

Medical Fee Dispute Resolution Findings and Decision General Information

Requestor Name

MILLENNIUM CHIROPRACTIC

Respondent Name

NATIONAL INTERSTATE INSURANCE CO.

MFDR Tracking Number

M4-22-0763-01

Carrier's Austin Representative

Box Number 06

DWC Date Received

December 21, 2021

Summary of Findings

Dates of Service	Disputed Services	Amount in Dispute	Amount Due
October 21, 2020 through December 7, 2020	97799-CP, 97750-FC and 99215	\$3,938.76	\$0.00
Total		\$3,938.76	\$0.00

Requestor's Position

"... denied by the carrier for the following reason(s): Extent of Injury; Workers' compensation jurisdictional fee schedule adjustment; Treatment/ Service is not causally related to the accepted injury... The carrier began denying our bills. I inquired with the adjuster as to why our bills were being denied. She wrote me a letter on 01/22/2021... She determined that because the strain was ... it no longer required any medical treatment and that she was not going to pay for any further care."

Amount in Dispute: \$3,938.76

Respondent's Position

"The disputed dates of service are October 21, 2020 through December 7, 2020. Therefore, Dr. Vanderwerff was required to file his request for MFDR no later than December 7, 2021 to have any of the dates considered. Because he did not do so, he has waived the right to MFDR. Dr. Vanderwerff is also not entitled to reimbursement for dates of service October 21, 2020 through December 7, 2020 because his license was expired when he provided those services. Dr. Vanderwerff's Texas chiropractic license expired October 1, 2020, making him ineligible to provide health care in the Texas workers' compensation system... Per the Division's website, Dr. Vanderwerff was restricted from providing health care services in the workers' compensation system until July 26, 2021."

Response Submitted by: Stone, Loughlin, Swanson

Findings and Decision

Authority

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

Statutes and Rules

1. 28 Texas Administrative Code (TAC) §133.307 sets out the procedures for resolving medical fee disputes.
2. 28 TAC §133.305 sets out the general Medical Dispute Resolution guidelines.
3. 28 TAC §42.20 Who May Treat.

Denial Reasons

- P12 - Workers' compensation jurisdictional fee schedule adjustment.
- CX06 – Treatment/Service is not casually related to the accepted injury.

Issues

1. Does CPT Code 99215 rendered on December 7, 2020 contain extent of injury issues?
2. Did the requestor submit a medical bill with a valid license number?
3. Did the requestor waive the right to medical fee dispute resolution for dates of service October 21, 2020 through November 30, 2020?

Findings

1. The requestor seeks reimbursement for CPT Code 99215 rendered on December 7, 2020. The service in dispute was denied by the workers' compensation carrier with denial reason code CX06. The extent of injury denial was timely presented to the requestor in the manner required by 28 TAC §133.240.

Documentation provided included a Contested Case Hearing (CCH) Decision, that identified the accepted injury and the conditions that were excluded.

Whether the health care provider treated the conditions accepted under that CCH Decision, or whether the health care provider treated conditions that were excluded under that CCH Decision is not a question that can be addressed through the MFD resolution process. Specifically, 28 TAC §133.305 (b) states that an extent-of-injury dispute shall be resolved prior to the submission of a MFD.

Because the service in dispute contains unresolved extent of injury disputes, this matter is not ripe for adjudication of a medical fee under 28 TAC §133.307. For that reason, date of service December 7, 2020, is dismissed.

2. The requestor seeks dispute resolution for CPT Codes 97799-CP and 97750-FC rendered on October 21, 2020 through November 30, 2020.

Review of the medical documentation supports that Eric VanderWerff, D.C., rendered the disputed FCE on October 21, 2020. Review of the medical bills (CMS1500) and medical documentation supports that Eric VanderWerff, D.C., billed for and rendered medical service on November 19, 2020 and December 7, 2020.

Review of the medical bills (CMS1500) documents that Karen Austin, D.C., billed for and rendered medical services on November 23, 2020, November 24, 2020, and November 30, 2020.

28 TAC §42.20 states, "(a-b) Licensed Doctor of Medicine, osteopathy, chiropractic, and podiatry may act as treating doctors for injured workers entitled to benefits under the Act. (b) Treating doctors may prescribe treatment to be rendered by other persons licensed to provide health care, or by persons not licensed to provide health care who work under the direct supervision and control of the treating."

