

Detail Reference Guide to
Determining CMS Medicare + 35%
for Offices of the Insurance Commissioner (OIC)
Workers' Compensation Maximum Medical Reimbursement Fee Schedules
Effective: October 1, 2008
Subsequent schedules should be updated each July 1 until further notice.

Codes listed with "0", not listed, or are "BR – By Report" are carrier priced.

HOSPITAL INPATIENT SERVICES (In-State)

For Critical Access Hospitals: 135% of the hospital-specific final Medicare per diem reimbursement for July 1 update prior to date of service** (rounded) = OIC Maximum Medical Reimbursement

For Medicare Prospective Payment Hospitals: 135% of the hospital-specific final Medicare MS-DRG core element* reimbursement for July 1 update prior to date of service** (rounded) = OIC Maximum Medical Reimbursement

* Core element reimbursement (per Medicare) = standardized amounts (basic payment); wage index; DRG relative weights; disproportionate share; indirect medical education; and outlier (if applicable).

** For date of service between July 1 through June 30, the reimbursement effective on the July 1 immediately prior to date of service would apply. For example, for a January 10, 2009 date of service, the reimbursement effective on July 1, 2008 would apply.