Legislative Wrap Up in Workers' Compensation

Continuing Education Webinar July 29, 2025 3:00 PM ET

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Legislative Wrap Up in Workers' Compensation

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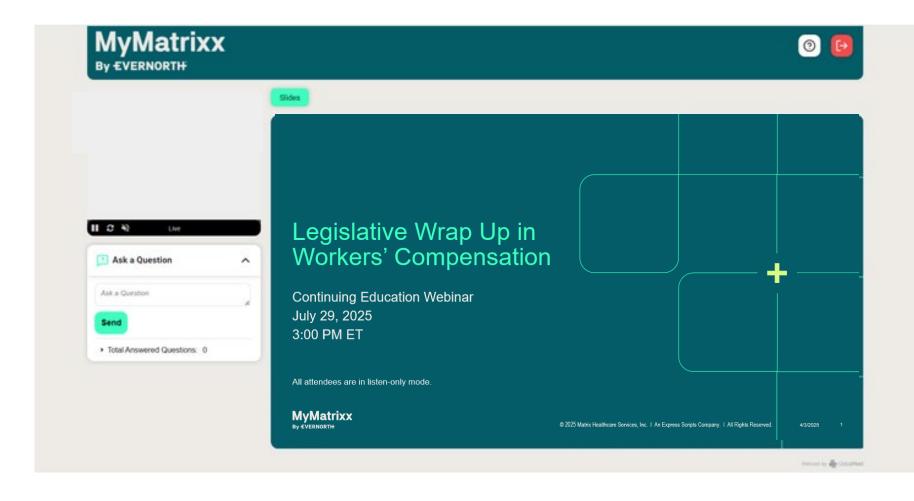
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Today's presenter



ADAM FOWLERMyMatrixx by Evernorth
Director, Regulatory Affairs



Agenda



Policy actions impact workers' comp. actions



2025 legislation wrap up



What's next?



Policy actions impact workers' compensation actions!

Why this info is important

Workers' compensation, insurance and health care are heavily legislated

- + Workers' compensation legislation dictates how claims are handled
- + Insurance legislation can dictate contracting terms, network requirements, and pricing options
- + Health care legislation dictates who can provide treatment and what treatments may be provided
- + Legislation often leads to additional regulations





Legislation vs. Regulation: Which does what?

Legislation Process

Policy drafted into a bill



Bills that pass committee go to the first then second chamber for a vote

> Bills that pass both chambers go to Governor's desk



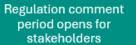
Legislation crafts policy ideas into bills through the legislative process.



Regulation clarifies or implements legislation by adding details to facilitate changes.

Regulation Process

Passed legislation goes to state agency for additional rulemaking



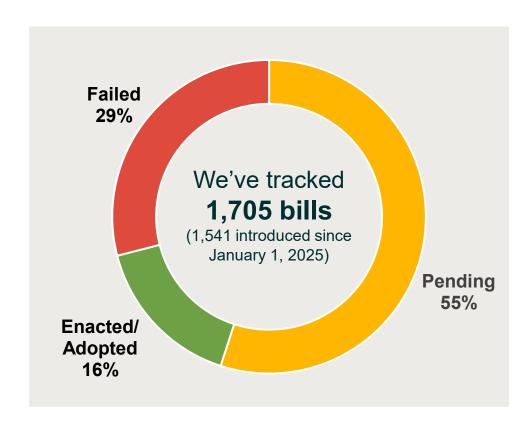


Final regulation becomes administrative law



Focus for Today = Legislation

Policies proposed by elected legislators in the states



Of Bills Proposing Changes Related To:

	Pending Bills	Enacted Bills	Failed Bills
Workers' Comp Reimbursement	21	16	13
Presumptive or Special Coverage	41	17	40
Direction of Care/Networks	9	5	11
Review, Authorization & Denial	36	20	18
PBMs	150	75	93



Workers' Compensation Reimbursement



Workers' Comp. Reimbursement Legislation

The amount health care providers are paid for services

- + Aimed at controlling costs in mandated benefit system
- + Workers' compensation fee schedules set maximum reimbursement to providers
- + Often still permit contract rates
- + Impact costs to payers and potentially access to care





Workers' Comp. Reimbursement Legislation

2025 Examples



Would have established state's first workers' comp. pharmacy fee schedule based on "acquisition cost" and "reasonable" dispensing fees



