

By: Zedler

H.B. No. 1970

A BILL TO BE ENTITLED

AN ACT

1
2 relating to workers' compensation fee guidelines and payment
3 adjustment factors used in conjunction with those guidelines for
4 certain health care services.

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

6 SECTION 1. Section 413.011, Labor Code, is amended by
7 amending Subsections (a) and (b) and by adding Subsections (a-1)
8 and (b-1) to read as follows:

9 (a) The commissioner shall adopt health care reimbursement
10 policies and guidelines that reflect the standardized
11 reimbursement structures found in other health care delivery
12 systems, including group health insurance plans, with minimal
13 modifications to those reimbursement methodologies as necessary to
14 meet occupational injury requirements.

15 (a-1) To achieve standardization, the commissioner shall
16 adopt the most current reimbursement methodologies, models, and
17 values or weights used by the federal Centers for Medicare and
18 Medicaid Services, including applicable payment policies relating
19 to coding, billing, and reporting, and may modify documentation
20 requirements as necessary to meet the requirements of Section
21 413.053.

22 (b) In determining the appropriate fees, the commissioner
23 shall also develop one or more conversion factors or other payment
24 adjustment factors taking into account economic indicators in

1 health care and the requirements of Subsections (b-1) and
2 ~~[Subsection]~~ (d). The commissioner shall also provide for
3 reasonable fees for the evaluation and management of care as
4 required by Section 408.025(c) and commissioner rules. This
5 section does not adopt the Medicare fee schedule, and the
6 commissioner may not adopt conversion factors or other payment
7 adjustment factors based solely on those factors as developed by
8 the federal Centers for Medicare and Medicaid Services.

9 (b-1) In developing payment adjustment factors under
10 Subsection (b) for health facility fees, the commissioner shall
11 adopt the following payment adjustment factors to the Medicare fee
12 schedule:

- 13 (1) 165 percent for inpatient care;
- 14 (2) 250 percent for outpatient care;
- 15 (3) a stop-loss threshold of \$50,000; and
- 16 (4) carve outs for:
 - 17 (A) blood;
 - 18 (B) hyperbaric oxygen;
 - 19 (C) high-cost pharmaceuticals;
 - 20 (D) air ambulance services;
 - 21 (E) implantables; and
 - 22 (F) orthotics and prosthetics.

23 SECTION 2. (a) The change in law made by this Act applies
24 only to a claim for workers' compensation benefits based on a
25 compensable injury that occurs on or after January 1, 2008. A claim
26 based on a compensable injury that occurs before that date is
27 governed by the law in effect on the date that the compensable

1 injury occurred, and the former law is continued in effect for that
2 purpose.

3 (b) The commissioner of workers' compensation shall adopt
4 the rules, policies, and guidelines required by Section 413.011,
5 Labor Code, as amended by this Act, not later than November 1, 2007.

6 SECTION 3. This Act takes effect September 1, 2007.