



# House of Representatives

General Assembly

**File No. 502**

January Session, 2025

House Bill No. 5605

*House of Representatives, April 3, 2025*

The Committee on Labor and Public Employees reported through REP. SANCHEZ, E. of the 24th Dist., Chairperson of the Committee on the part of the House, that the bill ought to pass.

## ***AN ACT CONCERNING MINOR REVISIONS TO THE WORKERS' COMPENSATION ACT.***

Be it enacted by the Senate and House of Representatives in General Assembly convened:

1 Section 1. Subdivision (11) of section 31-280 of the general statutes is  
2 repealed and the following is substituted in lieu thereof (*Effective July 1,*  
3 *2025*):

4 (11) (A) Establish standards in consultation with the advisory board  
5 for approving all fees for services rendered under this chapter by  
6 attorneys, physicians, surgeons, podiatrists, optometrists, dentists and  
7 other persons;

8 (B) In consultation with employers, their insurance carriers, union  
9 representatives, physicians and third-party reimbursement  
10 organizations establish, not later than October 1, 1993, and publish  
11 annually thereafter, a fee schedule setting the fees payable by an  
12 employer or its insurance carrier for services rendered under this

13 chapter by an approved physician, surgeon, podiatrist, optometrist,  
 14 dentist and other persons, provided the fee schedule shall not apply to  
 15 services rendered to a claimant who is participating in an employer's  
 16 managed care plan pursuant to section 31-279. On and after April 1,  
 17 2008, the chairperson shall implement and annually update relative  
 18 values based on the Medicare resource-based relative value scale and  
 19 implement coding guidelines in conformance with the Correct Coding  
 20 Initiative used by the federal Centers for Medicare and Medicaid  
 21 Services. [The conversion to the Medicare resource-based relative value  
 22 scale shall be revenue-neutral.] The fee schedule shall limit the annual  
 23 growth in total medical fees to the annual percentage increase in the  
 24 consumer price index for all urban workers. The chairperson may make  
 25 necessary adjustments to the fee schedule for services rendered under  
 26 this chapter where there is no established Medicare resource-based  
 27 relative value. Payment of the established fees by the employer or its  
 28 insurance carrier shall constitute payment in full to the practitioner, and  
 29 the practitioner may not recover any additional amount from the  
 30 claimant to whom services have been rendered;

31 (C) Issue, not later than October 1, 1993, and publish annually  
 32 thereafter, guidelines for the maximum fees payable by a claimant for  
 33 any legal services rendered by an attorney in connection with the  
 34 provisions of this chapter, which fees shall be approved in accordance  
 35 with the standards established by the chairperson pursuant to  
 36 subparagraph (A) of this subdivision;

This act shall take effect as follows and shall amend the following sections:		
Section 1	July 1, 2025	31-280(11)

**LAB**      *Joint Favorable*

*The following Fiscal Impact Statement and Bill Analysis are prepared for the benefit of the members of the General Assembly, solely for purposes of information, summarization and explanation and do not represent the intent of the General Assembly or either chamber thereof for any purpose. In general, fiscal impacts are based upon a variety of informational sources, including the analyst's professional knowledge. Whenever applicable, agency data is consulted as part of the analysis, however final products do not necessarily reflect an assessment from any specific department.*

## **OFA Fiscal Note**

### **State Impact:**

Agency Affected	Fund-Effect	FY 26 \$	FY 27 \$
Workers' Comp. Claims-Admin. Serv. Dept.	GF - Potential Cost	See Below	See Below

Note: GF=General Fund

**Municipal Impact:** None

### **Explanation**

The bill allows that changes to the fee schedule for workers' compensation medical providers may increase revenue when updated by the Workers' Compensation Commission. This results in a potential cost to the state and municipalities to the extent the changes in medical fees increase the cost of workers compensation claims.

### **The Out Years**

The annualized ongoing fiscal impact identified above would continue into the future subject to inflation.

**OLR Bill Analysis****HB 5605*****AN ACT CONCERNING MINOR REVISIONS TO THE WORKERS' COMPENSATION ACT.*****SUMMARY**

This bill removes the current requirement that the conversion to the Medicare resource-based relative value scale (RBRVS) as the basis for practitioner fees for medical services under the Workers' Compensation Act be revenue-neutral.

Current law generally requires the Workers' Compensation Commission's chairperson to annually (1) set a fee schedule for workers' compensation medical providers and (2) update relative values based on the RBRVS.

EFFECTIVE DATE: July 1, 2025

**BACKGROUND**

By April 1, 2008, the Workers' Compensation Commission chairperson was required to convert to a medical practitioners' fee schedule using RBRVS. This scale ranks medical services according to the relative costs of resources needed to produce the services. Medicare uses three components to calculate resource costs (and, therefore, the relative value) of each medical service: (1) physician (or other provider) work, (2) practice expense, and (3) liability insurance. The total relative value of a particular medical service is multiplied by a conversion factor to determine the Medicare fee. The RBRVS method is familiar to, and accepted by, physician practices because Medicare is the nation's largest medical services payer.

**COMMITTEE ACTION**

Labor and Public Employees Committee

Joint Favorable

Yea     13     Nay   0     (03/20/2025)