Hawaii HB 205

Would have established workers' comp. fee schedule for over-the-counter medications



Approved changes to workers' comp. pharmacy fee schedule placing additional cap on physician dispensed medications



California AB 1048

Would require independent bill review to include contract rate disputes tied to fee schedule discounts



Connecticut, Delaware, Florida, Utah & Wisconsin: All had bills pass adjusting medical fee schedules or how they are calculated



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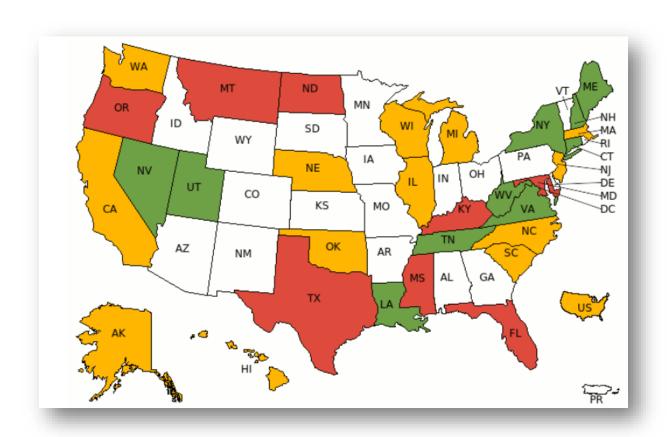


Presumptive or Special Coverage

Presumptive or Special Coverage Legislation

Focus on specific occupations or conditions

- + Extension of workers' comp coverage to some "ordinary diseases of life"
- + Most often address cancer, mental, heart, lung conditions in first responders
- + Several are rebuttable "presumptions"
- + Potential increased access to care, but also increased claims and costs





Presumptive or Special Coverage Legislation

2025 Examples

- ♠ New York S 755: Reversed 2024 bill that expanded coverage for stress to all
- ★ Connecticut SB 1426: Expanded Firefighters Cancer Relief Program to cover skin cancer
- ★ Tennessee SB 288: Amended firefighter cancer presumption to add prostate, breast and pancreatic cancers
- Tennessee HB 310: Expanded PTSD presumption to include law enforcement and emergency medical responders
- ★ West Virginia HB 2797: Expanded professionals who may diagnose PTSD in first responder claims; Removed "sunset" provision of PTSD law

2025 BRINGS MANY FIRST RESPONDER COVERAGE BILLS Posted on March 3, 2025





Presumptive or Special Coverage Legislation

2025 Examples

- ★ Virginia HB 1933 & SB 920: Amended presumption for first responders with throat cancer to include specific forms of related cancer.
- **Utah HB 65:** Expanded firefighter presumptive cancers list; Excluded respiratory cancers related to cigarettes, tobacco, marijuana use
- **Maine HP 46:** Extended first responder PTSD presumption indefinitely
- Texas HB 331: Expanded first responder heart attack or stroke presumptions to include more eligible situations and adds post-shift timeframe that heart attack or stroke can occur and be presumed
- Montana SB 394: Would have specified PTSD in certain first responders as eligible for workers' comp benefits

FIRST RESPONDER SPECIAL COVERAGE BILLS PROGRESS

Posted on May 28, 2025



The multi-state trend to propose legislation focused on providing special workers' compensation or occupational disease coverage for first responders for conditions such as mental stress, cancer, and cardiac conditions continues in 2025. Expansion of these laws can mean greater access to care for first responders, but it can also lead to increased claims and costs for employers. The following highlight several related bills introduced in 2025 that have been recently signed into law or made it just shy of that final step.







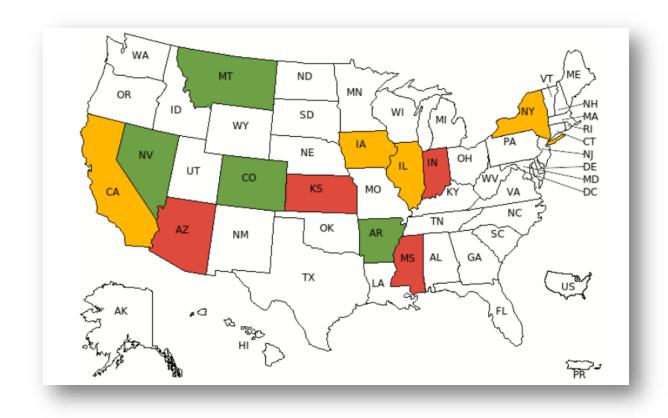
Direction of Care / Networks

Direction of Care/Networks Legislation

~ 25 bills
could impact
workers' compensation

Who chooses the injured worker's provider in workers' comp?

