

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 OUTPATIENT SERVICES (In-State)

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

* Components for PPH for Ambulatory Payment Classifications (APC's) = all services grouped into APC's (per Medicare); payment rate for each APC (may pay for more than one APC per encounter); and geographic hospital wage index (if applicable per Medicare).

** For date of service between July 1 and 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.