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North Carolina Industrial Commission

March 22, 2013

TO: Insurance Carriers, Self-Insured Groups & Administrators, Managed Care Organizations
FROM: Medical Fees Section, North Carolina Industrial Commission
RE: *Updates to the Hospital Fee Schedule Effective April 1, 2013*

OFFICIAL NOTICE

This Notice is to inform your organization that the North Carolina Industrial Commission has updated the Hospital and Ambulatory Surgery Fee Schedules to incorporate recent revisions to the Fees for Medical Compensation rule, 04 NCAC 10J .0101. The following change has been made and is an update to our January 30, 2013 official notice:

- **Hospitals and ambulatory surgery centers will adjust their total billed charge on each claim to reflect a charge neutralization discount. The discount neutralizes the facility's applicable overall charge increase occurring on or after July 1, 2012. The total adjusted charge will be shown in either the FL80 remarks field on the UB-04 form or on a separate attachment on the facility's letterhead. The effective date of this change is for services rendered on or after February 1, 2013.**
- **Effective for services rendered on or after April 1, 2013, the following payment rates apply to the total adjusted charge:**

Hospital outpatient	67.15%
Hospital outpatient (critical access)	73.95%
Hospital inpatient (low end cap)	67.50%
Hospital inpatient (critical access)(low end cap)	69.36%
Ambulatory surgery	67.15%

- **Implants: Effective for services rendered on or after April 1, 2013, implants will be reimbursed at 28% above the invoice cost. Implants include the following revenue codes: 0274, 0275, 0276, and 0278. Hospitals and ambulatory surgery will list the total implant costs in the FL80 remarks field or on the attachment, separately from the total adjusted charge.**

Payments made to hospitals or ambulatory surgery centers for dates of service on and after April 1, 2013 are subject to the revised maximum allowable amounts. The North Carolina Workers' Compensation Act requires each health care provider to be reimbursed the amount specified under the fee schedule unless the provider has agreed under contract to accept a different amount or reimbursement methodology. See N.C. Gen. Stat. 97-26(c).

Please ensure your organization's systems and internal processes account for the total adjusted charge in making payments to hospitals and ambulatory surgery centers to ensure compliance with 04 NCAC 10J .0101 and N.C. Gen. Stat. 97-26. The North Carolina Hospital Association (NCHA) has provided guidance on hospital and ambulatory surgery fee schedule billing for workers' compensation claims. More detailed instructions for facilities on calculating the required charge adjustment can be found at: <https://www.ncha.org/billing-guidance>.