

INDEPENDENT BILLING REVIEW FINAL DETERMINATION

March 10, 2015

[REDACTED]
[REDACTED]
[REDACTED]

IBR Case Number:	CB14-0001761	Date of Injury:	12/23/2013
Claim Number:	[REDACTED]	Application Received:	11/19/2014
Claims Administrator:	[REDACTED]	Assignment Date:	01/2/2015
Provider Name:	[REDACTED]		
Employee Name:	[REDACTED]		
Disputed Codes:	29870-59, 29888, 29880-59, 29874-59, 29877-59, 29876-59		

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,

Paul Manchester, M.D., M.P.H.
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
- OMFS

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 seeking full remuneration for 29870-59, 29888, 29880-59, 29874-59, 29877-59, 29876-59 surgical procedures performed on 04/24/2014.**
- The Claims Administrator reimbursed the Provider for CPT 29888 & 29880. CPT Codes 29870-59, 29874-59, 29877-59, & 29876-59, were denied with the following explanation: “NCCI Comprehen/Component edit for Surgery Codes 2000 – 29999,” and “NCCI Outpatient Code Editor, your services has been disallowed.”
- 2014 CPT Code Description: 29870, arthroscopy, knee, diagnostic, with or without synovial biopsy, 29888 arthroscopically aided anterior cruciate ligament repair/augmentation or reconstruction, 29880 arthroscopy, knee, surgical; with meniscectomy (medial and lateral, including any meniscal shaving) including debridement/shaving of articular cartilage (chondroplasty), same or separate compartment(s), when performed, 29874 arthroscopy, knee, surgical; for removal of loose body or foreign body (eg, osteochondritis dissecans fragmentation, chondral fragmentation, 29877 arthroscopy, knee, surgical; debridement/shaving of articular cartilage (chondroplasty), & 29876 arthroscopy, knee, surgical; synovectomy, major, 2 or more compartments (eg, medial or lateral)
- CPT Codes in question were analyzed and found to have the following coding conflicts:
 - Colum 2: 29870; Colum 1: 29888, 29880, 29874, 29877 & 29876
 - Colum 2: 29874; Colum 1: 29888, 29880, 29877, & 29876
 - Colum 2: 29877; Colum 1: 29888, 29880, 29876
 - Colum 2: 29876; Colum 1: 29888, & 29880

