVU of 0.01 multiplied by the malpractice GPCI of 0.747 is 0.00747. The PE for this code is not the highest. The PE reduced rate is $35.75.
- Procedure code 97010, January 24, 2018, is a bundled code. Reimbursement is included with payment for other services performed on the same date.
- Procedure code 97035, January 24, 2018, has a Work RVU of 0.21 multiplied by the Work GPCI of 1.007 is 0.21147. The practice expense RVU of 0.16 multiplied by the PE GPCI of 0.986 is 0.15776. The malpractice RVU of 0.01 multiplied by the malpractice GPCI of 0.747 is 0.00747. The PE for this code is not the highest. The PE reduced rate is $17.37.
- Procedure code 97110, January 24, 2018, has a Work RVU of 0.45 multiplied by the Work GPCI of 1.007 is 0.45315. The practice expense RVU of 0.4 multiplied by the PE GPCI of 0.986 is 0.3944. The malpractice RVU of 0.02 multiplied by the malpractice GPCI of 0.747 is 0.01494. The sum is 0.86249 multiplied by the division conversion factor of $58.31 for a MAR of $50.29. This code has the highest PE for this date. The first unit is paid at $50.29.
- Procedure code 97140, January 26, 2018, has a Work RVU of 0.43 multiplied by the Work GPCI of 1.007 is 0.43301. The practice expense RVU of 0.35 multiplied by the PE GPCI of 0.986 is 0.3451. The malpractice RVU of 0.01 multiplied by the malpractice GPCI of 0.747 is 0.00747. The PE for this code is not the highest. The PE reduced rate is $35.75.
- Procedure code G8987 and G8988 have status indicator Q, denoting functional information codes used for reporting purposes only. No separate payment is made.
- Procedure code 97010, January 26, 2018, is a bundled code. Reimbursement is included with payment for other services performed on the same date.
- Procedure code 97035, January 26, 2018, has a Work RVU of 0.21 multiplied by the Work GPCI of 1.007 is 0.21147. The practice expense RVU of 0.16 multiplied by the PE GPCI of 0.986 is 0.15776. The malpractice RVU of 0.01 multiplied by the malpractice GPCI of 0.747 is 0.00747.The PE for this code is not the highest. The PE reduced rate is $17.37.
- Procedure code 97110, January 26, 2018, has a Work RVU of 0.45 multiplied by the Work GPCI of 1.007 is 0.45315. The practice expense RVU of 0.4 multiplied by the PE GPCI of 0.986 is 0.3944. The malpractice RVU of 0.02 multiplied by the malpractice GPCI of 0.747 is 0.01494. The sum is 0.86249 multiplied by the division conversion factor of $58.31 for a MAR of $50.29. This code has the highest PE for this date. The first unit is paid at $50.29.
- Procedure code 97140, January 31, 2018, has a Work RVU of 0.43 multiplied by the Work GPCI of 1.007 is 0.43301. The practice expense RVU of 0.35 multiplied by the PE GPCI of 0.986 is 0.3451. The malpractice RVU of 0.01 multiplied by the malpractice GPCI of 0.747 is 0.00747. The PE for this code is not the highest. The PE reduced rate is $35.75.
- Procedure code 97010, January 31, 2018, is a bundled code. Reimbursement is included with payment for other services performed on the same date.

- Procedure code 97035, January 31, 2018, has a Work RVU of 0.21 multiplied by the Work GPCI of 1.007 is 0.21147. The practice expense RVU of 0.16 multiplied by the PE GPCI of 0.986 is 0.15776. The malpractice RVU of 0.01 multiplied by the malpractice GPCI of 0.747 is 0.00747. The PE for this code is not the highest. The PE reduced rate is $17.37.
- Procedure code 97110, January 31, 2018, has a Work RVU of 0.45 multiplied by the Work GPCI of 1.007 is 0.45315. The practice expense RVU of 0.4 multiplied by the PE GPCI of 0.986 is 0.3944. The malpractice RVU of 0.02 multiplied by the malpractice GPCI of 0.747 is 0.01494. The sum is 0.86249 multiplied by the division conversion factor of $58.31 for a MAR of $50.29. This code has the highest PE for this date. The first unit is paid at $50.29.

2. The total allowable reimbursement for the disputed services is $968.56. The insurance carrier paid $1,152.10. The amount due is $0.00. No additional payment is recommended.

Conclusion

In resolving disputes regarding the amount of payment due for health care determined to be medically necessary and appropriate for treatment of a compensable injury, the role of the division is to adjudicate the payment, given the relevant statutory provisions and division rules.

The division would like to emphasize that the findings and decision in this dispute are based on the available evidence presented by the requestor and respondent at the time of review. Even though not all the evidence was discussed, it was considered.

For the reasons stated above, the division finds that the requestor has not established that additional reimbursement is due. As a result, the amount ordered is $0.00.

ORDER

Based on the submitted information, pursuant to Texas Labor Code Section 413.031, the division hereby determines the requestor is entitled to $0.00 additional reimbursement for the services in dispute.

Authorized Signature

	Grayson Richardson	June 15, 2018
Signature	Medical Fee Dispute Resolution Officer	Date

YOUR RIGHT TO APPEAL

Either party to this medical fee dispute has a right to seek review of this decision in accordance with Rule §133.307.

A party seeking review must submit a Request to Schedule a Benefit Review Conference to Appeal a Medical Fee Dispute Decision (form DWC045M) in accordance with the form's instructions. The request must be received by the division within **twenty** days of your receipt of this decision. The request may be faxed, mailed or personally delivered to the division, using the contact information on the form, or to the field office handling the claim.

A party seeking review of this decision must deliver a copy of the request to all other parties involved in the dispute at the same time the request is filed. The request must include a copy of this *Medical Fee Dispute Findings and Decision* together with any other required information specified in 28 Texas Administrative Code §141.1(d).

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