



TEXAS DEPARTMENT OF INSURANCE

Division of Workers' Compensation - Medical Fee Dispute Resolution (MS-48)
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MEDICAL FEE DISPUTE RESOLUTION FINDINGS AND DECISION

GENERAL INFORMATION

Requestor Name

ANDRE CHAN HWANG, DC

Respondent Name

ARCH INSURANCE COMPANY

MFDR Tracking Number

M4-18-0429-01

Carrier's Austin Representative

Box Number 19

MFDR Date Received

October 18, 2017

REQUESTOR'S POSITION SUMMARY

Requestor's Position Summary: "The attached dates of service were denied 'base on extent of injury' which is incorrect, we have been billing for the accepted diagnosis codes appointed in patient's medical evaluation ..."

Amount in Dispute: \$6,440.15

RESPONDENT'S POSITION SUMMARY

Respondent's Position Summary: "The original bill was denied based on extent of injury however, since then compensability of the left shoulder has been accepted and bills were reprocessed for payment."

Response Submitted by: Gallagher Bassett

SUMMARY OF FINDINGS

Table with 4 columns: Dates of Service, Disputed Services, Dispute Amount, Amount Due. Row 1: June 13, 2017 to August 14, 2017, Professional Medical Services, \$6,440.15, \$3,045.15

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 §134.203 sets out the fee guideline for professional medical services.
3. 28 Texas Administrative Code §124.2 sets out requirements for carrier reporting and notification.
4. 28 Texas Administrative Code §129.5 governs the filing of and payment for work status reports.
5. The insurance carrier reduced payment for the disputed services with the following claim adjustment codes:
- P12 - Workers' compensation jurisdictional fee schedule adjustment.
- 59 - Processed based on multiple or concurrent procedure rules.
- W3 - Request for reconsideration.
- MPPT - In accordance with the CMS Physician Fee Schedule guidelines, this service was reduced due to the Physical Therapy Service rule.
- MRCA - This service was reduced in accordance with the Workers' Compensation Fee Schedule rules for Physician Services.
- Z469 - Procedure is reimbursable when requested by carrier or self-insured employer.

- Z559 – Reimbursement has paid in accordance to The Texas Division of Workers' Compensation Rules, Chapter 129 rule 129.5(a)-(j).
- 219 – Based on extent of injury.

Issues

1. Are there any unresolved issues of extent of injury?
2. Is the requestor entitled to additional reimbursement?

Findings

1. The insurance carrier denied payment with claim adjustment reason code 219 – “Based on extent of injury.”

Rule §124.2(h) requires notification to the division and claimant of any dispute of disability or extent of injury using plain language notices with language and content prescribed by the division. Such notices “shall provide a full and complete statement describing the carrier's action and its reason(s) for such action. The statement must contain sufficient claim-specific substantive information to enable the employee/legal beneficiary to understand the carrier's position or action taken on the claim.”

Rule §133.307(d)(2)(H) further requires that If the medical fee dispute involves compensability, extent of injury, or liability, the insurance carrier shall attach a copy of any related Plain Language Notice in accordance with Rule §124.2 (relating to carrier reporting and notification requirements).

The respondent did not maintain this denial reason on any of the reconsideration EOBs submitted for review.

The insurance carrier’s response states that “The original bill was denied based on extent of injury however, since then compensability of the left shoulder has been accepted and bills were reprocessed for payment.”

Furthermore, the respondent did not submit copies of any PLN-11 or plain language notices issued in accordance with Rule §124.2, as required by Rule §133.307(d)(2)(H). The carrier thus failed to meet the requirements of Rule §133.307(d)(2)(H) regarding any issues of extent of injury and has waived the right to raise such issues.

Based on the submitted information, denial reason code 219 is not supported. The division concludes there are no unresolved issues of extent of injury. Consequently, the disputed services are eligible for medical fee dispute resolution and will be reviewed for reimbursement in accordance with division rules and fee guidelines.