- + Legislation governing health care provider selection
- + Employer/insurer v. injured worker choice?
- + Can impact choice of physician, pharmacy or other medical providers
- + Requirements of provider networks and contracting





Direction of Care/Networks Legislation

2025 Examples

- Colorado HB 1300: Gives injured workers choice of treating physician
- **New York S 4926:** Would allow out-of-network pharmacy use when payer refuses to provide payment due to failure to authorize/reauthorize within a certain timeframe for specific listed reasons
- **Nevada SB 376:** Authorizes certain injured workers with lung or heart disease claims to seek treatment from a physician of their choice (if state's panel contains < 12 physicians in appropriate discipline or specialization accepting new patients and available within 30 days)

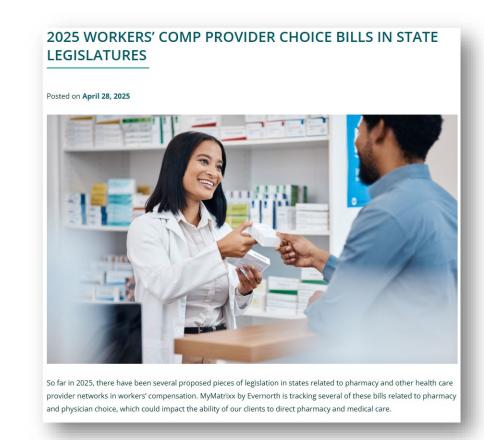
NEW YORK GOVERNOR VETOES PHARMACY ANTI-DIRECTION OF CARE BILL WHILE WORKERS' COMP BOARD PROPOSES REGULATIONS Posted on December 19, 2024 New York Governor Kathy Hochul recently vetoed S 1974 A, a bill that would have added exceptions to the ability of employers and insurers to direct care by requiring injured workers to use network pharmacies in the state's workers' compensation system. Hochul stated the bill would increase litigation, add bureaucratic steps for the New York State Workers' Compensation Board (WCB), and lead to delays in obtaining needed medication. The bill also would have

increased costs for employers and carriers by requiring reimbursement to out-of-network pharmacies that do not agree to negotiated rates. The veto of this legislation is a victory for our industry undoubtably thanks to the combined advocacy of

Direction of Care/Networks Legislation

2025 Examples

- California AB 1498: Would establish MPN database in San Joaquin Valley region and allow injured workers to use state MPN provider if employer/insurer MPN physician unable to treat within 30 days
- **Iowa SB 456**: Would provide injured worker right to predesignate a physician
- Arizona HB 2429: Would have allowed payers to establish pharmacy networks and require injured workers use them
- Indiana HB 1182, Kansas SB 189, Montana SB 295:
 Would have permitted injured workers to choose attending/treating providers





Review, Authorization & Denial

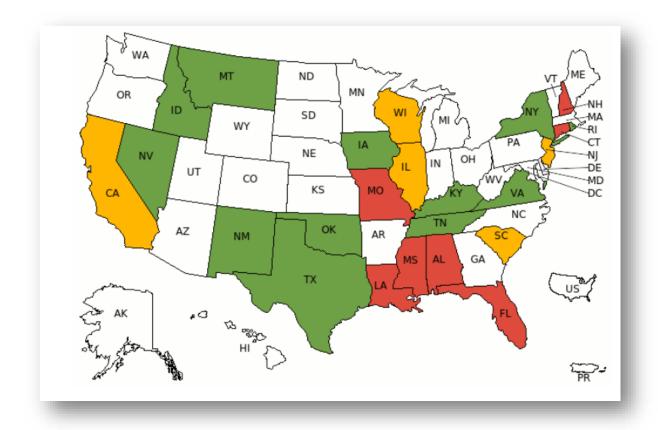
Review, Authorization and Denial Legislation

70+ bills

related to workers' compensation

Legislation governing payer review, approval and denial of medical/pharmacy treatment or bills

