

Detail Reference Guide to
Determining CMS Medicare + 35%
for Offices of the Insurance Commissioner (OIC)
Workers' Compensation Maximum Medical Reimbursement Fee Schedules
Effective: July 1, 2013
(This methodology will remain in effect until further notice.)

Codes listed with "0" or not listed are carrier/payor priced.
The absence or presence of a code does not indicate workers' compensation coverage.

HOSPITAL OUTPATIENT SERVICES

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

For Medicare Prospective Payment Hospitals: 135% of the hospital-specific final Medicare reimbursement** for most recent update prior to date of service (rounded) = OIC Maximum Medical Reimbursement, rounded.

** 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).