

MAXIMUS FEDERAL SERVICES, INC.

Independent Bill Review
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Independent Bill Review Final Determination Upheld

7/30/2014

[REDACTED]

IBR Case Number:	CB14-0000168	Date of Injury:	10/7/2013
Claim Number:	[REDACTED]	Application Received:	1/15/2014
Claims Administrator:	[REDACTED]		
Date(s) of service:	9/16/2013 – 9/16/2013		
Provider Name:	[REDACTED]		
Employee Name:	[REDACTED]		
Disputed Codes:	ML101 Modifier 94 and 95		

Dear [REDACTED]

Determination

A Request for Independent Bill Review (IBR) was assigned to MAXIMUS Federal Services on 2/28/2014, 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

Supporting Analysis:

The dispute regards the payment amount for Medical-Legal services (ML101 Modifier 94, 95) performed on 9/16/2013. The Provider billed ML101 Modifier 94 and 95, 69 units and total charges of \$5,390.63. The Claims Administrator reimbursed 29 units of ML101 at \$3,750.00 with the explanation "This charge is adjusted to comply with the rate and rules of the contract indicated. "

- **ML101** - Follow-up Medical-Legal Evaluation. Limited to a follow-up medical-legal evaluation by a physician in which occurs within nine months of the date on which the prior medical-legal evaluation was performed. The physician shall include in his or her report verification, under penalty of perjury, of time spent in each of the following activities: review of records, face-to-face time with the injured worker, and preparation of the report. Time spent shall be tabulated in increments of 15 minutes or portions thereof, rounded to the nearest quarter hour. The physician shall be reimbursed at the rate of RV 5, or his or her usual and customary fee, whichever is less, for each quarter hour.
- **Modifier 94** - Evaluation and medical-legal testimony performed by an Agreed Medical Evaluator. Where this modifier is applicable, the value of the procedure is modified by multiplying the normal value by 1.25.
- **Modifier 95** - Evaluation performed by a panel selected Qualified Medical Evaluator. This modifier is added solely for identification purposes, and does not change the normal value of any procedure.

The documents submitted for review were a Medical-Legal Invoice and Medical-Legal report. The invoice listed the following units billed for the listed activities: 12 units face-to-face; 29 units review and summary of records; 28 units report preparation; and 16 units of psychological testing. The total number of hours reported on page 3 and on page 55 (compliance statement) of the Medical Legal report was inconsistent with the total number of units billed for ML101 on the invoice.

Per Medical-Legal report page 3, "This examination, psychological testing, review of records, and report preparation totaled 16 hours. This examination entailed 3 hours of face-to-face with the applicant, 4 hours of test administration, scoring, and interpreting of psychological tests and questionnaires, 7.25 hour of review of records, and 7 hours of research and preparation of this report."

Per Medical-Legal report page 55 (Compliance Statement), "I further declare under the penalty of perjury that the time I spent on the following activities is true and correct. A. face to face with the applicant 3.0 hours, B. Review of records 2.0 hours, C. Administration/scoring and interpretation of psychological testing 4.0 hours and D. Preparation of report 7.0 hours."

Based on the number of hours documented on page 3 and 55 of the Medical-Legal report, the reimbursement of 48 units (12 hours) for the code ML101 was correct. The four hours spent on psychological testing were billed and reimbursed separately as CPT 96100. The ML101 Modifier 94 and 95 reimbursement was calculated based on the Medical-Legal Fee Schedule.

There is no additional reimbursement warranted per the Medical-Legal service code ML101 Modifier 94 and 95.

