



## Texas Department of Insurance

Division of Workers' Compensation, Office of the Commissioner

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### COMMISSIONER'S BULLETIN NO. B-0048-09

November 6, 2009

**TO: Workers' Compensation System Participants**

**RE: Changes to Conversion Factors for Workers' Compensation Medical Fee Guidelines**

**28 TAC §134.203 Medical Fee Guidelines for Professional Services**

**Chapter 134 – Benefits – Guidelines for Medical Services, Charges and Payments**

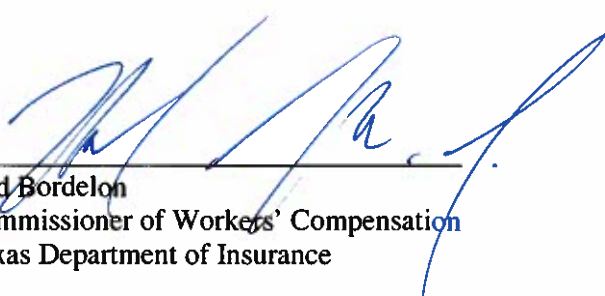
**Subchapter C. Medical Fee Guidelines**

The purpose of this bulletin is to inform system participants of the annual change to the Medical Fee Guideline conversion factors as established in 28 Texas Administrative Code (TAC) §134.203. As directed by Texas Labor Code §413.011(a), fee guidelines adopted by the Texas Department of Insurance, Division of Workers' Compensation (TDI-DWC) for non-network services are based on the most current reimbursement methodologies, models, and values or weights used by the Federal Centers for Medicare and Medicaid Services (CMS).

In order to provide predictability and reflect changes in medical service delivery costs to system participants, TDI-DWC established a conversion factor and an annual update as a part of 28 TAC §134.203. The annual update is based on the Medicare Economic Index (MEI), which is a weighted average of price changes for goods and services used to deliver physician services. The MEI for 2010 reflects an increase of 1.2%. The following CMS link provides further detail regarding the MEI: <http://www.cms.hhs.gov/PhysicianFeeSched/PFSFRN/itemdetail.asp?filterType=none&filterByDID=-99&sortByDID=4&sortOrder=descending&itemID=CMS1230135&intNumPerPage=10>, select *CMS-1413-FC* and see section *V. Physician Fee Schedule Update for CY 2010, B. The Percentage Change in the Medicare Economic Index (MEI)* page 1,068 for specific information on the 2010 MEI.

Consequently, for services provided as of January 1, 2010, for calendar year 2010, the new Medical Fee Guideline conversion factors in 28 TAC §134.203(c) are \$54.32 and \$68.19 respectively. The conversion factor of \$54.32 applies to service categories of Evaluation & Management, General Medicine, Physical Medicine and Rehabilitation, Radiology, Pathology, Anesthesia, and Surgery when performed in an office setting. The conversion factor of \$68.19 applies to Surgery when performed in a facility setting.

If there are any questions regarding the information in this bulletin, please call the toll-free *Comp Connection for Health Care Providers* at 1-800-372-7713 or in the Austin area dial 512-804-4000.

  
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Commissioner of Workers' Compensation  
Texas Department of Insurance