

2025 Regular Session

SENATE BILL NO. 213

BY SENATOR SEABAUGH

Prefiled pursuant to Article III, Section 2(A)(4)(b)(i) of the Constitution of Louisiana.

WORKERS' COMPENSATION. Provides for preliminary determination hearings in workers' compensation. (1/1/27)

1 AN ACT
2 To amend and reenact R.S. 23:1034.2, relative to workers' compensation; to provide relative
3 to the reimbursement schedule of certain medical charges in workers' compensation
4 claims; to provide relative to the duties and responsibilities of the assistant secretary;
5 to provide relative to the appointment and qualifications of a reimbursement hearing
6 officer; to provide relative to appeals; to provide relative to fee disputes; to provide
7 for effective date; and to provide for related matters.

8 Be it enacted by the Legislature of Louisiana:
9 Section 1. R.S. 23:1034.2 is hereby amended and reenacted to read as follows:

10 §1034.2. Reimbursement schedule
11 A. The assistant secretary of the office of workers' compensation
12 administration shall establish and promulgate a reimbursement schedule for drugs,
13 supplies, hospital care and services, medical and surgical treatment, and any
14 nonmedical treatment recognized by the laws of this state as legal and due under the
15 Workers' Compensation Act ~~Law~~ and applicable to any person or corporation who
16 renders such care, services, or treatment or provides such drugs or supplies to any
17 person covered by Chapter 10 of Title 23 of the Louisiana Revised Statutes of 1950.

1 B. The assistant secretary shall adopt, in accordance with the Administrative
 2 Procedure Act, rules and regulations necessary to establish and implement a
 3 reimbursement schedule for such care, services, treatment, drugs, and supplies. The
 4 reimbursement schedule shall be updated no less than once every two years in
 5 accordance with the legislative purposes set forth in R.S. 23:1020.1 and this
 6 Section, and shall include:

7 (1) The amount of reimbursement due for such care, services, treatment,
 8 drugs, and supplies, in accordance with Subsection C of this Section.

9 (2) Uniform coding and billing terms, processes, rules, and forms
 10 consistent with nationally accepted standards.

11 (3) The process and procedures for resolving disputes concerning the
 12 amount of reimbursement due under this Section.

13 C.(1) The reimbursement schedule ~~shall include charges limited to the mean~~
 14 ~~of the usual and customary charges~~ shall provide for payment for such care,
 15 services, treatment, drugs, and supplies: in accordance with the following: ~~Any~~
 16 ~~necessary adjustments to the reimbursement schedule adopted and established in~~
 17 ~~accordance with the provisions of this Section may be made annually.~~

18 (a) Professional service charges for care, services, treatment, drugs, and
 19 supplies for which a current procedural terminology (CPT) code is assigned
 20 shall be reimbursed based on the applicable Relative Value Units (RVU)
 21 established under the Resource-Based Relative Value Scale System, adjusted by
 22 the highest Louisiana geographic practice cost index (GPCI), and multiplied by
 23 the following conversion factors:

24 i. Evaluation and Management – 58.

25 ii. Surgery Services – 72.5.

26 iii. Radiology – 66.

27 iv. Pathology – 66.

28 v. Lab – 63.5.

29 vi. General Medicine – 58.25.

1 vii. Physical Medicine – 58.25.

2 viii. Anesthesia – 55.

3 ix. If there is no applicable RVU for a specific professional service
4 charge, the assistant secretary shall establish reimbursement not less than the
5 seventieth percentile and not greater than the ninetieth percentile for
6 reimbursement paid by group health insurance in Louisiana for the same or
7 similar care. For anesthesia CPT codes without an RVU, the total anesthesia
8 reimbursement shall be calculated by adding the basic value units, time value
9 units, plus any applicable modifier unit values and unusual qualifying
10 circumstances and multiplying the sum by a dollar amount per unit. The dollar
11 amount per unit shall be fifty-five dollars.

12 x. The conversion factors provided in Subparagraph (a) of this
13 Paragraph may be updated by the assistant secretary in accordance with
14 Subsection B and Paragraph (C)(2) of this Section.