2. This dispute regards medical services with reimbursement subject to the *Medical Fee Guideline for Professional Services*, 28 Texas Administrative Code §134.203, requiring the maximum allowable reimbursement (MAR) be determined by Medicare payment policies modified by DWC rules. The MAR is the sum of the geographically adjusted work, practice expense and malpractice values multiplied by the DWC conversion factor. The 2017 DWC conversion factor is \$57.50. Reimbursement is calculated as follows:

- Procedure code **97110**, June 13, 2017, has a Work RVU of 0.45 multiplied by the Work GPCI of 1.015 is 0.45675. The Practice Expense (PE) RVU of 0.45 multiplied by the PE GPCI of 1.012 is 0.4554. The malpractice RVU of 0.02 multiplied by the malpractice GPCI of 0.77 is 0.0154. The sum is 0.92755 multiplied by the DWC conversion factor of \$57.50 for a MAR of \$53.33. For each extra therapy unit, payment is reduced by 50% of the practice expense. The PE for this code is not the highest. The PE reduced rate is \$40.24 at 4 units is **\$160.96**.
- Procedure code **97112**, June 13, 2017, has a Work RVU of 0.45 multiplied by the Work GPCI of 1.015 is 0.45675. The PE RVU of 0.49 multiplied by the PE GPCI of 1.012 is 0.49588. The malpractice RVU of 0.02 multiplied by the malpractice GPCI of 0.77 is 0.0154. The sum is 0.96803 multiplied by the DWC conversion factor of \$57.50 for a MAR of \$55.66. For each extra therapy unit, payment is reduced by 50% of the practice expense. This code has the highest PE for this date. The first unit is paid at \$55.66. The PE reduced rate is \$41.41. The total is **\$97.07**.
- Procedure code **97140**, June 13, 2017, has a Work RVU of 0.43 multiplied by the Work GPCI of 1.015 is 0.43645. The PE RVU of 0.41 multiplied by the PE GPCI of 1.012 is 0.41492. The malpractice RVU of 0.01 multiplied by the malpractice GPCI of 0.77 is 0.0077. The sum is 0.85907 multiplied by the DWC conversion factor of \$57.50 for a MAR of \$49.40. For each extra therapy unit, payment is reduced by 50% of the practice expense. The PE for this code is not the highest. The PE reduced rate is \$37.47 at 2 units is **\$74.94**.

