

State of California
Department of Industrial Relations
DIVISION OF WORKERS' COMPENSATION



Order of the Administrative Director of the Division of Workers' Compensation
(OMFS Update for Outpatient Hospital and Ambulatory Surgical Center (ASC) Services
Effective September 1, 2012)

Pursuant to Labor Code section 5307.1(g)(2), the Administrative Director of the Division of Workers' Compensation orders that Title 8, California Code of Regulations, sections 9789.30 and 9789.31, pertaining to Hospital Outpatient Departments and Ambulatory Surgical Centers Fee Schedule in the Official Medical Fee Schedule, is amended to conform to CMS' hospital outpatient prospective payment system (HOPPS) correction of the final rule (CMS-1525-FC) and correction notice (CMS-1525-CN) published in the Federal Register on April 24, 2012 (CMS-1525-CN2, 77 FR 24409).

For services rendered on or after September 1, 2012, section 9789.30, subsections (e) "APC payment rate" and (f) "APC relative weight" are amended to conform to CMS' hospital outpatient prospective payment system (HOPPS) correction of the final rule (CMS-1525-FC) and correction notice (CMS-1525-CN) published in the Federal Register on April 24, 2012 (CMS-1525-CN2).

For services rendered on or after September 1, 2012, section 9789.31, subsection (a) is amended to incorporate by reference CMS' hospital outpatient prospective payment system (HOPPS) correction of the final rule (CMS-1525-FC) and correction notice (CMS-1525-CN) published in the Federal Register on April 24, 2012 (CMS-1525-CN2).

Pursuant to Labor Code section 5307.1(g)(2), the Administrative Director of the Division of Workers' Compensation orders that to the extent references to the Federal Register or Code of Federal Regulations are made in any sections starting from section 9789.30 through 9789.38 of Title 8 of the California Code of Regulations, said section is hereby amended to incorporate by reference the applicable Federal Register final rule (including additional notices, correction notices, and revisions) and Federal Regulations in effect as of the date this Order becomes effective, to be applied to services rendered on or after September 1, 2012. In particular, to the extent a section makes reference to the CMS hospital outpatient prospective payment system final rule, said section is amended to incorporate by reference the final rule published on November 30, 2011 in the Federal Register (Vol. 76 FR 74122) and is entitled "Medicare and Medicaid Programs: Hospital Outpatient Prospective Payment; Ambulatory Surgical Center Payment; Hospital Value-Based Purchasing Program; Physician Self-Referral; and Patient Notification Requirements in Provider Agreements" (CMS-1525-FC); correction of the final rule published on January 4, 2012 in the Federal Register (Vol. 77 FR 217) and is entitled "Medicare and Medicaid Programs: Hospital Outpatient Prospective Payment; Ambulatory Surgical Center Payment; Hospital Value-Based Purchasing Program; Physician Self-Referral; and Patient Notification Requirements in Provider Agreements; Corrections"

(CMS-1525-CN); and correction of the final rule and correction notice published on April 24, 2012 in the Federal Register (Vol. 77 FR 24409) and is entitled “Medicare and Medicaid Programs: Hospital Outpatient Prospective Payment; Ambulatory Surgical Center Payment; Hospital Value-Based Purchasing Program; Physician Self-Referral; and Patient Notification Requirements in Provider Agreements; Corrections” (CMS-1525-CN2). To the extent a section makes reference to the CMS hospital inpatient prospective payment system final rule wage index values, said section is amended to incorporate by reference the final rule published on August 18, 2011 in the Federal Register (Vol. 76 FR 51476) and is entitled “Medicare Program; Hospital Inpatient Prospective Payment Systems for Acute Care Hospitals and the Long-Term Care Hospital Prospective Payment System and FY2012 Rates; Hospitals’ FTE Resident Caps for Graduate Medical Education Payment” (CMS-1518-F); and correction to the final rule published on September 26, 2011, in the Federal Register (Vol. 76 FR 59263), and is entitled “Medicare Program; Hospital Inpatient Prospective Payment Systems for Acute Care Hospitals and the Long-Term Care Hospital Prospective Payment System and Fiscal Year 2012 Rates; Hospitals’ FTE Resident Caps for Graduate Medical Education Payment; Corrections” (CMS-1518-CN3).

The effective date of these amendments are for visits and procedures described in section 9789.32 rendered on or after September 1, 2012. This Order and the amended sections 9789.30 and 9789.31 shall be published on the website for the Division of Workers’ Compensation: <http://www.dir.ca.gov/DWC/OMFS9904.htm>

IT IS SO ORDERED.

Dated: August 27, 2012

ORIGINAL ORDER SIGNED _____
ROSA MORAN
Administrative Director of the
Division of Workers’ Compensation