

No. 2023-8178

**Official Order
of the
Texas Commissioner of Workers' Compensation**

Date: 8/31/2023

Subject Considered:

Singleton Associates PA
c/o Corporation Service Company d/b/a CSC-Lawyers Inc.
211 East 7th Street, Suite 620
Austin, Texas 78701

Consent Order
DWC Enforcement File Nos. 31597, 32209, 32210, 32234, 32263, 32264, 32265, 32306,
32307, & 32358

General remarks and official action taken:

This is a consent order with Singleton Associates PA (Respondent). The commissioner of the Texas Department of Insurance, Division of Workers' Compensation (DWC) considers whether DWC should take disciplinary action against Respondent.

Waiver

Respondent acknowledges that the Texas Labor Code and other applicable laws provide certain rights. Respondent waives all of these rights, and any other procedural rights that apply, in consideration of the entry of this consent order.

Findings of Fact

1. Respondent is a health care provider (HCP) operating in the Texas workers' compensation system.
2. Respondent was not selected to be tiered in any year's Performance Based Oversight (PBO) assessments.

Improperly Pursuing a Private Claim Against an Injured Employee

3. On [REDACTED] DWC issued *Advisory 2004-02 – Third Party Litigation (Subrogation) Claim Processing*, which stated in part that when an injured employee is required to pay medical benefits under a third-party settlement, a HCP was still required to submit medical bills to the workers' compensation insurance carrier for fee adjustment as required by Commission rules.

File No. 31597

4. On [REDACTED] Respondent provided medical services to an injured employee.
5. On [REDACTED] the injured employee's workers compensation insurance carrier issued an Explanation of Benefits (EOB) in response to a bill submitted by Respondent for the medical services. The EOB indicated that the injured employee was a workers' compensation claimant, and that the services were subject to adjustments conforming to workers' compensation standards for medical charges. The insurance carrier also notified Respondent that the services provided were subject to a third-party settlement.
6. On [REDACTED] the injured employee sent a letter further explaining that the medical services were subject to adjustments conforming to workers' compensation standards for medical charges, and that the injured employee was only responsible for the adjusted amount. The injured employee also included a check for [REDACTED] the adjusted amount indicated on the June 7, 2022, EOB.
7. On [REDACTED] Respondent sent a bill for the full, unadjusted amount to the injured employee for the health care services.
8. Respondent again billed the injured employee directly on [REDACTED] and [REDACTED] for the health care services.
9. On [REDACTED] Respondent further billed the injured employee directly for the healthcare services. Respondent indicated on the bill that this bill was the injured employee's "final notice," and further threatened to submit the claim to a collection agency.

10. On [REDACTED] the injured employee received a letter from a collection agency seeking to collect a debt on behalf of Respondent.
11. There is no finding determining that the injured employee violated Tex. Lab. Code § 408.022 in selecting a treating doctor and no final adjudication that the claim was not compensable.

File No. 32209

12. On [REDACTED] Respondent provided medical services to an injured employee.
13. On [REDACTED] and [REDACTED] Respondent billed the injured employee's workers' compensation insurance carrier for the medical services.
14. On [REDACTED] the insurance carrier issued two EOBs which indicated that the injured employee was a workers' compensation claimant, and that the services were subject to adjustments conforming to workers' compensation standards for medical charges. The insurance carrier also notified Respondent that the services provided were subject to a third-party settlement.
15. On [REDACTED] the injured employee paid Respondent for the adjusted amounts indicated on each EOB. The injured employee also enclosed a letter with each payment referencing Advisory 2004-02 issued by DWC.
16. On [REDACTED] Respondent sent a bill for the full, unadjusted amount to the injured employee for the health care services.
17. There is no finding determining that the injured employee violated Tex. Lab. Code § 408.022 in selecting a treating doctor and no final adjudication that the claim was not compensable.

File No. 32210

18. On [REDACTED] Respondent provided medical services to an injured employee.
19. On [REDACTED] Respondent billed the injured employee's workers compensation insurance carrier for the medical services. The insurance carrier

denied the bill based on an invalid claim number. There is no evidence that Respondent sought clarification on the claim number.

20. Subsequently, on [REDACTED] Respondent sent a bill to the injured employee for the health care services.
21. On [REDACTED] Respondent again billed the injured employee directly, identifying the bill as a "final notice," and threatening to turn the bill over to a collection agency if the bill was not paid within 30 days.
22. There is no finding determining that the injured employee violated Tex. Lab. Code § 408.022 in selecting a treating doctor and no final adjudication that the claim was not compensable.

