Workers' Comp

StateWatch: Bill Review August 2019

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Keep current with new legislation and its potential effect on your organization. This regulatory update is for informational purposes only, and provides some key highlights on state initiatives that may impact the bill review services Genex provides.

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CALIFORNIA

The **Division of Workers' Compensation (DWC)** has made adjustments to the Medical Treatment Utilization Schedule (MTUS) Formulary Drug List. The changes became effective Aug. 1. DWC also adopted the MTUS guidelines Aug. 11, which includes the American College of Occupational and Environmental Medicine (ACOEM) Lower Back Disorder Guidelines and Workplace Mental Health Guidelines.

COLORADO

SB19-13 became effective Aug. 2. The new law adds a condition allowing physicians to prescribe an opioid to the list of disabling medical diagnoses that authorize a person to use medical marijuana

Another law, **HB 19-1105** also went into effect Aug. 2. It allows nurse practitioners to receive Level I accreditation for purposes of receiving 100 percent reimbursement under the workers' compensation medical fee schedule.

MASSACHUSETTS

The **Executive Office of Health and Human Services** has made updates to 101 CMR 309.00 Personal Care Attendant Program. The changes went into effect Aug. 1.

MICHIGAN

The **Workers' Compensation Agency** has made adjustments to the Hospital Cost-to-Charge Ratios which became effective Aug. 8.

NEW YORK

The **New York State Medicaid Program** has announced updates to the Durable Medical Equipment (DME) Fee Schedule, effective Aug. 1.

The **New York Workers' Compensation Board** has announced adopted resolutions to its Electronic Drug Formulary Prior Authorization System, which will take effect Sept. 1. The system will be accessible via the website through the medical portal. Among the changes:

- Providers will be allowed to request prior authorization from payers for medications that deviate from the Drug Formulary
- A dashboard feature will be available to enable users to track and respond to submitted requests
- The system will include an administrative feature where user's access, role and contact information may be maintained and updated
- Payers must access the online application and enter required information which will be used by the Formulary Prior Authorization system to automatically route provider requests to the payer-designated contact
- The PBM must register and identify their users, using the online registration process that is currently being developed by the Board. If contacts are not updated, penalties may be enforced.

The **Division of Workers' Compensation** has combined the health care provider and claims coverage systems (TXCOMP) on Aug. 19. This change is designed to consolidate the DWC's enterprise systems. Users will also be able to report injuries, locate covered employers, locate insurance carriers, access DWC forms, and file information online.

Gov. Abbott signed HB 2174 into law. The new regulation, which became effective Aug. 1, limits opioid prescriptions to a 10-day supply for acute pain with no refill option.

WASHINGTON

The **Department of Labor and Industries** has adopted new rule WAC 296-15-232 that will make medical data reporting mandatory for all self-insurers. The law will take effect Jan. 1, 2020.



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