

MAXIMUS FEDERAL SERVICES, INC.

Independent Bill Review
P.O. Box 138006
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INDEPENDENT BILLING REVIEW FINAL DETERMINATION

January 8, 2015

[REDACTED]
[REDACTED]
[REDACTED]

IBR Case Number:	CB14-0001543	Date of Injury:	07/31/2003
Claim Number:	[REDACTED]	Application Received:	10/14/2014
Claims Administrator:	[REDACTED]	Assignment Date:	11/10/2014
Provider Name:	[REDACTED]		
Employee Name:	[REDACTED]		
Disputed Codes:	76942, J3010, J1170, J0735 and J1790 (NDCs 38779175604, 38779073105, 38779056104 and 00517970225)		

Dear [REDACTED]

MAXIMUS Federal Services has completed the Independent Bill Review (“IBR”) of the above workers’ compensation case. This letter provides you with the IBR Final Determination and explains how the determination was made.

Final Determination: UPHOLD. MAXIMUS Federal Services has determined that no additional reimbursement is warranted. The Claims Administrator’s determination is upheld and the Claim Administrator does not owe the Provider additional reimbursement. A detailed explanation of the decision is provided later in this letter.

The determination of MAXIMUS Federal Services and its expert reviewer is deemed to be the Final Determination of the Administrative Director of the Division of Workers’ Compensation. This determination is binding on all parties. In certain limited circumstances, you can appeal the Final Determination. Appeals must be filed with the Workers’ Compensation Appeals Board within 20 days from the date of this letter. For more information on appealing the final determination, please see California Labor Code Section 4603.6(f).

Sincerely,

[REDACTED]
Medical Director

cc: [REDACTED]
[REDACTED]

DOCUMENTS REVIEWED

Pertinent documents reviewed to reach the determination:

- The Independent Bill Review Application
- 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
- Negotiated contracted rates:
- National Correct Coding Initiatives

HOW THE IBR FINAL DETERMINATION WAS MADE

MAXIMUS Federal Services Chief Coding Specialist reviewed the case file and researched pertinent coding and billing standards to reach a determination. In some cases a physician reviewer was employed to review the clinical aspects of the care to help make a determination. He/she has no affiliation with the employer, employee, providers or the claims administrator. The expert reviewer was selected based on his/her clinical experience, education, background, and expertise in the same or similar specialties that evaluate and/or treat the medical condition and disputed items/services.

ANALYSIS AND FINDING

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

- **ISSUE IN DISPUTE:** Provider is dissatisfied with denial of code 76942 - Ultrasonic guidance for needle placement (e.g., biopsy, aspiration, injection and localization device), imaging supervision and interpretation. Also dissatisfied with reimbursement of NDCs 38779175604, 38779073105, 38779056104 and 00517970225
- Claims Administrator denied code indicating on the Explanation of Review “Medical necessity has not been established for this procedure”
- Based on review of the Secondary Treating Physician’s Progress Report, Provider performed a pump analysis, refill and reprogramming.
- Provider’s report was reviewed by Maximus’ Medical Director whose conclusion determined that “vast majority of pumps are refilled in the office/home without ultrasound” and therefore, not medically necessary for CPT 76942.
- Based on information reviewed, reimbursement of CPT 76942 is not warranted
- NDCs 38779175604, 38779073105, 38779056104 and 00517970225 were reimbursed with Explanation of Review indicating “This charge was adjusted to comply with the rate and rules of the contract indicated.”
- Maximus requested a copy of the PPO Contract but nothing was received for this review. We are unable to dispute a contract agreement without any verification of an existing

