

MAXIMUS FEDERAL SERVICES, INC.
Independent Bill Review
P.O. Box 138006
Sacramento, CA 95813-8006
(855) 865-8873 Fax: (916) 605-4280

INDEPENDENT BILLING REVIEW FINAL DETERMINATION

July 26, 2023

REDACTED
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IBR Case Number	CB23-0000130
Claim Number	REDACTED
Assignment Date	06/06/2023
Claims Administrator	REDACTED
Date(s) of service	10/25/2022 - 10/25/2022
Provider Name	REDACTED
Employee Name	REDACTED
Disputed Codes	96136 and 96137
Date of Injury	07/07/2021
Application Received	01/11/2023

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,

MAXIMUS Federal Services

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 is seeking remuneration for 96136 and 96137 submitted for date of service 10/25/2022.**
- Opportunity to Dispute Eligibility was communicated with the Claims Administrator on 05/19/2023. Response not yet received.
- CMS 1500, place of service 11
 - ML201-95-96
 - 96130
 - 96131 x 3
 - 96136
 - 96137
- EORs reflect reimbursement of \$4,591.75. \$4,030.00 for ML201, \$174.33 for 96130 and \$387.42 for 96131. Zero reimbursement for 96136 and 96137 with the rationale: please note time is bundled between admin. scoring & interpreting. 96136 & 96137 is for administration/scoring only. Please resubmit with corrected billing/amended report with interpretation time removed from the 96136/7 documentation on report page 2.
- Code Descriptions
 - 96130: Psychological testing evaluation services by physician or other qualified health care professional, including integration of patient data, interpretation of standardized test results and clinical data, clinical decision making, treatment planning and report, and interactive feedback to the patient, family member(s) or caregiver(s), when performed; first hour
 - 96131: Psychological testing evaluation services by physician or other qualified health care professional, including integration of patient data, interpretation of standardized test results and clinical data, clinical decision making, treatment planning and report, and interactive feedback to the patient, family member(s) or caregiver(s), when performed; each additional hour (List separately in addition to code for primary procedure)
 - 96136: Psychological or neuropsychological test administration and scoring by physician or other qualified health care professional, two or more tests, any method; first 30 minutes
 - 96137: Psychological or neuropsychological test administration and scoring by physician or other qualified health care professional, two or more tests, any method; each additional 30 minutes (List separately in addition to code for primary procedure)
- Psychological and neuropsychological test evaluation services, which include integration of patient data, interpretation of test results and clinical data, treatment planning and report, and interactive feedback, are described by 96130, 96131, 96132, 96133. Testing and administration services (96136, 96137) are performed by a physician or other qualified health care professional. For 96136, 96137, do not include time for evaluation services (eg, integration of patient data or interpretation of test results). This time is included with psychological and neuropsychological test evaluation services (96130, 96131, 96132, 96133). Some of these services are typically performed together. For example, psychological/neuropsychological testing evaluation services (96130, 96131, 96132, 96133) may be reported with psychological/neuropsychological test administration and scoring services (96136, 96137, 96138, 96139 (AMA CPT 2022 Medicine/Central Nervous System Assessments/Test).
- Submitted PQME Report for date of service 10/25/2022 reflects the following: “Diagnostic testing is billed under the Official Medical Fee Schedule as follows:
 - 96130 Integration of patient data and interpretation of standardized test results 1 Hour (MMPI-2, Beck Depression Inventory, and Beck Anxiety Inventory) (1 Unit)

- 96131 Integration of patient data and interpretation of standardized test results 3 Hours (MMPI-2, Beck Depression Inventory, and Beck Anxiety Inventory) (3 Units)
- 96136 Physician **administration, scoring, and interpretation** .50 Hours (Hamilton Rating Scales for Anxiety and Depression) (1 Unit)
- 96137 Physician **administration, scoring, and interpretation** .50 Hours (Hamilton Rating Scales for Anxiety and Depression) (1 Units)”
- There is no clear delineation of what time was spent on administration and scoring of the Hamilton Scales vs the interpretation of the Hamilton Scales. Psychological testing evaluation services including interpretation are billed using 96130 and 96131. The administering and scoring of the psychological tests are billed with 96136 and 96137. **96136 and 96137 Upheld.**
- **Based on the aforementioned documentation and guidelines, reimbursement is not indicated for 96136 or 96137.**

The table(s) below describe the pertinent claim line information.

DETERMINATION OF ISSUE IN DISPUTE: 96136 and 96137

Date of Service: 10/25/2022

Physician

Service Code	96136
Provider Billed	\$66.93
Plan Allowed	\$0.00
Dispute Amount	\$66.93
Assist Surgeon	N/A
Units	1
Workers' Comp Allowed Amt.	\$0.00
Notes	Uphold Refer to Analysis

Service Code	96137
Provider Billed	\$60.75
Plan Allowed	\$0.00
Dispute Amount	\$60.75
Assist Surgeon	N/A
Units	1
Workers' Comp Allowed Amt.	\$0.00
Notes	Uphold Refer to Analysis

Copy to:

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