- + Process and criteria for review of medical treatment or bills
- + Approval or denial conditions and responsibilities
- + Dispute processes





Review, Authorization and Denial Legislation

2025 Examples

- ♠ Nevada SB 317: Required adoption of ODG drug formulary for workers' comp
- New York A 3005: Allowed workers' comp payers to pay for medical treatment without accepting liability for up to one year
- Texas SB 815: Prohibits utilization review from using Al to make adverse determination; Excludes use for administrative support or fraud detection
- Illinois HB 1256: Would require preauthorization for compounds beyond one-time, 7-day supply





Review, Authorization and Denial Legislation

More examples this year

- Florida HB 1281: Would have allowed providers to contest disallowance or adjustment of bill within 60 days
- Connecticut HB 6409: Would have required payer to notify ALJ and employee of an objection / proposed discontinuance / reduction of payment for a medication
- New Hampshire SB 67: Would have prohibited application for dispute resolution unless provider notified payer per prescribed timeline (~ 90 days from payment)
- New York S 6217: Would have increased threshold for required authorization of certain services from \$1,000 to \$1,500









Pharmacy Benefit Management



Pharmacy Benefit Management Legislation

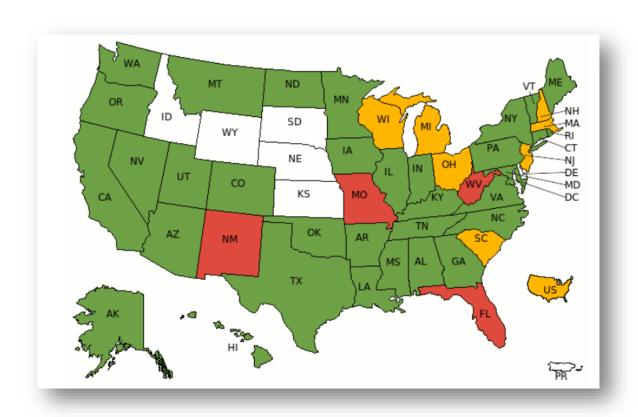
introduced in 2025 (small % could impact workers' comp.)

~ 300 bills

Larger legislative efforts targeting PBMs

- + Federal government and states continue to target PBMs
- + Focused on commercial health where patients have cost share, but workers' comp sometimes unintentionally impacted
- + Topics include
 - Spread pricing
 - Rebates
 - Transaction fees
 - MAC pricing
 - "Steering"
 - Reporting

- Minimum pharmacy reimbursement ("floor")
- Network leasing
- PBM pharmacy ownership
- PBM tax





Pharmacy Benefit Management Legislation

Examples this year

- ♠ Oklahoma SB 789: Prohibits PBM effective rate contracting and requires disclosures from PBMs that lease networks (would have imposed a reimbursement "floor")
- **Kentucky HB 415:** Exempted several insurance lines from law that includes PBM provisions (including existing reimbursement "floor")
- Montana HB 740: Prohibits effective rate contracting, PBMs reimbursing network pharmacies < contract price with payer, certain fees charged to pharmacies, and "steering" (workers' comp exempted from reimbursement "floor")





Pharmacy Benefit Management Legislation

More examples this year

- New York S 3008: Added PBM reporting requirements with likely workers' comp regulatory exemption
- Arkansas HB 1150: Prohibits PBMs from owning pharmacies
- Several others still pending



What's next?



Forecasting future policy developments

Where might the trends be headed?

- + Increased focus on medications costs in workers' comp and more broadly
- + Tinkering with presumptive/special coverage
- + Provider choice still hotly debated
- + More states looking at treatment guidelines and formularies, but concerned with authorization issues
- + Continued targeting of PBMs





MyMatrixx Regulatory Affairs Resources

Information on state and federal policy developments impacting workers' compensation pharmacy

Timely Articles and Updates

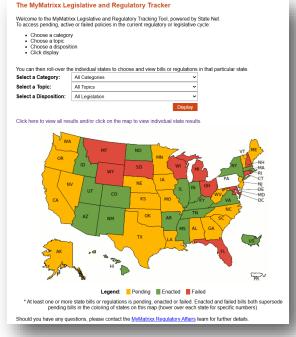


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Behavioral Health Medications in Workers' Comp. October 21, 2025