15 (b) Reimbursement of facility charges for drugs, supplies, hospital care
16 and services, medical and surgical treatment, and any nonmedical treatment
17 recognized by the laws of this state as legal and due under this Chapter, whether
18 inpatient or outpatient, and whether provided by a hospital, ambulatory
19 surgical center, or other facility, shall be established at a rate not to exceed the
20 mean of the charges for a minimum of thirty facilities in Louisiana providing
21 the same or similar care.

22 (c) For drugs, supplies, hospital care and services, medical and surgical
23 treatment, and any nonmedical treatment recognized by the laws of this state
24 as legal and due under the Workers' Compensation Law, reimbursement for
25 which is not provided in Subparagraphs (C)(1)(a) or (C)(1)(b) the assistant
26 secretary shall establish reimbursement not less than the seventieth percentile
27 and not greater than the ninetieth percentile for reimbursement paid by group
28 health insurance in Louisiana for the same or similar care.

29 (2) The assistant secretary shall ~~have the authority to collect the~~ issue a call

1 **for** information and data necessary to calculate **and update** the reimbursement
2 schedule **not less than once every two years**. The collection of information and data
3 shall be **managed by the office of workers' compensation administration and**
4 governed by the following guidelines:

5 (a) ~~The assistant secretary shall create a written survey detailing the~~
6 ~~information requested.~~ **The data and information call shall be directed to any**
7 **association, corporation, or individual representing professional healthcare**
8 **providers or healthcare facilities licensed in this state and providing drugs,**
9 **supplies, hospital care and services, medical and surgical treatment, and any**
10 **nonmedical treatment recognized by the laws of this state as legal and due**
11 **under workers' compensation, and may include insurers, self-insured**
12 **employers, self-insured associations, and other information sources at the**
13 **discretion of the assistant secretary.**

14 (b) ~~The survey shall be managed by the office of workers' compensation~~
15 ~~administration in conjunction with an academic institution.~~ **The requested data and**
16 **information may include charge master data of healthcare providers required**
17 **to be posted publicly by federal transparency laws.**

18 (c) The information requested shall be based upon data at least six months
19 ~~old,~~ **but no more than three years old.**

20 (d) ~~There shall be a minimum of thirty health care providers reporting data~~
21 ~~upon which each disseminated statistic is based.~~ **The assistant secretary may retain**
22 **and consult with qualified individuals or organizations with expertise in data**
23 **analytics and medical billing for purposes of the data and information call, and**
24 **establishing, promulgating, and updating the reimbursement schedule.**

25 (e) ~~No individual health care provider's data shall represent more than~~
26 ~~twenty-five percent on a weighted basis of each statistic.~~

27 (fe) Any information **or data** disseminated shall be sufficiently aggregated
28 such that it will not allow recipients to identify the prices charged or compensation
29 paid by **or to** any particular health care provider **or payor.**

1 (3) All information collected pursuant to this Subsection shall be confidential
2 and privileged, shall not be public record, and shall not be subject to subpoena. Such
3 confidentiality shall be strictly maintained by the assistant secretary, all employees
4 of the office, and by ~~the academic institution~~ **any consultant retained by the**
5 **assistant secretary pursuant to the authority provided under this Section or R.S.**
6 **23:1291**, and shall be used exclusively for the purpose of promulgating the workers'
7 compensation reimbursement schedule. Whoever violates this Paragraph shall be
8 guilty of a misdemeanor and fined not more than five hundred dollars for each
9 offense.

10 (4) Notwithstanding any other provisions of this Section, reimbursement for
11 **any** dental services shall not exceed the seventieth percentile in the current edition
12 of the National Dental Advisory Service (NDAS) Comprehensive Fee Report,
13 utilizing the average of geographic multipliers for Louisiana as published in the
14 NDAS report.

