

**INDEPENDENT BILLING REVIEW FINAL DETERMINATION**

07/17/2015

[REDACTED]  
[REDACTED]  
[REDACTED]

IBR Case Number:	CB15-0000654	Date of Injury:	12/07/2013
Claim Number:	[REDACTED]	Application Received:	04/27/2015
Claims Administrator:	[REDACTED]		
Assigned Date:	05/20/2015		
Provider Name:	[REDACTED]		
Employee Name:	[REDACTED]		
Disputed Codes:	29828-51		

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
- Official Medical Fee Schedule

## 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 remuneration for CPT code 29828 51, Biceps Tenodesis, for date of service 11/11/2014.**
- The Claims Administrator denied the **29828 51** service with the following rationale: “Based on the submitted report, separately identifiable biceps tenodesis unrelated to the rotator cuff repair is not supported. Biceps tenodesis is incorporated into the rotator cuff repair.”
- According to reference Brigham and Women’s Hospital, a biceps tenodesis procedure involves “cutting of the long head of the biceps just prior to its insertion on the superior labrum and then anchoring the tendon along its anatomical course more distally along the humerus”.
- The operative report indicated a tenotomy was performed.
- The narrative report did not conclusively describe the removal of the biceps tendon from its original site of attachment to a site on the humerus.
- Based on the aforementioned documentation and procedure definition, reimbursement for the tenodesis, CPT code 29828-51 is not supported

The table below describes the pertinent claim line information.

**DETERMINATION OF ISSUE IN DISPUTE: 29828-51**

<b>Date of Service: 11/11/2014</b>							
<b>ASC Services</b>							
<b>Service Code</b>	<b>Provider Billed</b>	<b>Plan Allowed</b>	<b>Dispute Amount</b>	<b>Assist Surgeon</b>	<b>Units</b>	<b>Workers' Comp Allowed Amt.</b>	<b>Notes</b>
29828-51	\$1540.14	\$0.00	\$770.07	N/A	1	\$0.00	Refer to Analysis

Copy to:

[REDACTED]  
[REDACTED]  
[REDACTED]

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[REDACTED]  
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