

CHAPTER 186
FORMERLY
SENATE BILL NO. 108

AN ACT TO AMEND TITLE 19 OF THE DELAWARE CODE RELATING TO WORKERS' COMPENSATION AND PAYMENTS FOR INJURIES OR DEATH AND INCIDENTAL BENEFITS.

BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF DELAWARE:

Section 1. Amend Chapter 23 of Title 19 of the Delaware Code by striking paragraph (6) of section 2322B in its entirety, and substituting in lieu thereof a new paragraph (6) to read as follows:

“(6). Procedures and requirements for promulgation of health care payment system.

The health care payment system shall include provisions for health care treatment and procedures performed outside of the State of Delaware. If any procedure, treatment or service is rendered by a health care provider, hospital or Ambulatory Surgery Center, who is licensed or permitted to render such procedure, treatment or service within the State of Delaware, but performs such procedure, treatment or service outside of the State of Delaware, the amount of reimbursement shall be the amount as set forth in the health care payment system. In the event that a procedure, treatment or service is rendered outside the State of Delaware by a health care provider, hospital or Ambulatory Surgery Center, not licensed or permitted to render such procedure, treatment or service within the State of Delaware, the amount of reimbursement shall be the greater of:

a. The amount set forth in the workers' compensation health care payment system or a fee schedule adopted by the state in which the procedure, treatment or service is rendered, if such a schedule has been adopted; or

b. The amount that would be authorized by the payment system adopted pursuant to this chapter if the service or treatment were performed in the geozip where the injury occurred or where the employee was principally assigned. Charges for a procedure, treatment or service outside the State of Delaware shall be subject to the instructions, treatment guidelines, and payment guides and policies in the health care payment system.”

Section 2. Amend Chapter 23 of Title 19 by striking existing subsection (d) of §2322E in its entirety, and substituting in lieu thereof the following:

“(d) Within 14 days of receiving the initial ‘Physician’s Report of Workers’ Compensation Injury’, the employer shall provide to the health care provider/physician who issued the aforementioned report and to the employer’s insurance carrier, if applicable, a report of the modified-duty jobs which may be available to the employee. The health care provider portion of the employer’s modified duty availability report must be signed and returned by the health care provider within 14 days of the next date of service after receipt of the form from the employer, but not later than 21 days from the health care provider’s receipt of such form.”

Approved August 17, 2011