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Workers' Comp Industry & Regulatory Update



January 2012 News

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Industry News:

FDA Issues Draft Off-Label Information Guidelines

The US Food and Drug Administration (FDA) today issued draft guidelines that would permit drug and device makers to provide information on off-label uses, but only if the request for information is unsolicited, which is defined as "not initiated in any form by the drug or device maker or distributor itself." The FDA acknowledges that off-label uses "may be important therapeutic options and may even constitute a medically recognized standard of care." The article also lists a number of FDA recommendations guiding firms on appropriate responses "to nonpublic unsolicited requests."

<http://www.medscape.com/viewarticle/756103>

WCRI Released Study on Hospital Outpatient Costs

The Workers Compensation Research Institute (WCRI) released a study that provides policymakers and other stakeholders with a tool to identify and better understand hospital costs. The study shows states without fee schedules have higher hospital outpatient/Ambulatory Surgical Center (ASC) costs for common surgeries compared to states with fee schedules. The costs in states without fee schedules were 27 percent to 73 percent higher than the median of the study states with fee schedules.

<http://www.workcompwire.com/2012/01/wcri-study-shows-hospital-outpatient-costs-higher-in-states-without-fee-schedules>

Updates on the following states:

Alaska

Rules 8 AAC 45.086 and 45.900

The Alaska Department of Labor and Workforce Development revised the rules, effective 12/22/11. A provider who renders medical or dental services must serve a report on the employer no later than 14 days after each service instead of completing form 07-6102 (Physician's Report). The employer must file a physician's report with the Board and serve a copy to the employee and the reemployment benefits administrator (if involved in reemployment benefits) after a workers' comp claim has been filed.

Idaho

Rule 17.02.090.32

The rule was adopted by the Idaho Industrial Commission, regarding acceptable charges for medical services provided by Hospitals and Ambulatory Surgery Centers. The rule became effective 1/1/12. The major impact of this law are the changes to the standards used to determine the acceptable charges for hospitals and Ambulatory Surgery Centers.

Michigan

House Bill 5002

This bill adds new law regarding compensable injuries and determination of wage earning capacity. The bill was adopted on 12/19/11. It applies to injuries occurring on or after 12/19/11. The bill primarily impacts vocational and medical case management services.

South Carolina

Pharmacy Fee Schedule Amended

The South Carolina Workers' Compensation Commission approved amending the Pharmacy Fee Schedule at the Business Meeting on 12/19/11. The amended language was recommended by the Pharmacy Fee Schedule Advisory Committee. The revised Pharmacy Fee Schedule is effective for all workers' compensation claims occurring on or after 12/19/11.

<http://www.wcc.sc.gov/Documents/What%27s%20New/Committees/Pharmacy%20Fee%20Schedule%20Adv%20Committee/2011%20Dec%2019%20Commission%20Approves%20Pharma%20Recommendation%20Notice.pdf>

South Dakota

Rules 47:03:04, 47:03:05, and 47:03:06

The rules address changes to the filing deadline for renewal of case management plan (CMP) certifications, simplify Medical Fee Schedule, and repeals Optimal Recovery Guidelines. These rules were adopted and became effective 12/12/11.

Note: This information is neither intended to be all-inclusive for

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