

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 INPATIENT SERVICES

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

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