

**THIS MDR TRACKING NO. WAS WITHDRAWN.
THE AMENDED MDR TRACKING NO. IS M5-04-3518-01**

MDR Tracking Number: M5-04-0132-01

Under the provisions of Section 413.031 of the Texas Workers' Compensation Act, Title 5, Subtitle A of the Texas Labor Code, effective June 17, 2001 and Commission Rule 133.305, titled Medical Dispute Resolution-General, and 133.307, titled Medical Dispute Resolution of a Medical Fee Dispute, a review was conducted by the Division regarding a medical fee dispute between the requestor and the respondent named above. This dispute was received on 9/8/03.

I. DISPUTE

Whether there should be additional reimbursement for work hardening program 97545-WH and 97546-WH from 9/23/02 through 10/24/02 denied on the basis of lack of documentation, lack of preauthorization and reduced by "S" – supplemental payment.

II. RATIONALE

The requestor submitted that the disputed work hardening program had been preauthorized by the preauthorization letter of 9/18/02. Rule 134.600 (b)(1) states, "The insurance carrier is liable for all reasonable and necessary medical costs relating to the health care required to treat a compensable injury... when...

- (B) preauthorization of any health care listed in subsection (h) of this section was approved prior to providing the health care;"

Rule 134.600 (h) states, health care requiring preauthorization includes:...

- (1) work hardening or work conditioning services;"

The requestor supported that the program was accredited by CARF by submitting a letter dated 10/15/02 from CARF verifying CARF accreditation. The requestor submitted bills to the carrier with the proper "-AP" with the exception of 9/23/02 and 9/26/02. The MFG, MGR, (II)(C) states, "Accreditation by CARF is recommended, but not required, for all interdisciplinary programs. If the program is accredited, then the modifier "-AP" shall be used in addition to the other modifiers designated for the listed interdisciplinary programs. If the interdisciplinary program is not accredited, the hourly reimbursement for the program shall be reduced 20% below the maximum allowed reimbursement..."

Rule 133.307 (g)(3) states,

- (3) If the request contains only medical fee disputes, the commission shall notify the parties and require the requestor to send to the commission, two copies of additional documentation relevant to the fee dispute. The additional documentation shall include:...

(B) a copy of any pertinent medical records or other documents relevant to the fee dispute;

Although the requestor established that the disputed services were preauthorized and were CARF accredited, the requestor failed to submit medical records to support delivery of service. On this basis, reimbursement is not recommended.

III. DECISION

Based upon the review of the disputed healthcare services within this request, the Division has determined that the requestor **is not** entitled to reimbursement for 97545-WH and 97546-WH.

The above Findings and Decision are hereby issued this 25th day of May 2004.

Noel L. Beavers
Medical Dispute Resolution Officer
Medical Review Division

NLB/nlb