Labor and Public Employees Committee JOINT FAVORABLE REPORT

Bill No.:HB-5605
AN ACT CONCERNING MINOR REVISIONS TO THE WORKERS'
COMPENSATION ACT.Vote Date:3/20/2025Vote Action:Joint FavorablePH Date:2/20/2025File No.:

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SPONSORS OF BILL:

Labor & Public Employees Committee

REASONS FOR BILL:

The reason for this bill is to make a change to how workers' compensation law is presently calculated. Present law requires the Workers' Compensation Commission's chairperson must annually set a fee schedule for workers' compensation medical providers and update relative values based on the Medicare resource-based relative value scale. This bill removes the existing requirement for the conversion to the Medicare resource-based relative value scale relative value scale to be revenue-neutral.

RESPONSE FROM ADMINISTRATION/AGENCY:

None provided.

NATURE AND SOURCES OF SUPPORT:

Rep. Susan Johnson, CT General Assembly: Offered testimony in general support of this bill and cited an instance of a constituent on workers' compensation being unable to obtain a fitting wheelchair or receive the necessary surgery.

Gregory Gilbert, Vice President, Concentra Medical Centers: Offered multiple pieces of testimony in support of this bill, the first from 2007 addressed to the then-chairs of the Labor Committee, and the second addressing the present bill, both pieces on the same issue. He stated that in the 2007 legislative session, a bill (SB 1371), required the Workers' Compensation Commission chairman, by April 1, 2008, to develop, implement, and annually update a new medical practitioners' fee schedule using values from the Medicare resource-

based relative value scale (RBRVS). The conversion to that rate system must be revenue neutral. Mr. Gilbert stated that the "revenue-neutral" language was meant to be applied on a single time, for the conversion to the RBRVS, not annually. He stated that the 2007 fee schedule was set at 89% over Medicare rates but has decreased dramatically since that time, resulting in providers being paid much less. As of 2022, rates in Connecticut are now being paid at 65% over Medicare. He stated that by removing the revenue-neutral language, the chairperson would be able to update the fee schedule based on Connecticut CPI levels, as apparently intended in the original statute, which is used in most other states.

NATURE AND SOURCES OF OPPOSITION:

None provided.

Reported by: Cam Clarke

Date: 4/1/2025