- Procedure code **97110**, June 26, 2017, has a Work RVU of 0.45 multiplied by the Work GPCI of 1.015 is 0.45675. The PE RVU of 0.45 multiplied by the PE GPCI of 1.012 is 0.4554. The malpractice RVU of 0.02 multiplied by the malpractice GPCI of 0.77 is 0.0154. The sum is 0.92755 multiplied by the DWC conversion factor of \$57.50 for a MAR of \$53.33. For each extra therapy unit, payment is reduced by 50% of the practice expense. The PE for this code is not the highest. The PE reduced rate is \$40.24 at 4 units is **\$160.96**.
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- Procedure code **97110**, June 27, 2017, has a Work RVU of 0.45 multiplied by the Work GPCI of 1.015 is 0.45675. The PE RVU of 0.45 multiplied by the PE GPCI of 1.012 is 0.4554. The malpractice RVU of 0.02 multiplied by the malpractice GPCI of 0.77 is 0.0154. The sum is 0.92755 multiplied by the DWC conversion factor of \$57.50 for a MAR of \$53.33. For each extra therapy unit, payment is reduced by 50% of the practice expense. The PE for this code is not the highest. The PE reduced rate is \$40.24 at 4 units is **\$160.96**.
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- Procedure code **97140**, June 27, 2017, has a Work RVU of 0.43 multiplied by the Work GPCI of 1.015 is 0.43645. The PE RVU of 0.41 multiplied by the PE GPCI of 1.012 is 0.41492. The malpractice RVU of 0.01 multiplied by the malpractice GPCI of 0.77 is 0.0077. The sum is 0.85907 multiplied by the DWC conversion factor of \$57.50 for a MAR of \$49.40. For each extra therapy unit, payment is reduced by 50% of the practice expense. The PE for this code is not the highest. The PE reduced rate is \$37.47 at 2 units is **\$74.94**.
- Procedure code **97110**, June 28, 2017, has a Work RVU of 0.45 multiplied by the Work GPCI of 1.015 is 0.45675. The PE RVU of 0.45 multiplied by the PE GPCI of 1.012 is 0.4554. The malpractice RVU of 0.02 multiplied by the malpractice GPCI of 0.77 is 0.0154. The sum is 0.92755 multiplied by the DWC conversion factor of \$57.50 for a MAR of \$53.33. For each extra therapy unit, payment is reduced by 50% of the practice expense. The PE for this code is not the highest. The PE reduced rate is \$40.24 at 4 units is **\$160.96**.
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- Procedure code **97140**, June 28, 2017, has a Work RVU of 0.43 multiplied by the Work GPCI of 1.015 is 0.43645. The PE RVU of 0.41 multiplied by the PE GPCI of 1.012 is 0.41492. The malpractice RVU of 0.01 multiplied by the malpractice GPCI of 0.77 is 0.0077. The sum is 0.85907 multiplied by the DWC conversion factor of \$57.50 for a MAR of \$49.40. For each extra therapy unit, payment is reduced by 50% of the practice expense. The PE for this code is not the highest. The PE reduced rate is \$37.47 at 2 units is **\$74.94**.
- Procedure code **97750**, July 17, 2017, has a Work RVU of 0.45 multiplied by the Work GPCI of 1.015 is 0.45675. The PE RVU of 0.46 multiplied by the PE GPCI of 1.012 is 0.46552. The malpractice RVU of 0.02 multiplied by the malpractice GPCI of 0.77 is 0.0154. The sum is 0.93767 multiplied by the DWC conversion factor of \$57.50 for a MAR of \$53.92. For each extra therapy unit, payment is reduced by 50% of the practice expense. This code has the highest PE for this date. The first unit is paid at \$53.92. The PE reduced rate is \$40.53 at 6 units is \$243.18. The total is **\$297.10**.