File No. 32234

23. On [REDACTED] Respondent provided medical services to an injured employee.
24. On [REDACTED] the injured employee's workers compensation insurance carrier received a bill for the medical services provided on [REDACTED]
25. On [REDACTED] Respondent received a letter from the insurance carrier indicating that the injured employee was a workers' compensation claimant, and that the insurance carrier was unable to process the bill for lack of supporting medical documentation.
26. Subsequently, on [REDACTED] Respondent sent a bill to the injured employee for the health care services.
27. On [REDACTED] and [REDACTED] Respondent again billed the injured employee directly for the health care services.
28. There is no finding determining that the injured employee violated Tex. Lab. Code § 408.022 in selecting a treating doctor and no final adjudication that the claim was not compensable.

File No. 32263

29. On [REDACTED] Respondent provided medical services to an injured employee.
30. On [REDACTED] Respondent issued a bill to the injured employee for the healthcare services provided on [REDACTED] Respondent again issued a bill to the injured employee on [REDACTED]
31. On [REDACTED] the injured employee informed Respondent that the healthcare services were related to a workers' compensation claim. The injured employee also provided the insurance carrier's information to Respondent at this time.
32. Again on [REDACTED] Respondent directly billed the injured employee.
33. On [REDACTED] the injured employee again informed Respondent that the healthcare services were related to a workers' compensation claim, and directed Respondent to bill the insurance carrier.
34. On [REDACTED] Respondent again billed the injured employee directly.
35. There is no finding determining that the injured employee violated Tex. Lab. Code § 408.022 in selecting a treating doctor and no final adjudication that the claim was not compensable.

File No. 32264

36. On [REDACTED] Respondent provided medical services to an injured employee.
37. On [REDACTED] Respondent billed the injured employee for the healthcare services.
38. Also on [REDACTED] the injured employee informed Respondent that the healthcare services were related to a workers' compensation claim, and provided the insurance carrier's information to Respondent.
39. Again on [REDACTED] and [REDACTED] Respondent directly billed the injured employee.

- 40. On [REDACTED] the injured employee was contacted by a collection agency attempting to collect payment for the healthcare services.
- 41. There is no finding determining that the injured employee violated Tex. Lab. Code § 408.022 in selecting a treating doctor and no final adjudication that the claim was not compensable.

File No. 32265

- 42. On [REDACTED] and [REDACTED] Respondent provided medical services to an injured employee.
- 43. On [REDACTED] Respondent billed the injured employee's insurance carrier for the medical services.
- 44. On [REDACTED] the insurance carrier denied the bill on grounds that the services were unrelated to the extent of injury, but stated that there was no final adjudication regarding compensability. The insurance carrier stated that Respondent should not bill the injured employee unless the injury was finally adjudicated not to be compensable.
- 45. Subsequently, on [REDACTED] Respondent sent a bill to the injured employee for the healthcare services.
- 46. Respondent again billed the injured employee directly on [REDACTED] [REDACTED] and [REDACTED]
- 47. There is no finding determining that the injured employee violated Tex. Lab. Code § 408.022 in selecting a treating doctor and no final adjudication that the claim was not compensable.

File No. 32306

- 48. On [REDACTED] and [REDACTED] Respondent provided medical services to an injured employee.
- 49. On [REDACTED] Respondent sent a bill to Department of Labor, Workers' Compensation, PO Box 8300, London, Kentucky 40742 for the medical services

- provided on [REDACTED] This address was not associated with either the injured employee or the injured employee's insurance carrier.
50. On [REDACTED] Respondent received a returned bill from the Kentucky address, which included a document indicating that the bill was incomplete.
51. On [REDACTED] Respondent sent a bill to the Kentucky address for medical services provided on [REDACTED]
52. Subsequently, on [REDACTED] Respondent sent a bill to the injured employee for the medical services provided on [REDACTED] and [REDACTED]
53. On [REDACTED] Respondent received a returned bill from the Kentucky address for the medical services provided on [REDACTED] which included a document indicating that the bill was incomplete.
54. On [REDACTED] Respondent again billed the injured employee directly for the medical services.
55. On [REDACTED] DWC informed Respondent that the medical services were related to a workers' compensation claim and provided the insurance carrier's information to Respondent at this time.
56. Subsequently, on [REDACTED] and [REDACTED] Respondent again billed the injured employee directly for the medical services.
57. There is no finding determining that the injured employee violated Tex. Lab. Code § 408.022 in selecting a treating doctor and no final adjudication that the claim was not compensable.

