#### DWC-06-0021

### SUBCHAPTER A. General Rules for Required Reports §§133.1 and 133.2

SUBCHAPTER B. Required Reports §§133.100, 133.104 - 133.106

### SUBCHAPTER D. Dispute and Audit of Bills by Insurance Carrier §§133.300 - 133.304

### SUBCHAPTER E: Compelling Production of Documents §§133.401 - 133.403

The Texas Department of Insurance, Division of Workers' Compensation adopts the repeal of §§133.1, 133.2, 133.100, 133.104 - 133.106, 133.300 - 133.304, and 133.401 - 133.403 concerning medical billing and processing, and production of documents. The repeal is adopted as published in the February 10, 2006 issue of the *Texas Register* (31 TexReg 796).

The repeal of these sections is necessary for the Division to adopt an extensive reorganization of Chapter 133, and Chapter 134 to eliminate redundancies in existing rules and clarify medical billing and processing procedures. This reorganization includes the repeal of current medical billing, processing and reimbursement rules in Chapters 133 and replacement with clarified and reorganized rules which incorporate requirements of House Bill (HB) 7, enacted during the 79<sup>th</sup> Texas Legislature, Regular Session, effective September 1, 2005.

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### TITLE 28. INSURANCE Part 2. Texas Department of Insurance, Division of Workers Compensation Chapter 133. Medical Billing and Processing

The Division simultaneously adopts new §§133.1, 133.2, 133.3, 133.10, 133.20, 133.200, 133.210, 133.230, 133.240, 133.250, 133.260, 133.270, and 133.280, published elsewhere in this issue of the Texas Register, concerning medical billing and processing, including new medical billing timeframes. The new rules are necessary to implement, on a permanent basis, portions of House Bill (HB) 7, enacted during the 79<sup>th</sup> Texas Legislature, Regular Session, effective September 1, 2005. The adopted rules will permit compliance with statutory changes to the Labor Code §408.027 and new §408.0271, and also provide billing and processing direction for participants in a workers' compensation health care network established under Insurance Code Chapter 1305. This adoption also organizes the rules regarding medical billing and processing to clarify and streamline the process. This will enable system participants to easily access specific portions of the medical billing rules, which are logically organized and follow the billing and reimbursement process. The adopted rules minimize micro-management of the process by providing guidance and direction rather than specific, detailed instructions that required adherence. This will allow system participants more flexibility in developing their medical billing and bill review processes. In addition, the new rules rely on the statutorily required Medicare reimbursement structures, incorporate concepts from TDI managed care rules, and eliminate many of the duplicative Division instructions thus providing consistency and standardization for workers' compensation system benefits with other health care delivery systems.

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No comments were received.

The repeals are adopted under the Labor Code §§408.027, 408.0271, 402.00111 and 402.061. Section 408.027 provides that a carrier may request additional documentation to clarify a provider's charges at any time during the 45-day period. Section 408.0271 permits carriers to request refunds when health care services provided to an injured employee are determined by the carrier to be inappropriate. Section 402.00111 provides that the Commissioner of Workers' Compensation shall exercise all executive authority, including rulemaking authority, under the Labor Code. Section 402.061 provides the Commissioner the authority to adopt rules as necessary to implement and enforce the Texas Workers' Compensation Act.

# SUBCHAPTER A. General Rules for Required Reports

§133.1. Definitions for Chapter 133 - Benefits--Medical Benefits.

§133.2. Sharing Medical Reports and Test Results.

The repeals are adopted under the Labor Code §§408.027, 408.0271, 402.00111 and 402.061. Section 408.027 provides that a carrier may request additional documentation to clarify a provider's charges at any time during the 45-day period. Section 408.0271 permits carriers to request refunds when health care services provided to an injured employee are determined by the carrier to be inappropriate.

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TITLE 28. INSURANCE Part 2. Texas Department of Insurance, Division of Workers Compensation Chapter 133. Medical Billing and Processing

Section 402.00111 provides that the Commissioner of Workers' Compensation shall exercise all executive authority, including rulemaking authority, under the Labor Code. Section 402.061 provides the Commissioner the authority to adopt rules as necessary to implement and enforce the Texas Workers' Compensation Act.

# SUBCHAPTER B. Required Reports

- §133.100. Required Medical Reports.
- §133.104. Consultant Medical Reports.
- §133.105. Physical or Occupational Therapy Report.
- §133.106. Fair and Reasonable Fees for Required Reports and Records.

The repeals are adopted under the Labor Code §§408.027, 408.0271, 402.00111 and 402.061. Section 408.027 provides that a carrier may request additional documentation to clarify a provider's charges at any time during the 45-day period. Section 408.0271 permits carriers to request refunds when health care services provided to an injured employee are determined by the carrier to be inappropriate. Section 402.00111 provides that the Commissioner of Workers' Compensation shall exercise all executive authority, including rulemaking authority, under the Labor Code. Section 402.061 provides the Commissioner the authority to adopt rules as necessary to implement and enforce the Texas Workers' Compensation Act. SUBCHAPTER D. Dispute and Audit of Bills by Insurance Carriers

- §133.300. Insurance Carrier Receipt of Medical Bills from Health Care Providers.
- §133.301. Retrospective Review of Medical Bills.
- §133.302. Preparation for an Onsite Audit.
- §133.303. Onsite Audits.
- §133.304. Medical Payments and Denials.

The repeals are adopted under the Labor Code §§408.027, 408.0271, 402.00111 and 402.061. Section 408.027 provides that a carrier may request additional documentation to clarify a provider's charges at any time during the 45-day period. Section 408.0271 permits carriers to request refunds when health care services provided to an injured employee are determined by the carrier to be inappropriate. Section 402.00111 provides that the Commissioner of Workers' Compensation shall exercise all executive authority, including rulemaking authority, under the Labor Code. Section 402.061 provides the Commissioner the authority to adopt rules as necessary to implement and enforce the Texas Workers' Compensation Act.

# SUBCHAPTER E: Compelling Production of Documents

- §133.401. Orders for Production of Documents.
- §133.402. Delivery of Order; Compliance.
- §133.403 Noncompliance; Enforcement.