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Provider e-News October 2012

Drug formulary changes

We've made several updates to the drug formulary as of Sept. 1. The changes below are effective Oct. 31, 2012.

- Coverage for drugs in the Proton Pump Inhibitor class will be limited to Omeprazole, Prilosec OTC® and Prevacid Solu-Tabs®. New prescriptions for any other products in this class (including generics) will not be eligible for reimbursement, including Nexium®, Dexilant®, Aciphex®, Zegerid® and Protonix®.
- Coverage for Histamine 2 receptor blockers is limited to ranitidine and famotidine. New prescriptions in this class will not be eligible for reimbursement, including cimetidine and nizatidine.
- New prescriptions for any fixed combination of non steroidal anti-inflammatory drugs/proton pump inhibitor (NSAID/PPI product (e.g., Vimovo®), NSA/H2RB (e.g., Duexis®) and NSA/ASA (e.g., Arthrotec®) will not be eligible for reimbursement.
- Effective for all claims on Sept. 1, 2012, all doses of Celebrex® greater than 400 mg per day will not be eligible for reimbursement.

You can search our [drug formulary](#) on our website or via the mobile app Epocrates. In addition, you may [email](#) questions to the pharmacy benefits department.

Electronic billing platform update

BWC is working on changes that allow health-care providers to submit electronic bills using the 837 Electronic Data Interchange (EDI) 5010 version of the transaction required under the Health Insurance Portability and Accountability Act.

We're writing a companion guide for this transaction, the remittance advice transaction (835) and the claims acknowledgment transaction (277CA).

We're looking for partners to give us feedback on our companion guide and to eventually participate in testing it. If you'd like to work with us on this project, [email](#) us, and someone will contact you. Once it's completed, we'll publish the guide on [ohiobwc.com](#).

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Fee schedule update – Vocational rehab and anesthesia base units

BWC's new [Vocational Rehabilitation Provider Fee Schedule](#) as established by Ohio Administrative Code 4123-18-9 and 4123-18-9 Appendix A is effective Oct. 1, 2012. This fee schedule:

- Includes a 1.53 percent increase in all fees except for travel and wait;
- Establishes one rate for provider travel and wait time;
- Eliminates W0695 Retraining Exercise Equipment as a service option;
- Modifies the definition and service limits for W0650 Job Seeking Skills Training;
- Modifies the units of service and fee for W0641 Job Coaching.

Definition or service limits have changed for these codes:

- W0524 Career Counseling – Research and Reporting;
- W0648 Physical Conditioning Unsupervised;
- W0690 Training – Books, Supplies and Testing;
- W0691 Remedial Training;
- W0692 Short Term Training and W0694 Long Term Training;
- W0620 and W0662 Work Adjustment – Employer Based and Facility Based.

Anesthesia base units

Effective Jan. 1, 2013, anesthesia providers will no longer be required to submit the Medicare designated anesthesia base units (ABUs) in addition to the timed anesthesia service on their Center for Medicare and Medicaid Services (CMS) 1500.

The ABUs are adopted as part of the Medical Services and Professional Provider Fee Schedule. The managed care organizations will be adding the ABUs to the encounter and submitting that information to BWC for provider anesthesia-care reimbursement.

For more information, [email](#) fee schedule questions to the Medical Services Division.

Please take a moment to [forward this email](#) to other managers in your organization and to your colleagues who may find it of value.

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