15 D. Fees in excess of the reimbursement schedule shall not be recoverable
16 against the employee, employer, or workers' compensation insurer **unless the excess**
17 **fee is agreed upon by the payor and the health care provider in writing prior to**
18 **the care, services, treatment, drugs, or supplies being provided.**

19 E. Nothing in this Section shall prevent a health care provider from charging
20 a fee for such care, services, treatment, drugs, or supplies that is less than the
21 reimbursement established by the reimbursement schedule, **provided that such**
22 **reduced fee is agreed upon between the healthcare provider and the payor in**
23 **writing prior to the care, services, treatment, drugs, or supplies being provided,**
24 **or pursuant to a negotiated compromise agreement.**

25 F.(1) Should a dispute arise **regarding billing, payment, explanation of**
26 **medical benefits, reconsideration, or amount owed pursuant to this Section**
27 between a health care provider and the employee, employer, or workers'
28 compensation insurer, ~~either~~ **the disputing party may shall** submit the dispute to the
29 office ~~in the same manner and subject to the same procedures as established for~~

1 ~~dispute resolution of claims for workers' compensation benefits~~ of workers'
2 compensation administration's medical services section on a form promulgated
3 by the assistant secretary.

4 (2) Disputes regarding billing, explanation of benefits, and
5 reconsideration shall be resolved by the medical services section in accordance
6 with administrative rules and regulations adopted by the assistant secretary
7 pursuant to the Administrative Procedures Act. Following the decision from the
8 medical services section, any remaining dispute concerning the amount of
9 reimbursement due under this Section shall be decided by an independent
10 medical bill reviewer as provided in Paragraph (3) of this Subsection. A dispute
11 regarding the amount due under this Section shall be premature unless the
12 parties have completed a reconsideration process as required by rule, which
13 shall allow a request for reconsideration immediately upon receipt of the
14 explanation of medical benefits and require a response by the employer or
15 workers' compensation insurer within fifteen days of receipt of the written
16 reconsideration request. A dispute regarding payment or amount owed shall be
17 decided by an independent medical billing reviewer randomly appointed by the
18 medical services section.

19 (23) In addition to any other occasion when consolidation of claims is
20 otherwise allowed by applicable law, whenever multiple disputes exist between a
21 single health care provider and a single "payor" as defined in R.S. 23:1142(A)
22 concerning the proper amount payable pursuant to the reimbursement schedule, then
23 either the health care provider or the payor shall have the right to have all such
24 disputes between the payor and the health care provider consolidated, ~~and tried~~
25 ~~together. The venue for such consolidated claims shall be in either the workers'~~
26 ~~compensation district of the parish in which the domicile of the provider is located~~
27 ~~or the workers' compensation district of the parish in which the domicile of the payor~~
28 ~~or employer is located.~~

29 (a) The assistant secretary shall publish a list of independent medical

1 billing reviewers with appropriate certification, education and training as
2 provided by rule who shall review the records submitted by the parties. The
3 employer or workers' compensation insurer shall pay the cost as provided by
4 rule to the independent medical bill reviewer within five business days of
5 appointment, subject to allocation of cost as provided in Subparagraph (b) of
6 this Paragraph.

7 (b)The independent medical bill reviewer shall issue a decision specifying
8 the proper reimbursement due under the reimbursement schedule, and
9 allocating the cost of the review already paid by the employer or workers'
10 compensation insurer between the parties.

11 (c)(i) Any party aggrieved by the independent medical bill reviewer shall
12 file an appeal with the office of medical services reimbursement hearing officer
13 within thirty days after the issuance of the decision.

14 (ii) Within thirty days after the appeal is filed under Subsubparagraph
15 (i) of this Subparagraph, the reimbursement hearing officer shall issue a
16 decision upholding, overturning, or modifying the decision. The decision of the
17 independent medical billing reviewer maybe overturned or modified only upon
18 a showing of clear factual error or legal error in violation of this Section.

19 (iii) Any aggrieved party may appeal the reimbursement hearing
20 officer's decision to the First Circuit Court of Appeal.

21 (4)(a) There is hereby created in the unclassified civil service the position
22 of reimbursement hearing officer, comprised of at least one hearing officer
23 within the office of workers' compensation administration medical services
24 section.

