



Return-to-Work Plan-Based Audit

June 1, 2022

Section I: General Statement and Overview

Texas Department of Insurance, Division of Workers' Compensation (DWC) is required by Texas Labor Code Section 413.002 to "monitor health care providers, insurance carriers, independent review organizations, and workers' compensation claimants who receive medical services to ensure the compliance of those persons with rules adopted by the commissioner relating to health care, including medical policies and fee guidelines." Texas Labor Code Section 408.021(a) states that "an employee who sustains a compensable injury is entitled to all health care reasonably required by the nature of the injury as and when needed. The employee is specifically entitled to health care that cures or relieves the effects naturally resulting from the compensable injury, promotes recovery or enhances the ability of the employee to return to or retain employment." Texas Labor Code Section 413.0512 requires the Medical Quality Review Panel (MQRP) to recommend to the medical advisor "appropriate action regarding doctors, other health care providers, insurance carriers, utilization review agents, and independent review organizations."

DWC will manage the Medical Quality Review Process in a manner that is fair to all workers' compensation system participants, open, and transparent to the extent consistent with state confidentiality laws and provide the subject of a review the opportunity to participate throughout the Medical Quality Review Process.

Medical quality reviews help DWC monitor compliance with the Texas Labor Code and DWC rules. They also ensure that injured employees in the workers' compensation system receive reasonable and medically necessary health care that is timely, cost-effective, and facilitates functional recovery and appropriate return-to-work outcomes. Information regarding cost and utilization of health care provided or authorized by a treating doctor is collected under Texas Labor Code Section 408.023(l)(3).

The Texas Labor Code authorizes DWC to conduct performance audits of participants in the Texas Workers' Compensation System. Texas Labor Code Section 402.075 specifically directs DWC to focus its regulatory oversight on insurance carriers and health care providers identified as poor performers in the Performance-Based Oversight (PBO) program. Therefore, doctors selected for the 2022 Return to Work plan-based audit shall include those identified as poor performers for Measure 1 in the PBO program. Poor performers are identified based on their performance score of 79.99 or less for Measure 1 as defined in the PBO 2021 Assessment Health Care Providers¹.

Section II: Purpose

- Promote the delivery of quality health care in a cost-effective manner, including protecting the safety of injured employees.
- Ensure that doctors' decisions and recordkeeping regarding return to work were reasonable.

¹ For more information, see Texas Department of Insurance, Division of Workers' Compensation Performance Based Oversight, [2021 Performance Based Oversight Health Care Providers Assessment \(texas.gov\)](https://www.texas.gov).

- Support return-to-work outcomes and avoid unnecessary disability.

Section III: Scope and Methodology

- Includes doctors who were identified as poor performers for Measure 1 in the 2021 Health Care Provider Assessment for the PBO measure of documentation supporting how the injured employee is prevented from returning to work as reported on the DWC Form-073, *Work Status Report*.
- Includes doctors who were identified as those that billed for the DWC Form-073 that checked Part II, Box "c" preventing injured employees from returning to work.
- Procedures for determining the reasonableness of a doctor's decision and recordkeeping regarding return to work are set forth in Section II of the Medical Quality Review Process, specifically, the adopted return to work guidelines. See also Texas Labor Code Sections 413.002, 413.013, and 413.05115.

Section IV: Selection Criteria

- Time frame to select data:
 - Subject doctors are first identified through the 2021 Health Care Provider Assessment PBO Tier Placement.
 - Cases are identified through medical bill data submitted to DWC with dates of service on or after September 1, 2021, through February 28, 2022, which contain CPT code 99080 with modifier 73.
- Subject selection:
 - Select doctors identified as poor performers for Measure 1 in the 2021 Health Care Provider Assessment for the PBO measure of documentation supporting how the injured employee is prevented from returning to work as reported on the DWC Form-073, *Work Status Report*.
- Case selection:
 - Select cases where the injured employee had three or more bills with CPT code 99080 with modifier 73 between September 1, 2021, and February 28, 2022.
 - Randomly select no more than five cases for each doctor.
 - Select all cases for a doctor that has five or less cases.
- Exclusions:
 - any case where the doctor checked DWC Form-073 Part II, Box "a" allowing the injured

employee to return to work without restrictions;

- any case where the doctor checked DWC Form-073 Part II, Box “b” allowing the injured employee to return to work with restrictions; or
- any case reviewed by MQRP as part of the 2021 Health Care Provider Assessment PBO.

Section V: Roles and Responsibilities

Information Management Services (IMS)

- Provides a list of doctors based on the scope, methodology, and selection criteria.
- Coordinates code review of programming used to meet the scope, methodology, and selection criteria as outlined in Sections III and IV.
- Selects the case files for medical quality review based on selection criteria.

Health Care Quality Review (HCQR)

- Notifies doctors chosen for medical quality review and requests documents.
- Requests another subject or case from IMS if the nurse investigator verifies in writing that a subject or case did not meet the approved plan-based audit criteria.
- Selects MQRP members to perform a review in accordance with Texas Labor Code Sections 408.0043-408.0045 and 28 Texas Administrative Code Sections 180.22, 180.66, and 180.68.
- Provides an executive summary to the commissioner of workers’ compensation upon conclusion of the plan-based audit.

Medical Advisor

- Develops questions for MQRP experts. The questions will be approved by the commissioner of workers’ compensation prior to records being sent to MQRP experts.

Section VI: Conflicts

This plan-based audit complies with the approved Medical Quality Review Process. However, if a specific conflict exists between this plan-based audit and the Medical Quality Review Process, this plan-based audit prevails.

Section VII: Approvals

Submitted by:



6/2/22

Graves Owen, M.D.
Medical Advisor

Date

Approved by:



6/2/22

Dan Paschal

Date

Deputy Commissioner for Policy & Customer Services