

**DOCKET NO. 453-05-4171.M4  
MDR NO. M4-03-7816-01**

**STATE OFFICE OF RISK  
MANAGEMENT,  
Petitioner**

**V.**

**EDWARD F. WOLSKI, M.D.,  
Respondent**

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**BEFORE THE STATE OFFICE**

**OF**

**ADMINISTRATIVE HEARINGS**

**DECISION AND ORDER**

Carrier, State Office of Risk Management, challenges a decision of the Texas Workers' Compensation Commission's Medical Review Division (MRD) granting reimbursement to Provider, Edward F. Wolski, M.D., in the amount of \$199.00. for two office visits and an item of durable medical equipment (DME) provided to the injured worker on January 24, 2003. Carrier appeared at the hearing. Although duly notified of the hearing, Provider failed to appear.

As reflected in the Findings of Fact and Conclusions of Law, the Administrative Law Judge denies reimbursement. Prior to the MRD decision, Carrier reimbursed Provider for the office visits, leaving only the DME in dispute. However, Respondent failed to request reconsideration of his claim prior to seeking medical dispute resolution, as required by the Commission's rules. Even if Respondent had timely sought reconsideration, however, he failed to provide documentation identifying the durable medical equipment for which reimbursement was sought.

**I. Findings of Fact**

1. Provider, Edward F. Wolski, M.D., billed Carrier, State Office of Risk Management, for two office visits under CPT Code 99213 and for an item of durable medical equipment under CPT Code E1399.
2. Carrier refused reimbursement for the medical services and equipment identified in Finding 1.
3. Prior to filing his request for medical dispute resolution, Provider did not request reconsideration of Carrier's decision to deny reimbursement.
4. In response to Provider's initial request for medical dispute resolution on July 9, 2003, Carrier reimbursed Provider on July 25, 2003, for the two office visits billed under CPT Code 99213.
5. Provider did not provide documentation identifying the durable medical equipment provided to the injured worker on January 24, 2003.

## **II. Conclusions of Law**

6. The State Office of Administrative Hearings has jurisdiction over matters related to the hearing in this proceeding, including the authority to issue a decision and order, pursuant to TEX. LAB. CODE ANN. §413.031 and TEX. GOV'T CODE ANN. ch. 2003.
7. Adequate and timely notice of the hearing was provided in accordance with TEX. GOV'T CODE ANN. §§2001.051 and 2001.052.
8. Based on Finding 3, Provider failed to comply with 28 TEX. ADMIN. CODE § 133.304 (k) and (m) as a prerequisite to requesting medical dispute resolution before the Texas Workers' Compensation Commission's Medical Review Division.
9. Provider is required to identify to Carrier the durable medical equipment provided to the injured worker.
10. Based on the foregoing Findings and Conclusions, Provider is entitled to no additional reimbursement.

### **ORDER**

**IT IS, THEREFORE, ORDERED** that the reimbursement claim of Edward F. Wolski, M.D., is denied.

**Signed May 23, 2005.**

**Gary W. Elkins  
Administrative Law Judge  
State Office of Administrative Hearings**