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, section 9789.31 pertaining to Hospital Outpatient Departments and Ambulatory Surgical Centers Fee Schedule in the Official Medical Fee Schedule, is adjusted to conform to the Centers for Medicare and Medicaid Services’ (CMS) 2008 hospital outpatient prospective payment system (HOPPS) correction to the final rule of November 27, 2007, published on February 22, 2008, in the Federal Register, Vol. 73, No. 36, FR 9860, entitled, “Medicare Program; Changes to the Hospital Outpatient Prospective Payment System and CY 2008 Payment Rates, the Ambulatory Surgical Center Payment System and CY 2008 Payment Rates, the Hospital Inpatient Prospective Payment System and FY 2008 Payment Rates; and Payments for Graduate Medical Education for Affiliated Teaching Hospitals in Certain Emergency Situations Medicare and Medicaid Programs: Hospital Conditions of Participation; Necessary Provider Designations of Critical Access Hospitals; Correction” (CMS-1392-CN, CMS-1533-CN, and CMS-1531-CN). This CMS correction notice fixes technical errors that appeared in the CMS final rule published in the Federal Register on November 27, 2007. The Administrative Director of the Division of Workers’ Compensation further orders that the effective date of the adjustment to 8 CCR section 9789.31 will be for visits and procedures described in section 9789.32 rendered on or after March 1, 2008, and this adjustment supersedes the adjustment to 8 CCR section 9789.31 made by the Order of the Administrative Director dated January 24, 2008.

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 March 1, 2008. 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 27, 2007 in the Federal Register (Vol. 72 FR 66580) and is entitled "Medicare Program: Changes to the Hospital Outpatient Prospective Payment System and CY 2008 Payment Rates, the Ambulatory Surgical Center Payment System and CY 2008 Payment Rates, the Hospital Inpatient Prospective Payment System and FY 2008 Payment Rates; and Payments for Graduate Medical Education for Affiliated Teaching Hospitals in Certain Emergency Situations Medicare and Medicaid Programs: Hospital Conditions of Participation; Necessary Provider Designations of Critical Access Hospitals; Correction.”
Hospitals” (CMS-1392-FC, CMS-1533-F2, and CMS-1531-IFC2), and correction notice to the final rule published on February 22, 2008, in the Federal Register (Vol. 73 FR 9860) and is entitled “Medicare Program: Changes to the Hospital Outpatient Prospective Payment System and CY 2008 Payment Rates, the Ambulatory Surgical Center Payment System and CY 2008 Payment Rates, the Hospital Inpatient Prospective Payment System and FY 2008 Payment Rates; and Payments for Graduate Medical Education for Affiliated Teaching Hospitals in Certain Emergency Situations Medicare and Medicaid Programs: Hospital Conditions of Participation; Necessary Provider Designations of Critical Access Hospitals; Correction” (CMS-1392-CN, CMS-1533-CN, and CMS-1531-CN). 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 22, 2007 in the Federal Register (Vol. 72 FR 47130) and is entitled “Medicare Program; Changes to the Hospital Inpatient Prospective Payment Systems and Fiscal Year 2008 Rates; Final Rule” (CMS-1533-FC). A correction to the hospital inpatient prospective payment systems final rule was published on October 10, 2007, in the Federal Register (Vol. 72 FR 57634), and is entitled “Medicare Program; Changes to the Hospital Inpatient Prospective Payment Systems and Fiscal Year 2008 Rates; Correction; Final Rule” (CMS-1533-CN2). A second correction to the hospital inpatient prospective payment systems final rule was published on November 6, 2007, in the Federal Register (Vol. 72 FR 62585), and is entitled “Medicare Program; Changes to the Hospital Inpatient Prospective Payment Systems and Fiscal Year 2008 Rates; Correction” (CMS-1533-CN3). A notice to the hospital inpatient prospective payment systems final rule was published on November 27, 2007 in the Federal Register (Vol. 72, No. 227, FR 66580), entitled, “Medicare Program; Changes to the Hospital Outpatient Prospective Payment System and CY 2008 Payment Rates, the Ambulatory Surgical Center Payment System and CY 2008 Payment Rates, the Hospital Inpatient Prospective Payment System and FY 2008 Payment Rates; and Payments for Graduate Medical Education for Affiliated Teaching Hospitals in Certain Emergency Situations Medicare and Medicaid Programs; Hospital Conditions of Participation; Necessary Provider Designations of Critical Access Hospitals” (CMS-1392-FC, CMS-1533-F2, and CMS-1531-IFC2).

This Order and amended section 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: March 18, 2008

ORIGINAL SIGNED BY
CARRIE NEVANS
Administrative Director of the
Division of Workers’ Compensation