

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

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**INDEPENDENT BILLING REVIEW FINAL DETERMINATION**

October 25, 2023

REDACTED  
REDACTED  
REDACTED  
REDACTED

IBR Case Number	CB23-0002227
Claim Number	REDACTED
Assignment Date	09/06/2023
Claims Administrator	REDACTED
Date(s) of service	01/10/2023 - 01/10/2023
Provider Name	REDACTED
Employee Name	REDACTED
Disputed Codes	96139, 96138-59, 96131, 96130, 96137 and 96136
Date of Injury	08/02/2017
Application Received	07/28/2023

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 96139, 96138-59, 96131, 96130, 96137 and 96136 submitted for date of service 01/10/2023.**
- Opportunity to Dispute Eligibility was communicated with the Claims Administrator on 08/21/2023. Response not yet received.
- CMS 1500, place of service 11
  - ML201-96-93-95
  - MLPRR x 551
  - 96136
  - 96137 x 4
  - 96130
  - 96131
  - 96138-59
  - 96139
- EORs reflect reimbursement of \$5,884.50. \$4,231.50 for ML201 and \$1,653.00 for MLPRR. Zero reimbursement for 96130, 96131, 96136, 96137, 96138 and 96139 with the rationale: procedure requires prior authorization, and none was identified.
- 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)
  - 96138: Psychological or neuropsychological test administration and scoring by technician, two or more tests, any method; first 30 minutes
  - 96139: Psychological or neuropsychological test administration and scoring by technician, two or more tests, any method; each additional 30 minutes (List separately in addition to code for primary procedure)
- AMA CPT 2022 Medicine/Central Nervous System Assessments/Test Guidelines: 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).

- Submitted PQME Report reflects the following: “Face-to-face time **administering** the testing by psychologist: 2.5 hours; **scoring and interpretation** of the testing by psychologist: 2 hours; **scoring and interpretation** of the testing by technician: .75 minutes.”
- There is no clear delineation of what time was spent on the administration **and** scoring vs the interpretation/integration of the tests. The time spent on the administration **and** scoring vs the interpretation was not separately delineated. Psychological testing evaluation services including interpretation are billed using 96130 and 96131. The administering **and** scoring of the psychological tests are billed with 96136, 96137, 96138 and 96139. **96139, 96138-59, 96131, 96130, 96137 and 96136 Upheld.**
- **Based on the aforementioned documentation and guidelines, reimbursement is not indicated for 96139, 96138-59, 96131, 96130, 96137 or 96136.**

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

**DETERMINATION OF ISSUE IN DISPUTE: 96139, 96138-59, 96131, 96130, 96137 and 96136**

Date of Service: 01/10/2023

**Physician**

Service Code	96139
Provider Billed	\$56.56
Plan Allowed	\$0.00
Dispute Amount	\$56.56
Assist Surgeon	N/A
Units	1
Workers’ Comp Allowed Amt.	\$0.00
Notes	<b>Uphold</b> Refer to Analysis

Service Code	96138-59
Provider Billed	\$55.47
Plan Allowed	\$0.00
Dispute Amount	\$55.47
Assist Surgeon	N/A
Units	1
Workers’ Comp Allowed Amt.	\$0.00
Notes	<b>Uphold</b> Refer to Analysis

Service Code	96131
Provider Billed	\$129.14
Plan Allowed	\$0.00
Dispute Amount	\$129.14
Assist Surgeon	N/A
Units	1
Workers' Comp Allowed Amt.	\$0.00
Notes	<b>Uphold</b> Refer to Analysis

Service Code	96130
Provider Billed	\$174.33
Plan Allowed	\$0.00
Dispute Amount	\$174.33
Assist Surgeon	N/A
Units	1
Workers' Comp Allowed Amt.	\$0.00
Notes	<b>Uphold</b> Refer to Analysis

Service Code	96137
Provider Billed	\$243.00
Plan Allowed	\$0.00
Dispute Amount	\$243.00
Assist Surgeon	N/A
Units	4
Workers' Comp Allowed Amt.	\$0.00
Notes	<b>Uphold</b> Refer to Analysis

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	<b>Uphold</b> Refer to Analysis

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