

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 remuneration for 99205 New Patient Evaluation and Management Service performed on 05/15/2015.**
- The Claims Administrator's denied service as "not authorized"
- RFA dated 5/14/15 by Treating Physician documents "Service/Good Requested: Consultation with a spine surgeon for possible epidural" and was signed and dated by Claims Administrator on 5/27/15 showing "Approved"
- Date of service for consultation was 5/15/15.
- Authorization does not specify retro date of service for consultation.
- Consultation for a secondary physician was not authorized on date of service 5/15/15.
- **Based on the aforementioned documentation and guidelines, reimbursement for Evaluation and Management 99205 is not warranted.**

The table below describes the pertinent claim line information.

DETERMINATION OF ISSUE IN DISPUTE: 99205

Date of Service: 05/15/2015 Physician Services						
Service Code	Provider Billed	Plan Allowed	Dispute Amount	Units	Workers' Comp Allowed Amt.	Notes
99205	\$328.55	\$0.00	\$328.55	1	\$0.00	Refer to Analysis

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

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[REDACTED]