25 (b) A reimbursement hearing officer shall have no less than ten years of
26 experience in the field of medical coding and billing, and shall be appointed by
27 and serve at the will of the assistant secretary of the office of workers'
28 compensation.

29 (5) Any amounts due pursuant to the decision of the independent medical

1 bill review or hearing officer shall be paid within ten business days of receipt of
2 the final decision.

3 (6) An employer or workers' compensation insurer that makes a partial
4 payment of medical benefits and provides a written explanation of medical
5 benefits within forty-five days after the employer or insurer receives a complete
6 written bill and medical records as required by rule, or thirty days after the
7 employer or insurer receives a complete electronic medical bill and records as
8 required by rule, and also follows the provisions of this Subsection, shall not be
9 subject to penalties and attorney fees as provided in R.S. 23:1201.

10 (7) The assistant secretary shall publish, at least annually, data and
11 statistics regarding the disputes filed and the decisions rendered pursuant to
12 this Section. The data and statistics shall list the names of the parties involved.

13 (8) The assistant secretary shall have the authority to adopt reasonable
14 rules and procedures necessary to implement this Subsection, in accordance
15 with the Administrative Procedure Act and consistent with this Chapter.

16 G.(1) The reimbursement schedule authorized under this Section shall
17 become effective January 1, 2027, and shall apply to any charges incurred
18 under this Chapter on or after that date. Notwithstanding this Subsection, in no
19 event shall any single Subsection become effective prior to implementation of
20 the entire reimbursement schedule authorized under Subsection C.

21 (2) Charges incurred under this Chapter prior to January 1, 2027, shall
22 be reimbursed pursuant to the law in effect on the date the charges were
23 incurred.

24 Section 2. The provisions of this Act shall become effective January 1, 2027.

The original instrument and the following digest, which constitutes no part of the legislative instrument, were prepared by Senate Legislative Services. The keyword, summary, and digest do not constitute part of the law or proof or indicia of legislative intent. [R.S. 1:13(B) and 24:177(E)]

DIGEST

SB 213 Original 2025 Regular Session Seabaugh

Present law authorizes the assistant secretary of the office of workers' compensation administration to establish and promulgate a reimbursement schedule for drugs, supplies, hospital care and services, medical and surgical treatment, and any nonmedical treatment recognized by the laws of this state as legal and due under the Workers' Compensation Act and applicable to any person or corporation who renders such care, services, or treatment or provides such drugs or supplies to any person covered by present law relative to workers' compensation.

Proposed law retains present law and makes technical changes by renaming the "Workers' Compensation Act", to "Workers' Compensation Law".

Proposed law requires the reimbursement schedule to be updated no less than once every two years.

Present law provides that the reimbursement schedule will include charges limited to the mean of the usual and customary charges for such care, services, treatment, drugs, and supplies.

Proposed law provides that the reimbursement schedule will provide for payment for such care, services, treatment, drugs, and supplies in accordance with professional service charges for care, services, treatment, drugs, and supplies for which a current procedural terminology code is assigned will be reimbursed based on the applicable (RVU) established under the resource-based relative value scale system, adjusted by the highest Louisiana (GPCI) and multiplied by the following conversion factors:

- (1) Evaluation and Management - 58
- (2) Surgery Services - 72.5
- (3) Radiology - 66
- (4) Pathology - 66
- (5) Lab - 63.5
- (6) General Medicine - 58.25
- (7) Physical Medicine - 58.25
- (8) Anesthesia - 55

Present law provides that reimbursement for dental services cannot exceed the 70th percentile in the current edition of the National Dental Advisory Service (NDAS) Comprehensive Fee Report, utilizing the average of geographic multipliers for Louisiana as published in the NDAS report.

Proposed law retains present law.

Proposed law creates the unclassified civil service reimbursement hearing officer position.

Proposed law allows an aggrieved party to file an appeal with the office of the medical services' reimbursement hearing officer within 30 days after the issuance of the decision.

Proposed law allows the reimbursement hearing officer's decision to be appealed to the First Circuit Court of Appeals.

Effective January 1, 2027.

(Amends R.S. 23:1034.2)