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

Independent Bill Review Final Determination Reversed

10/13/2014

[redacted]

IBR Case Number:	CB14-0000535	Date of Injury:	04/07/1998
Claim Number:	[redacted]	Application Received:	04/04/2014
Claims Administrator:	[redacted]		
Date(s) of service:	10/28/2013		
Provider Name:	[redacted]		
Employee Name:	[redacted]		
Disputed Codes:	G0431		

Dear [redacted]:

Determination:

A Request for Independent Bill Review (IBR) was assigned to MAXIMUS Federal Services on 07/14/2014, 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 reversed. The Claims Administrator is required to reimburse you the IBR fee of $250.00 and the amount found owing of $86.36 for a total of $336.36.**

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
- Official Medical Fee Schedule or negotiated contract: PPO Contract
- Other: CMS' National Correct Coding Initiative Guidelines 01/01/2013

Analysis and Findings:

Based on review of the case file the following is noted:

- **ISSUE IN DISPUTE: Provider dissatisfied with reimbursement of code G0434.**
- The Provider billed HCPCS code G0431 for date of service 10/28/2013. Provider was reimbursed $21.59 and is seeking additional reimbursement of $98.35.
- The Provider billed HCPCS code G0434 in the amount $550.00.
- The explanation of review provided the following explanation: "(060) another provider already billed for same D.O.S. (G56) Duplicate charge or balance forward. (R1) Duplicate billing."
- Explanation of Reviews (EOR) received is only for providing doctor with provider billing information. Claims Administrator did not submit any other EORs for another provider billing HCPCS code G0431 on date of service 10/28/2013 for the same patient.
- EOR shows reimbursement on HCPCS code G0434 Modifier QW in the amount $21.59.
- Claim submitted does not show G0434 Modifier QW was billed.
- Claims Administrator submitted documentation stating: "Per CLIA Laboratory Demographic Information Report, Provider billing information certificate is a "waiver" (attached). They do not have a certificate of compliance or accreditation." Also stating: "The drug screen header indicates Service Facility Location Information performed the screen, however the bill and NPI are that of the following information…" and states the billing provider information which is the billing group for the Service Facility.
- CMS 1500 form submitted shows that the testing was performed by the doctor from the Service Facility in box #32. This is the Specialist that holds a Compliance certificate with CLIA which states: "COC: Issued to a laboratory once the State Department of Health conducts a survey (inspection) and determines that the laboratory is compliant with all applicable CLIA requirements. This type of certificate is issued to a laboratory that performs nonwaived (moderate and/or high complexity) testing."
- Documentation reviewed includes Urine Drug Testing Report and Request for Second Review which states "This bill was denied stating 'another provider already billed for same date of service'."
- No evidence of any other billing or Explanation of Review for another Provider was found.
- While reviewing the materials provided, it is noted that the results of the urine drug screen clearly indicate a computerized analysis was performed.
- Upon review of Centers for Medicare & Medicaid Services (CMS) guidelines, HCPCS code G0434 is utilized to report urine drug screening performed by a test that is CLIA waived or moderate complexity test. The HCPCS code G0431 is reported with only one unit of service regardless of the number of drugs screened. The testing described by G0431 includes all CLIA high complexity urine drug screen testing as well as any less complex urine drug screen testing performed at the same patient encounter.
- Submitted toxicology results report a quantitative measure of each drug screened.
- Due to the complexity of the toxicology test performed, the levels tracked and results obtained the laboratory services shall be paid in accordance with HCPCS code G0431.
- PPO Contract states 10% discount agreement.

- **DETERMINATION OF ISSUE IN DISPUTE: Based on CMS' guidelines of HCPCS code G0431 and the Urine Drug Testing Report, HCPCS code G0431 was the correct billed HCPCS code. Additional reimbursement of $86.36 is recommended.**

Service Code	Provider Billed	Plan Allowed	Dispute Amount	Units	Workers' Comp Allowed Amount	Notes
Date of Service – 10/28/2013 ***Pathology and Clinical Laboratory***						
G0431	**$550.00**	**$21.59**	**$98.35**	**1**	**$107.95**	**DISPUTED SERVICE – Additional reimbursement to the provider to be made for $86.36**

Determination: Reversed

MAXIMUS Federal Services, as the Independent Bill Review Organization, has determined the Claims Administrator owes the Provider additional reimbursement. The Claims Administrator is required to reimburse the Provider for the IBR application fee (**$250.00**) and the PPO Contract amount for HCPCS code G0431 ($86.36) for a total of $336.36.

The Claims Administrator *is required to reimburse the provider $336.36 within* ***45 days of date on this notice per section 4603.2 (2a).*** *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]
Chief Coding Reviewer

Copy to:
[redacted]

Copy to:
[redacted]