The DWC issued a cease-and-desist order dated December 21, 2020, which states in part, "It is ordered that Eric A. VanderWerff, D.C., must immediately cease and desist from the following: Providing health care services in the Texas workers' compensation system, including serving as a treating doctor, until he notifies DWC that the Texas Board of Chiropractic Examiners has allowed him to practice chiropractic medicine."

In addition, the cease-and-desist order states "On October 1, 2020, Dr. Vanderwerff's license expired and remains expired as of December 18, 2020."

The DWC finds that Dr. Vanderwerff was not licensed when dates of service October 21, 2020, November 19, 2020 and December 7, 2020 were rendered.

3. The requestor seeks reimbursement in the amount of \$3,938.76 for CPT Codes 97799-CP and 97750-FC, rendered on October 21, 2020 through December 7, 2020.

28 TAC §133.307(c) (1) states in pertinent part, "Timeliness. A requestor shall timely file the request with the division's MFDR Section or waive the right to MFDR. The division shall deem a request to be filed on the date the MFDR Section receives the request. A decision by the MFDR Section that a request was not timely filed is not a dismissal and may be appealed pursuant to subsection (g) of this section. (A) A request for MFDR that does not involve issues identified in subparagraph (B) of this paragraph shall be filed no later than one year after the date(s) of service in dispute."

The requestor and respondent both discuss extent of injury and compensable injuries, however none of the EOBs for dates of service October 21, 2020 through November 30, 2020 presented to MFDR contain denials of extent of injury, compensability, or liability. The DWC therefore concludes that the dispute does not involve issues identified in subparagraph (B)(i) of 28 TAC §133.307 (c)(1).

The dates of the services in dispute are October 21, 2020 through November 30, 2020. The request for medical fee dispute resolution was received in the Medical Fee Dispute Resolution (MFDR) Section on December 21, 2021. These dates are later than one year after the date(s) of service in dispute. Review of the submitted documentation finds that the disputed services do not involve issues identified in 28 TAC §133.307(c) (1) (B).

The DWC reviewed the submitted documentation and finds the following:

- The request for medical dispute resolution was received in MFDR on December 21, 2021.
- The disputed dates of service are October 21, 2020 through November 30, 2020.
- The disputed services do not involve issues identified in §133.307(c)(1)(B)(i).
- Dates of service October 21, 2020 through November 30, 2020 are past the one-year deadline.

- Because the requestor did not file this dispute with MFDR within the one-year deadline it is not eligible for MFDR review.

The DWC concludes that the requestor has failed to timely file this dispute with the Division's MFDR Section; consequently, the requestor has waived the right to medical fee dispute resolution.

Conclusion

The outcome of this medical fee dispute is based on the evidence presented by the requestor and the respondent at the time of adjudication. Though all evidence may not have been discussed, it was considered.

The DWC finds the requestor has not established that reimbursement is due.

Order

Under Texas Labor Code §§413.031 and 413.019, DWC has determined the requestor is not entitled to reimbursement for the disputed services.

Authorized Signature

_____	_____	July 15, 2022
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 under 28 TAC §133.307, which applies to disputes filed on or after **June 1, 2012**.

A party seeking review must submit DWC Form-045M, *Request to Schedule, Reschedule, or Cancel a Benefit Review Conference to Appeal a Medical Fee Dispute Decision (BRC-MFD)* and follow the instructions on the form. You can find the form at www.tdi.texas.gov/forms/form20numeric.html. DWC must receive the request within **20 days** of when you receive this decision. You may fax, mail, or personally deliver your request to DWC using the contact information on the form or the field office handling the claim. If you have questions about DWC Form-045M, please call CompConnection at 1-800-252-7031, option 3 or email CompConnection@tdi.texas.gov.

The party seeking review of the MFDR decision must deliver a copy of the request to all other parties involved in the dispute at the same time the request is filed with DWC. **Please include a copy of the *Medical Fee Dispute Resolution Findings and Decision*** with any other required information listed in 28 TAC §141.1(d).

Si prefiere hablar con una persona en español acerca de ésta correspondencia, favor de llamar a 1-800-252-7031, opción 3 o correo electrónico CompConnection@tdi.texas.gov.