

SENATE BILL 447

Introduced by Svrcek

2/20	Introduced
2/20	First Reading
2/20	Referred to Labor & Employment Relations
2/21	Hearing
2/21	Tabled in Committee

1 *Senate* BILL NO. *447*  
2 INTRODUCED BY *Sprink*

3  
4 A BILL FOR AN ACT ENTITLED: "AN ACT CLARIFYING THE MEDICAL  
5 TREATMENT BENEFITS REQUIRED BY WORKERS' COMPENSATION  
6 INSURANCE; AND AMENDING SECTION 39-71-704, MCA."  
7

8 STATEMENT OF INTENT

9 A statement of intent is provided for this bill to guide  
10 the department of labor and industry in adopting rules  
11 defining "reasonable medical treatment". In adopting rules  
12 defining reasonable medical treatment, the department shall  
13 rely on guidelines provided by the federal Occupational  
14 Safety and Health Administration (OSHA) for first-aid and  
15 medical treatment.  
16

17 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MONTANA:

18 **Section 1.** Section 39-71-704, MCA, is amended to read:

19 "39-71-704. Payment of medical, hospital, and related  
20 services -- fee schedules and hospital rates. (1) In  
21 addition to the compensation provided by this chapter and as  
22 an additional benefit separate and apart from compensation,  
23 the following must be furnished:

24 (a) After the happening of the injury, the insurer  
25 shall furnish, without limitation as to length of time or

1 dollar amount, reasonable medical treatment services by a  
2 physician or surgeon, reasonable hospital services and  
3 medicines when needed, and such other treatment as may be  
4 approved by the department for the injuries sustained.

5 (b) The insurer shall replace or repair prescription  
6 eyeglasses, prescription contact lenses, prescription  
7 hearing aids, and dentures that are damaged or lost as a  
8 result of an injury, as defined in 39-71-119, arising out of  
9 and in the course of employment.

10 (c) The insurer shall reimburse a worker for reasonable  
11 travel expenses incurred in travel to a medical provider for  
12 treatment of an injury pursuant to rules adopted by the  
13 department. Reimbursement must be at the rates allowed for  
14 reimbursement of travel by state employees.

15 (2) A relative value fee schedule for medical,  
16 chiropractic, and paramedical services provided for in this  
17 chapter, excluding hospital services, must be established  
18 annually by the department and become effective in January  
19 of each year. The maximum fee schedule must be adopted as a  
20 relative value fee schedule of medical, chiropractic, and  
21 paramedical services, with unit values to indicate the  
22 relative relationship within each grouping of specialties.  
23 Medical fees must be based on the median fees as billed to  
24 the state fund during the year preceding the adoption of the  
25 schedule. The state fund shall report fees billed in the



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1 form and at the times required by the department. The  
 2 department shall adopt rules establishing relative unit  
 3 values, groups of specialties, the procedures insurers must  
 4 use to pay for services under the schedule, and the method  
 5 of determining the median of billed medical fees. These  
 6 rules must be modeled on the 1974 revision of the 1969  
 7 California Relative Value Studies.

8 (3) Beginning January 1, 1988, the department shall  
 9 establish rates for hospital services necessary for the  
 10 treatment of injured workers. Approved rates must be in  
 11 effect for a period of 12 months from the date of approval.  
 12 The department may coordinate this ratesetting function with  
 13 other public agencies that have similar responsibilities.

14 (4) Notwithstanding subsection (2), beginning January  
 15 1, 1988, through December 31, 1991, the maximum fees payable  
 16 by insurers must be limited to the relative value fee  
 17 schedule established in January 1987. Notwithstanding  
 18 subsection (3), beginning January 1, 1988, through December  
 19 31, 1991, the hospital rates payable by insurers must be  
 20 limited to those set in January 1988.

21 (5) (a) As used in subsection (1)(a), the term  
 22 "reasonable medical treatment" means treatment administered  
 23 by a physician or by registered professional personnel under  
 24 the standing orders of a physician, as provided by  
 25 department rule.

1 (b) Reasonable medical treatment does not include any  
 2 one-time treatment of or any followup visit for the purpose  
 3 of observation of minor scratches, cuts, burns, splinters,  
 4 and other minor injuries that do not ordinarily require  
 5 professional medical care, even if administered by a  
 6 physician."

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