- Procedure code **97110**, July 31, 2017, has a Work RVU of 0.45 multiplied by the Work GPCI of 1.015 is 0.45675. The PE RVU of 0.45 multiplied by the PE GPCI of 1.012 is 0.4554. The malpractice RVU of 0.02 multiplied by the malpractice GPCI of 0.77 is 0.0154. The sum is 0.92755 multiplied by the DWC conversion factor of \$57.50 for a MAR of \$53.33. For each extra therapy unit, payment is reduced by 50% of the practice expense. The PE for this code is not the highest. The PE reduced rate is \$40.24 at 4 units is **\$160.96**.
- Procedure code **97140**, July 31, 2017, has a Work RVU of 0.43 multiplied by the Work GPCI of 1.015 is 0.43645. The PE RVU of 0.41 multiplied by the PE GPCI of 1.012 is 0.41492. The malpractice RVU of 0.01 multiplied by the malpractice GPCI of 0.77 is 0.0077. The sum is 0.85907 multiplied by the DWC conversion factor of \$57.50 for a MAR of \$49.40. For each extra therapy unit, payment is reduced by 50% of the practice expense. The PE for this code is not the highest. The PE reduced rate is \$37.47 at 2 units is **\$74.94**.
- Procedure code **97112**, August 1, 2017, has a Work RVU of 0.45 multiplied by the Work GPCI of 1.015 is 0.45675. The PE RVU of 0.49 multiplied by the PE GPCI of 1.012 is 0.49588. The malpractice RVU of 0.02 multiplied by the malpractice GPCI of 0.77 is 0.0154. The sum is 0.96803 multiplied by the DWC conversion factor of \$57.50 for a MAR of \$55.66. For each extra therapy unit, payment is reduced by 50% of the practice expense. This code has the highest PE for this date. The first unit is paid at \$55.66. The PE reduced rate is \$41.41. The total is **\$97.07**.
- Procedure code **97110**, August 1, 2017, has a Work RVU of 0.45 multiplied by the Work GPCI of 1.015 is 0.45675. The PE RVU of 0.45 multiplied by the PE GPCI of 1.012 is 0.4554. The malpractice RVU of 0.02 multiplied by the malpractice GPCI of 0.77 is 0.0154. The sum is 0.92755 multiplied by the DWC conversion factor of \$57.50 for a MAR of \$53.33. For each extra therapy unit, payment is reduced by 50% of the practice expense. The PE for this code is not the highest. The PE reduced rate is \$40.24 at 4 units is **\$160.96**.
- Procedure code **97140**, August 1, 2017, has a Work RVU of 0.43 multiplied by the Work GPCI of 1.015 is 0.43645. The PE RVU of 0.41 multiplied by the PE GPCI of 1.012 is 0.41492. The malpractice RVU of 0.01 multiplied by the malpractice GPCI of 0.77 is 0.0077. The sum is 0.85907 multiplied by the DWC conversion factor of \$57.50 for a MAR of \$49.40. For each extra therapy unit, payment is reduced by 50% of the practice expense. The PE for this code is not the highest. The PE reduced rate is \$37.47 at 2 units is **\$74.94**.
- Procedure code **97112**, August 2, 2017, has a Work RVU of 0.45 multiplied by the Work GPCI of 1.015 is 0.45675. The PE RVU of 0.49 multiplied by the PE GPCI of 1.012 is 0.49588. The malpractice RVU of 0.02 multiplied by the malpractice GPCI of 0.77 is 0.0154. The sum is 0.96803 multiplied by the DWC conversion factor of \$57.50 for a MAR of \$55.66. For each extra therapy unit, payment is reduced by 50% of the practice expense. This code has the highest PE for this date. The first unit is paid at \$55.66. The PE reduced rate is \$41.41. The total is **\$97.07**.
- Procedure code **99213**, August 2, 2017, has a Work RVU of 0.97 multiplied by the Work GPCI of 1.015 is 0.98455. The PE RVU of 1.02 multiplied by the PE GPCI of 1.012 is 1.03224. The malpractice RVU of 0.07 multiplied by the malpractice GPCI of 0.77 is 0.0539. The sum is 2.07069 multiplied by the DWC conversion factor of \$57.50 for a MAR of **\$119.06**.
- Procedure code **97110**, August 2, 2017, has a Work RVU of 0.45 multiplied by the Work GPCI of 1.015 is 0.45675. The PE RVU of 0.45 multiplied by the PE GPCI of 1.012 is 0.4554. The malpractice RVU of 0.02 multiplied by the malpractice GPCI of 0.77 is 0.0154. The sum is 0.92755 multiplied by the DWC conversion factor of \$57.50 for a MAR of \$53.33. For each extra therapy unit, payment is reduced by 50% of the practice expense. The PE for this code is not the highest. The PE reduced rate is \$40.24 at 4 units is **\$160.96**.
- Procedure code **97140**, August 2, 2017, has a Work RVU of 0.43 multiplied by the Work GPCI of 1.015 is 0.43645. The PE RVU of 0.41 multiplied by the PE GPCI of 1.012 is 0.41492. The malpractice RVU of 0.01 multiplied by the malpractice GPCI of 0.77 is 0.0077. The sum is 0.85907 multiplied by the DWC conversion factor of \$57.50 for a MAR of \$49.40. For each extra therapy unit, payment is reduced by 50% of the practice expense. The PE for this code is not the highest. The PE reduced rate is \$37.47 at 2 units is **\$74.94**.
- Procedure code **99080-73**, August 2, 2017, is a division specific code for work status report with reimbursement subject to Rule §129.5(i), which requires that “reimbursement shall be **\$15**.”