File No. 32307

58. On [REDACTED] Respondent provided medical services to an injured employee.
59. On [REDACTED] Respondent billed the injured employee for the healthcare services.

60. On [REDACTED] the injured employee informed Respondent that the healthcare services were related to a workers' compensation claim. On [REDACTED] Respondent was provided with additional workers' compensation information regarding the injured employee.
61. Subsequently, on [REDACTED] and [REDACTED] Respondent again billed the injured employee for healthcare services.
62. On [REDACTED] DWC informed Respondent that the medical services were related to a workers compensation claim, provided Respondent with the correct billing information, and instructed Respondent to cease billing the injured employee.
63. On [REDACTED] Respondent turned the bill over to a collection agency, who subsequently billed the injured employee directly on [REDACTED]
64. On [REDACTED] Respondent recalled the bill from the collection agency, and correctly billed the injured employee's workers compensation insurance carrier.
65. There is no finding determining that the injured employee violated Tex. Lab. Code § 408.022 in selecting a treating doctor and no final adjudication that the claim was not compensable.

File No. 32358

66. On [REDACTED] Respondent provided medical services to an injured employee, who had indicated that the medical services were related to a workers compensation claim.
67. On [REDACTED] Respondent billed the injured employee directly for the medical services.
68. On [REDACTED] the injured employee's attorney sent a letter to the return address identified on the bill informing Respondent that the medical services were related to a workers compensation claim, providing the claim information, and instructing Respondent to cease billing the injured employee directly.
69. On [REDACTED] Respondent again attempted to bill the injured employee directly.

70. On [REDACTED] the injured employee's attorney sent another letter to the return address identified on both bills informing Respondent that the medical services were related to a workers compensation claim. The attorney also attached the [REDACTED] [REDACTED] letter including the workers compensation claim information.
71. Also on [REDACTED] Respondent provided additional medical services to the injured employee.
72. On [REDACTED] Respondent again attempted to bill the injured employee directly for medical services provided on both [REDACTED] and [REDACTED]
73. There is no finding determining that the injured employee violated Tex. Lab. Code § 408.022 in selecting a treating doctor and no final adjudication that the claim was not compensable.

Assessment of Sanction

1. Improperly billing an injured employee for health care services imposes an undue financial burden on the injured employee and circumvents the Texas workers' compensation system and the roles of its system participants.
2. In assessing the sanction for this case, DWC fully considered the following factors in Tex. Lab. Code § 415.021(c) and 28 Tex. Admin. Code § 180.26(e):
 - the seriousness of the violation, including the nature, circumstances, consequences, extent, and gravity of the prohibited act;
 - the history and extent of previous administrative violations;
 - the violator's demonstration of good faith, including actions it took to rectify the consequences of the prohibited act;
 - the penalty necessary to deter future violations;
 - whether the administrative violation had a negative impact on the delivery of benefits to an injured employee;
 - the history of compliance with electronic data interchange requirements;
 - to the extent reasonable, the economic benefit resulting from the prohibited act; and
 - other matters that justice may require, including, but not limited to:
 - PBO assessments;
 - prompt and earnest actions to prevent future violations;

- self-report of the violation;
 - the size of the company or practice;
 - the effect of a sanction on the availability of health care; and
 - evidence of heightened awareness of the legal duty to comply with the Texas Workers' Compensation Act and DWC rules.
3. DWC found the following factors in Tex. Lab. Code § 415.021(c) and 28 Tex. Admin. Code § 180.26(e) to be aggravating: the seriousness of the violation; the history and extent of previous administrative violations; the penalty necessary to deter future violations; and other matters that justice may require, including evidence of heightened awareness of the legal duty to comply with the Texas Workers' Compensation Act and DWC rules. Specifically, Respondent has been subject to four previous consent orders for this violation within the last 12 months.
4. DWC found the following factors in Tex. Lab. Code § 415.021(c) and 28 Tex. Admin. Code § 180.26(e) to be mitigating: Respondent has demonstrated good faith and taken prompt and earnest actions to prevent future violations of this type. Specifically, Respondent has reached out and met with individuals within DWC in order to identify shortfalls in its billing practices and gain insight into best billing practices regarding workers' compensation claims. As a result of these meetings, Respondent has implemented several processes and procedures specifically designed to prevent future workers' compensation issues. In particular, Respondent has set up a dedicated contact for communications from DWC, has implemented a process of notifying patients when workers' compensation information is incomplete, and implemented an additional process of placing workers' compensation claimant's billing accounts on "hold" in order to ensure those claimants are not directly billed while Respondent obtains workers' compensation information. Finally, Respondent has instituted a re-education of its billing staff, and a monthly training for its "Quality Team" emphasizing the correct billing practices on workers' compensation claims.
5. Respondent acknowledges communicating with DWC about the relevant statute and rule violations alleged; that the facts establish that the administrative violation(s) occurred; and that the proposed sanction is appropriate, including the factors DWC considered under Tex. Lab. Code § 415.021(c) and 28 Tex. Admin. Code § 180.26(e).

