

**MAXIMUS FEDERAL SERVICES, INC.**

Independent Bill Review  
P.O. Box 138006  
Sacramento, CA 95813-8006  
Fax: (916) 605-4280

---

11/13/2013

**Independent Bill Review Final Determination Upheld**

[REDACTED]  
[REDACTED]  
[REDACTED]

Re: Claim Number: [REDACTED]  
Claims Administrator name: [REDACTED]  
Date of Disputed Services: 2/19/2013 – 2/19/2013  
MAXIMUS IBR Case: CB13-0000080

Dear [REDACTED]

**Determination:**

A Request for Independent Bill Review (IBR) was assigned to MAXIMUS Federal Services on 8/5/2013, by the Administrative Director of the California Division of Workers' Compensation pursuant to California Labor Code section 4603.6. MAXIMUS Federal Services has determined that the **Claims Administrator's determination is upheld**. This determination finds that the Claims Administrator does not owe the Provider additional reimbursement.

**Pertinent Records and Other Appropriate Information Relevant to the Determination Reviewed:**

The following evidence was used to support the decision:

- The original billing itemization
- Supporting documents submitted with the original billing
- Explanation of Review in response to the original bill
- Request for Second Bill Review and documentation
- Supporting documents submitted with the request for second review
- The final explanation of the second review
- Other: OMFS Physician Services

**Supporting Analysis:**

The dispute regards the amount paid for a dermatology procedure (17999), chart notes reproduction (99086) and completion of a report (99080) on 2/19/2013. The Provider billed CPT 17999, 99086 and 99080, was reimbursed \$175.00 and is requesting an additional \$325.00. The Claims Administrator reimbursed \$175.00 for the billed procedure code 17999 indicating "The PPO recommended allowance is in accordance with your Anthem PPO contract." The Claims Administrator denied reimbursement of the billed procedure code 99086 indicating "No separate payment was made because the value of the service is included within the value of another service performed on the same day." The Claims Administrator denied reimbursement of the billed procedure code 99080 indicating "This report does not fall under the guidelines for a Separately Reimbursable Report found in the General Instructions Section of the Physician's Fee Schedule."

The Independent Bill Review request was forwarded to the Department of Workers' Compensation (DWC) for an eligibility review. DWC deemed the request eligible for the IBR review process.

Based on review of the documentation submitted, the report and chart notes for date of service 2/19/2013 were not included in the documents submitted with the IBR request. The IBR application included a Progress Report (PR-2) and Patient Treatment Log for date of service 2/5/2013. Due to the missing documentation, MAXIMUS is unable to recommend additional reimbursement on the billed procedure codes 17999, 99086 and 99080.

There is no additional reimbursement warranted per the Official Medical Fee Schedule codes 17999, 99086 and 99080.

The chart below provides a comparison of billed charges and reimbursement rates for the codes and dates of services at issue.

Validated Code	Validated Modifier	Validated Modifier	Validated Units	Dispute Amount	Total Fee Schedule Allowance	Provider Paid Amount	Allowed Recommended Reimbursement	Fee Schedule Utilized
17999			1	\$175.00	\$175.00	\$175.00	\$0.00	PPO Contract
99086			3	\$90.00	\$0.00	\$0.00	\$0.00	PPO Contract
99080			1	\$60.00	\$0.00	\$0.00	\$0.00	PPO Contract

**Chief Coding Specialist Decision Rationale:**

This decision was based on OMFS Physician Services, submitted documentation and comparison with explanation of review (EOR). This was determined correctly by the Claims Administrator and the payment of \$175.00 is upheld.

This decision constitutes the final determination of the Division of Workers' Compensation Administrative Director, is binding on all parties, and is not subject to further appeal except as specified in Labor Code section 4603.6(f)

Sincerely,

[REDACTED], RHIT

Copy to:

[REDACTED]  
[REDACTED]  
[REDACTED]

Copy to:

[REDACTED]  
[REDACTED] [REDACTED]  
[REDACTED]