- Procedure code **97112**, August 7, 2017, has a Work RVU of 0.45 multiplied by the Work GPCI of 1.015 is 0.45675. The PE RVU of 0.49 multiplied by the PE GPCI of 1.012 is 0.49588. The malpractice RVU of 0.02 multiplied by the malpractice GPCI of 0.77 is 0.0154. The sum is 0.96803 multiplied by the DWC conversion factor of \$57.50 for a MAR of \$55.66. For each extra therapy unit, payment is reduced by 50% of the practice expense. This code has the highest PE for this date. The first unit is paid at \$55.66. The PE reduced rate is \$41.41. The total is **\$97.07**.
- Procedure code **97110**, August 7, 2017, has a Work RVU of 0.45 multiplied by the Work GPCI of 1.015 is 0.45675. The PE RVU of 0.45 multiplied by the PE GPCI of 1.012 is 0.4554. The malpractice RVU of 0.02 multiplied by the malpractice GPCI of 0.77 is 0.0154. The sum is 0.92755 multiplied by the DWC conversion factor of \$57.50 for a MAR of \$53.33. For each extra therapy unit, payment is reduced by 50% of the practice expense. The PE for this code is not the highest. The PE reduced rate is \$40.24 at 4 units is **\$160.96**.
- Procedure code **97140**, August 7, 2017, has a Work RVU of 0.43 multiplied by the Work GPCI of 1.015 is 0.43645. The PE RVU of 0.41 multiplied by the PE GPCI of 1.012 is 0.41492. The malpractice RVU of 0.01 multiplied by the malpractice GPCI of 0.77 is 0.0077. The sum is 0.85907 multiplied by the DWC conversion factor of \$57.50 for a MAR of \$49.40. For each extra therapy unit, payment is reduced by 50% of the practice expense. The PE for this code is not the highest. The PE reduced rate is \$37.47 at 2 units is **\$74.94**.
- Procedure code **97112**, August 8, 2017, has a Work RVU of 0.45 multiplied by the Work GPCI of 1.015 is 0.45675. The PE RVU of 0.49 multiplied by the PE GPCI of 1.012 is 0.49588. The malpractice RVU of 0.02 multiplied by the malpractice GPCI of 0.77 is 0.0154. The sum is 0.96803 multiplied by the DWC conversion factor of \$57.50 for a MAR of \$55.66. For each extra therapy unit, payment is reduced by 50% of the practice expense. This code has the highest PE for this date. The first unit is paid at \$55.66. The PE reduced rate is \$41.41. The total is **\$97.07**.
- Procedure code **97110**, August 8, 2017, has a Work RVU of 0.45 multiplied by the Work GPCI of 1.015 is 0.45675. The PE RVU of 0.45 multiplied by the PE GPCI of 1.012 is 0.4554. The malpractice RVU of 0.02 multiplied by the malpractice GPCI of 0.77 is 0.0154. The sum is 0.92755 multiplied by the DWC conversion factor of \$57.50 for a MAR of \$53.33. For each extra therapy unit, payment is reduced by 50% of the practice expense. The PE for this code is not the highest. The PE reduced rate is \$40.24 at 4 units is **\$160.96**.
- Procedure code **97140**, August 8, 2017, has a Work RVU of 0.43 multiplied by the Work GPCI of 1.015 is 0.43645. The PE RVU of 0.41 multiplied by the PE GPCI of 1.012 is 0.41492. The malpractice RVU of 0.01 multiplied by the malpractice GPCI of 0.77 is 0.0077. The sum is 0.85907 multiplied by the DWC conversion factor of \$57.50 for a MAR of \$49.40. For each extra therapy unit, payment is reduced by 50% of the practice expense. The PE for this code is not the highest. The PE reduced rate is \$37.47 at 2 units is **\$74.94**.
