

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 7/05/02.

This Amended Findings and Decision supersedes all previous decisions rendered in this medical payment dispute involving the above Requestor and Respondent.

The Medical Review Division's Decision of December 18, 2003, was appealed and subsequently withdrawn by the Medical Review Division applicable to a Notice of Withdrawal of January 20, 2004. The Respondent appealed the Order to an Administrative Hearing.

I. DISPUTE

The Requestor submitted an updated Table of Disputed Services on 8/16/02. Whether there should be reimbursement for Work Hardening for dates of service 10/10/01 through 11/29/01. The Carrier denied reimbursement as "F – Reduced in accordance with the appropriate TWCC Fee Guideline's Maximum Allowable Reimbursement (MAR). F YF – Reduced or denied in accordance with the appropriate Fee Guideline Ground Rule and/or Maximum allowable reimbursement (MAR). N –T, U-Documentation submitted does not substantiate the service billed."

II. RATIONALE

DOS	CPT	BILLED	PAID	EOB Denial Code(s)	MARS	REFERENCE	RATIONALE:
10/10/01	97545-WH 97546-WH	\$128.00 (2 hrs) \$320.00 (5 hrs)	-0- -0-	F F	\$51.20/hr Non-CARF	MFG; MGR (II)(E)	See Rationale below
10/11/01	97545-WH 97546-WH	\$128.00 (2 hrs) \$320.00 (5 hrs)	-0- -0-	F F	\$51.20/hr Non-CARF	MFG; MGR (II)(E)	See Rationale below
10/12/01	97545-WH 97546-WH	\$128.00 (2 hrs) \$320.00 (5 hrs)	-0- -0-	F F	\$51.20/hr Non-CARF	MFG; MGR (II)(E)	See Rationale below
10/15/01	97545-WH 97546-WH	\$128.00 (2 hrs) \$320.00 (5 hrs)	-0- -0-	F F	\$51.20/hr Non-CARF	MFG; MGR (II)(E)	See Rationale below
10/16/01	97545-WH 97546-WH	\$128.00 (2 hrs) \$320.00 (5 hrs)	-0- -0-	F F	\$51.20/hr Non-CARF	MFG; MGR (II)(E)	See Rationale below
10/17/01	97545-WH 97546-WH	\$128.00 (2 hrs) \$320.00 (5 hrs)	-0- -0-	F-YF F-YF	\$51.20/hr Non-CARF	MFG; MGR (II)(E)	See Rationale below

10/23/01	97545-WH 97546-WH	\$128.00 (2 hrs) \$320.00 (5 hrs)	-0- -0-	F-YF F-YF	\$51.20/hr Non-CARF	MFG; MGR (II)(E)	See Rationale below
10/24/01	97545-WH 97546-WH	\$128.00 (2 hrs) \$320.00 (5 hrs)	-0- -0-	F-YF F-YF	\$51.20/hr Non-CARF	MFG; MGR (II)(E)	See Rationale below
10/25/01	97545-WH 97546-WH	\$128.00 (2 hrs) \$320.00 (5 hrs)	-0- -0-	F-YF F-YF	\$51.20/hr Non-CARF	MFG; MGR (II)(E)	See Rationale below
10/26/01	97545-WH 97546-WH	\$128.00 (2 hrs) \$320.00 (5 hrs)	-0- -0-	N N	\$51.20/hr Non-CARF	MFG; MGR (II)(E)	See Rationale below
10/29/01	97545-WH 97546-WH	\$128.00 (2 hrs) \$320.00 (5 hrs)	-0- -0-	N N	\$51.20/hr Non-CARF	MFG; MGR (II)(E)	See Rationale below
10/30/01	97545-WH 97546-WH	\$128.00 (2 hrs) \$320.00 (5 hrs)	-0- -0-	N N	\$51.20/hr Non-CARF	MFG; MGR (II)(E)	See Rationale below
10/31/01	97545-WH 97546-WH	\$128.00 (2 hrs) \$256.00 (5 hrs)	-0- -0-	F F	\$51.20/hr Non-CARF	MFG; MGR (II)(E)	See Rationale below
11/01/01	97545-WH 97546-WH	\$128.00 (2 hrs) \$256.00 (5 hrs)	-0- -0-	F F	\$51.20/hr Non-CARF	MFG; MGR (II)(E)	See Rationale below
11/05/01	97545-WH 97546-WH	\$128.00 (2 hrs) \$256.00 (5 hrs)	-0- -0-	F F	\$51.20/hr Non-CARF	MFG; MGR (II)(E)	See Rationale below
11/06/01	97545-WH 97546-WH	\$128.00 (2 hrs) \$256.00 (5 hrs)	-0- -0-	F F	\$51.20/hr Non-CARF	MFG; MGR (II)(E)	See Rationale below
11/07/01	97545-WH 97546-WH	\$128.00 (2 hrs) \$256.00 (5 hrs)	-0- -0-	F F	\$51.20/hr Non-CARF	MFG; MGR (II)(E)	See Rationale below
11/27/01	97545-WH 97546-WH	\$128.00 (2 hrs) \$256.00 (5 hrs)	-0- -0-	F F	\$51.20/hr Non-CARF	MFG; MGR (II)(E)	See Rationale below
11/28/01	97545-WH 97546-WH	\$128.00 (2 hrs) \$256.00 (5 hrs)	-0- -0-	F F	\$51.20/hr Non-CARF	MFG; MGR (II)(E)	See Rationale below
11/29/01	97545-WH 97546-WH	\$128.00 (2 hrs) \$256.00 (5 hrs)	-0- -0-	F F	\$51.20/hr Non-CARF	MFG; MGR (II)(E)	See Rationale below
Totals		\$8,448.00	-0-				The Requestor is not entitled to reimbursement.

Rationale:

The Requestor submitted documentation indicating support for general therapy, but does not identify an individualized treatment plan that includes real or simulated work activities in a relevant work environment or response to treatment to ensure continued progress per MFG MGR (II)(E). Therefore, based on the submitted documentation reimbursement is not recommended.

III. AMENDED 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.

The above Amended Findings and Decision is hereby issued this 30th day of June 2004.

Pat DeVries
Medical Dispute Resolution Officer
Medical Review Division

PD/pd