By: Martinez Fischer

A BILL TO BE ENTITLED

AN ACT

2 relating to the regulation of Reimbursement Policies and Guidelines 3 and Treatment Guidelines for medical care in the provision of 4 workers' compensation benefits by the Texas Workers' Compensation 5 Commission.

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BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:

7 SECTION 1. Subchapter B, Chapter 413, Section 413.011 is 8 amended to read as follows:

Sec. 413.011. REIMBURSEMENT POLICIES AND 9 GUIDELINES; TREATMENT GUIDELINES. (a) The commission shall use health care 10 11 reimbursement policies and guidelines that reflect the 12 standardized reimbursement structures found in other health care 13 delivery systems with minimal modifications to those reimbursement 14 methodologies as necessary to meet occupational injury requirements. To achieve standardization, the commission shall 15 16 adopt the most current medical and payment policies used by the federal Centers for Medicare and Medicaid Services as they relate 17 18 to coding, billing, and reporting, and may modify those policies [reimbursement methodologies, models, and values or weights used by 19 the federal Health Care Financing Administration, including 20 applicable payment policies relating to coding, billing, and 21 reporting, and may modify documentation requirements] as necessary 22 23 to meet the requirements of Section 413.053.

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(b) Guidelines for medical services fees must be fair and

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1 reasonable and designed to ensure prompt access to quality medical 2 care.

3 (1) To establish a baseline medical fee guideline, the (c) 4 commission shall determine and adopt separate conversion factors for Surgery; Radiology; Pathology; Anesthesia; General Medicine; 5 6 Physical Medicine; and Evaluation and Management by calculating the 7 average commercial reimbursement rate for providers using the actual claims data study from the 2001 "Medicare Physician Fees 8 9 Compared to Average Private Rates" as commissioned by the Medicare Payment Advisory Commission. To the commercial reimbursement rate, 10 the commission shall apply successively the Medicare Economic Index 11 updates for each year between the 2001 Medicare Payment Advisory 12 Commission study and September 1, 2003. The commission shall then 13 14 add no less than 20 percent to compensate for the difference in the 15 administrative burden to treat patients in commercial plans versus 16 those in the workers' compensation system.

17 (2) After the baseline medical fee guideline in this 18 subsection is established, starting on September 1, 2004, and each 19 September 1st thereafter, the commission shall adopt and apply by 20 rule the Medicare Economic Index updates to the providers' medical 21 fee guideline.

(d) [(b) In determining the appropriate fees, the commission shall also develop conversion factors or other payment adjustment factors taking into account economic indicators in health care and the requirements of Subsection (d). The commission shall also provide for reasonable fees for the evaluation and management of care as required by Section 408.025(c) and commission

1 rules.] This section does not adopt the Medicare fee schedule, and 2 the commission shall not adopt conversion factors or other payment 3 adjustment factors based [solely] on those factors as developed by 4 the federal <u>Centers for Medicare and Medicaid Services</u> [Health Care 5 Financing Administration].

6 (e) [(c)] This section may not be interpreted in a manner 7 that would discriminate in the amount or method of payment or 8 reimbursement for services in a manner prohibited by Section 3(d), 9 Article 21.52, Insurance Code, or as restricting the ability of chiropractors to serve as treating doctors as authorized by this 10 subtitle. The commission shall also develop guidelines relating to 11 fees charged or paid for providing expert testimony relating to an 12 issue arising under this subtitle. 13

14 [(d) Guidelines for medical services fees must be fair and 15 reasonable and designed to ensure the quality of medical care and to achieve effective medical cost control. The guidelines may not 16 17 provide for payment of a fee in excess of the fee charged for similar treatment of an injured individual of an equivalent 18 standard of living and paid by that individual or by someone acting 19 on that individual's behalf. The commission shall consider the 20 increased security of payment afforded by this subtitle in 21 establishing the fee guidelines.] 22

(e) The commission by rule may adopt treatment guidelines, including return-to-work guidelines. If adopted, treatment guidelines adopted must be nationally recognized, scientifically valid, and outcome-based and designed to reduce excessive or inappropriate medical care while safeguarding necessary medical

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1 care.

2 (f) The commission by rule may establish medical policies or 3 treatment guidelines relating to necessary treatments for 4 injuries.

5 (g) Any medical policies or guidelines adopted by the 6 commission must be:

7 (1) designed to ensure the quality of medical care and8 to achieve effective medical cost control;

9 (2) designed to enhance a timely and appropriate 10 return to work; and

11 (3) consistent with Sections 413.013, 413.020, 12 413.052, and 413.053.

SECTION 2. No later than September 1, 2004, the Research and 13 Oversight Council shall present to its board of directors 14 15 recommendations regarding how it, or an outside consultant, can most efficiently and economically measure the administrative 16 17 burdens under Subsection (c) of Section 413.011. These recommendations will not be binding and the methodology they 18 contain must be free of bias or input by any group that participates 19 in workers' compensation system and that of the Texas Workers' 20 21 Compensation Commission.

22 SECTION 3. EFFECTIVE DATE. This Act takes effect 23 immediately if it receives a vote of two-thirds of all the members 24 elected to each house, as provided by Section 39, Article III, Texas 25 Constitution. If this Act does not receive the vote necessary for 26 immediate effect, this Act takes effect September 1, 2003.

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