6. Respondent acknowledges that, in assessing the sanction, DWC considered the factors in Tex. Lab. Code § 415.021(c) and 28 Tex. Admin. Code § 180.26(e).

Conclusions of Law

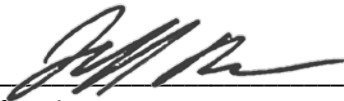
1. The commissioner has jurisdiction over this matter pursuant to Tex. Lab. Code §§ 402.001, 402.00114, 402.00116, 402.00128, 414.002, and 414.003.
2. The commissioner has the authority to dispose of this case informally pursuant to Tex. Gov't. Code § 2001.056, Tex. Lab. Code §§ 401.021 and 402.00128(b)(6)-(7), and 28 Tex. Admin. Code § 180.26(h) and (i).
3. Respondent has knowingly and voluntarily waived all procedural rights to which it may have been entitled regarding the entry of this order, including, but not limited to, issuance and service of notice of intent to institute disciplinary action, notice of hearing, a public hearing, a proposal for decision, a rehearing by the commissioner, and judicial review.
4. Pursuant to Tex. Lab. Code § 415.021, the commissioner may assess an administrative penalty against a person who commits an administrative violation.
5. Pursuant to Tex. Lab. Code § 415.003(6), a health care provider commits an administrative violation if it fails to comply with a provision of the Texas Workers' Compensation Act.
6. Pursuant to Tex. Lab. Code § 413.042, a health care provider commits an administrative violation by pursuing a private claim against a workers' compensation claimant for all or part of the cost of a health care service unless the injury is finally adjudicated as not compensable, or the injured employee violates Tex. Lab. Code § 408.022 relating to the selection of a doctor.
7. Respondent violated Tex. Lab. Code §§ 413.042 and 415.003(6) by improperly billing an injured employee for workers' compensation health care services.

Commissioner's Order
Singleton Associates, PA
DWC Enforcement File Nos. 31597, 32209, 32210, 32234, 32263, 32264, 32265, 32306, 32307, & 32358
Page 12 of 13

Order


It is ordered that Singleton Associates PA must pay an administrative penalty of \$17,000 within 30 days from the date the Commissioner signs the order.

After receiving an invoice, Singleton Associates PA must pay the administrative penalty by electronic transfer using the State Invoice Payment Service, company check, cashier's check, or money order and make it payable to the "State of Texas." Mail the administrative penalty to the Texas Department of Insurance, Attn: DWC Enforcement Section, MC AO-9999, P.O. Box 12030, Austin, Texas 78711-2030.



Jeff Nelson
Commissioner
TDI, Division of Workers' Compensation

Approved Form and Content:



Austin Southerland
Staff Attorney, Enforcement
Compliance and Investigations
TDI, Division of Workers' Compensation

Unsworn Declaration

STATE OF Texas §
§
COUNTY OF Travis §

Pursuant to the Tex. Civ. Prac. and Rem. Code § 132.001(a), (b), and (d), my name is Marinell Dura. I hold the position of Director, RCM Practice Performance and am the authorized representative of Singleton Associates PA. My business address is:

211 East 7th Street, Suite 620, Austin, Travis, TX, 78701-3218.
(Street) (City) (County) (State) (ZIP Code)

I am executing this declaration as part of my assigned duties and responsibilities. I declare under penalty of perjury that the facts stated in this document are true and correct.

Marinell Dura

Declarant

Executed on August 31, 2023.