- Procedure code **97112**, August 9, 2017, has a Work RVU of 0.45 multiplied by the Work GPCI of 1.015 is 0.45675. The PE RVU of 0.49 multiplied by the PE GPCI of 1.012 is 0.49588. The malpractice RVU of 0.02 multiplied by the malpractice GPCI of 0.77 is 0.0154. The sum is 0.96803 multiplied by the DWC conversion factor of \$57.50 for a MAR of \$55.66. For each extra therapy unit, payment is reduced by 50% of the practice expense. This code has the highest PE for this date. The first unit is paid at \$55.66. The PE reduced rate is \$41.41. The total is **\$97.07**.
- Procedure code **97110**, August 9, 2017, has a Work RVU of 0.45 multiplied by the Work GPCI of 1.015 is 0.45675. The PE RVU of 0.45 multiplied by the PE GPCI of 1.012 is 0.4554. The malpractice RVU of 0.02 multiplied by the malpractice GPCI of 0.77 is 0.0154. The sum is 0.92755 multiplied by the DWC conversion factor of \$57.50 for a MAR of \$53.33. For each extra therapy unit, payment is reduced by 50% of the practice expense. The PE for this code is not the highest. The PE reduced rate is \$40.24 at 4 units is **\$160.96**.
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- Procedure code 97112, August 14, 2017, has a Work RVU of 0.45 multiplied by the Work GPCI of 1.015 is 0.45675. The PE RVU of 0.49 multiplied by the PE GPCI of 1.012 is 0.49588. The malpractice RVU of 0.02 multiplied by the malpractice GPCI of 0.77 is 0.0154. The sum is 0.96803 multiplied by the DWC conversion factor of \$57.50 for a MAR of \$55.66. For each extra therapy unit, payment is reduced by 50% of the practice expense. This code has the highest PE for this date. The first unit is paid at \$55.66. The PE reduced rate is \$41.41. The total is **\$97.07**.
- Procedure code **97110**, August 14, 2017, has a Work RVU of 0.45 multiplied by the Work GPCI of 1.015 is 0.45675. The PE RVU of 0.45 multiplied by the PE GPCI of 1.012 is 0.4554. The malpractice RVU of 0.02 multiplied by the malpractice GPCI of 0.77 is 0.0154. The sum is 0.92755 multiplied by the DWC conversion factor of \$57.50 for a MAR of \$53.33. For each extra therapy unit, payment is reduced by 50% of the practice expense. The PE for this code is not the highest. The PE reduced rate is \$40.24 at 4 units is **\$160.96**.
- Procedure code **97140**, August 14, 2017, has a Work RVU of 0.43 multiplied by the Work GPCI of 1.015 is 0.43645. The PE RVU of 0.41 multiplied by the PE GPCI of 1.012 is 0.41492. The malpractice RVU of 0.01 multiplied by the malpractice GPCI of 0.77 is 0.0077. The sum is 0.85907 multiplied by the DWC conversion factor of \$57.50 for a MAR of \$49.40. For each extra therapy unit, payment is reduced by 50% of the practice expense. The PE for this code is not the highest. The PE reduced rate is \$37.47 at 2 units is **\$74.94**.

The total MAR for the disputed services is \$5,092.74. The insurance carrier submitted information to support payment of \$2,047.59. The amount remaining due is \$3,045.15. This amount is recommended.

Conclusion

For the reasons stated above, the division finds that the requestor has established that additional reimbursement is due. As a result, the amount ordered is \$3,045.15.

ORDER

Based on the submitted information, pursuant to Texas Labor Code Section 413.031 and 413.019 (if applicable), the division has determined the requestor is entitled to additional reimbursement for the disputed services. The division hereby ORDERS the respondent to remit to the requestor \$3,045.15, plus applicable accrued interest per 28 Texas Administrative Code §134.130, due within 30 days of receipt of this order.

Authorized Signature

	Grayson Richardson	November 9, 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 DWCO45M) 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.