

Florida Rescinds Sub-regulatory Policy on Physician Dispensing in Workers' Compensation



Last month, the Florida Division of Workers' Compensation (DWC) announced plans to rescind a 2020 policy allowing treating physicians to dispense drugs while compelling reimbursement from payers.

The announcement comes after a years-long effort and a petition from industry stakeholders to bring concerns regarding the far-reaching financial and safety impact of this policy on workers' compensation. myMatrixx has played a key role in this engagement process, including a meeting at the December 2021 Workers' Compensation Institute Conference between Chief Clinical Officer, Phil Walls, multiple myMatrixx clients, Mr. Andrew Sabolic and other representatives from the DWC.

As stated by opponents, the primary concerns around the practice of physician dispensing are:

- Lack of focused clinical pharmacy oversight for the dispensing physicians
- Risk of dangerous drug interactions originating from physician dispensing with prescriptions dispensed at a retail pharmacy or another dispensing physician go undetected
- Drug interaction concerns also exist with duplication of therapy, early fills and non-formulary or unrelated drugs

The petitioning insurers filing the challenge included Normandy Insurance Co., Zenith Insurance Co., Bridgefield Employers Insurance Co., Bridgefield Casualty Insurance Co., BusinessFirst Insurance Co. and RetailFirst Insurance Co. In summary, the petitioners assert that in an effort to keep costs reasonable, pharmacists and pharmacies must not be displaced from the system.

Although state law establishes injured workers have the right to choose a pharmacy of their choice, it does not state that physicians who dispense drugs are considered pharmacists. Rescinding of this bulletin does not remove the need to respond to the pre-authorization requests by dispensers.

The DWC will hold a workshop in September to draft proposed regulations within the scope of the law. myMatrixx will engage throughout the working group process to ensure any proposed rules are appropriate and in the best interests of our clients and the industry at large.

Key Considerations

- 1 It is unlikely that the Division will completely block physician dispensing.
- The Division cannot continue to ignore the significant cost differential between PBM processed prescriptions and physician dispensing.
- This appears to be a step in the right direction; but expect the DWC to make some compromises, particularly regarding the initial dispense.
- The DWC may require physicians to seek prior authorization before dispensing and the payer must respond to the request.
- A payer may not deny simply on the basis that the dispense is coming from a physician.
- Payers may require supporting documentation at the time of prior authorization, which could slow down the process.



How to Get Involved

The DWC will post proposed rules in advance of the two September 29 meetings in Tallahasse, FL for comments. myMatrixx is recommending the following suggestions and guidelines for attendees:

Morning: Define Billing Rules

- Carrier must respond to pre-authorization request timely
- Define documentation that a carrier may insist a prescriber provide at time of an authorized request
- Define what practitioner dispensing should look like which provides an open opportunity for payers to have input

Afternoon: Define Authorization Rules and EOB Codes

- Watch for small changes to definitions which could have significant downstream effects
- Carriers need to think about what EOB Codes they need which provides an opportunity for input



Go to Tallahassee

A significant and sizable turnout for the rulemaking meeting in Tallahassee is critical. We encourage everyone to be active in their involvement and, if possible, send a representative.

Working together, working for better.

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