RESPONSE TO PUBLIC COMMENT
2015 FEE SCHEDULE

The proposed changes to the WCA Healthcare Provider Fee Schedule were released for public comment on October 20, 2014. The public comment period was from October 20, 2014 through November 19, 2014. The WCA accepted comment at a public hearing on November 6, 2014 and in writing.

The WCA received public comment recommending it increase payment rates for certain EMG codes. The commenter recommended increased rates for the following CPT codes: 99201, $72.05; 99202, $125.20; 99203, $182.40; 99204, $281.73; 99205, $351.56; 99211, $33.25; 99212, $73.08; 99213, $123.10; 99214, $181.95; 99215, $244.09; 99241, $103.00; 99242, $168.00; 99243, $244.00; 99244, $315.00; and 99245, $365.00.
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Response: After careful consideration, the WCA has opted not to adopt the recommended rates for the CPT codes specified. The WCA does not have local data, a rational or methodology to adequately evaluate and support the recommended increases at this time. These CPT codes will be revisited in the future.

The WCA received public comment recommending it assign “BR” or “By Report” to two CPT codes (99455 and 99456) instead of a fixed fee due to the wide range of services provided under these codes.

Response: After careful consideration, the WCA has opted to adopt the recommended “BR” status for these CPT codes.

The WCA received public comment recommending it assign “BR” or “By Report” the CPT code 99075, and increase the rate for CPT code 99080 above $45.00.

Response: After careful consideration, the WCA has opted to assign “BR” or “By Report” to CPT code 99075. The agency will study the merits of a fixed fee for CPT code 99080 and will revisit changes in July 2015.

The WCA received public comment recommending it review the methodologies for “Hospital Assigned Ratio” and “Fee Schedule” in relation to “Fee for Service” versus “Fixed Payment” and the Affordable Health Care Act (ACA).

Response: After careful consideration, the WCA has decided to continue agency studies on these issues, with input from all affected parties in the state, and make recommendations in the future.

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