



WORKERS' COMPENSATION PHARMACY RESOURCE GUIDE

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- 01** 2016 PHARMACY STATE FEE SCHEDULE DETAIL
- 03** BRAND-GENERIC MEDICATION INDEX
- 05** GENERIC-BRAND MEDICATION INDEX
- 07** WORKERS' COMPENSATION JURISDICTIONAL LAWS AND REGULATIONS
- 10** WORKERS' COMPENSATION FINANCIAL UPDATE
- 11** OPIOID ANALGESIC STATISTICS
- 12** SOURCES

2016 PHARMACY STATE FEE SCHEDULE DETAIL

ABBREVIATIONS

BR = Brand Rate (% of AWP) + Dispense Fee
GR = Generic Rate (% of AWP) + Dispense Fee

Reimbursement Description
Physician Dispensed/Repackaged
Compounded Medications

AK BR AWP + \$5.00
GR AWP + \$10.00

- Lesser of FS, fee to general public, or negotiated fee.
- Reimbursement shall use the original manufacturers AWP.
- Reimbursement shall be limited to "medical necessity" and for each ingredient listed separately by NDC plus a \$10 DF.

AL BR AWP + 5% + \$8.92
GR AWP + 5% + \$11.58

- Lesser of FS or provider's U&C.
- Bills shall include original underlying NDC and NDC of repackaged/re-labeled product. Reimbursement is lesser of original AWP and repackaged/re-labeled AWP. DF payable only to pharmacies.

AR BR AWP + \$5.13
GR AWP + \$5.13

- Lesser of FS, provider's U&C, or MCO/PPO contract price.
- No DF to physicians. OTCs billed by physicians. Reimbursement limited to provider's charge or up to 20% above cost of item. Dispensing practitioners must obtain permit (from state) and demonstrate need prior to dispensing approval.

AZ BR AWP - 5% + \$7.00
GR AWP - 15% + \$7.00

- Reimbursement is based on actual drug dispensed. Medicines dispensed by either pharmacy or physician subject to FS.
- Bills for physician dispensed/repackaged drugs shall include NDC of drug dispensed and original manufacturer NDC. Reimbursement based on NDC of underlying drug product.
- Reimbursement based on AWP of underlying drug product and bills shall include NDC for each ingredient used.

CA BR AWP - 17% + \$7.25
GR AWP - 17% + \$7.25

- FS set at 100% of current Medi-Cal fee schedule. Lesser of AWP - 17% / MAC / U&C + DF
- If NDC of dispensed drug not in Medi-Cal but NDC of underlying drug is, use NDC of underlying drug. If NDC from original labeler not in Medi-Cal, max fee is 83% of AWP of lowest priced therapeutically equivalent drug plus relevant DF.
- Billed using NDC of each ingredient. If no NDC, ingredient not reimbursable. Reimbursement for physician dispensed compounds not to exceed 300% of documented paid costs, or \$20 above.

CO BR AWP + \$4.00
GR AWP + \$4.00

- If AWP ceases, substitute WAC + 20%.
- For repackaged (not compounds) Rx written after 30 days of injury use AWP and NDC of underlying drug. Does not apply to repackaged Rx written during first 30 days of injury.
- Rates for compounds categorized according to four state-specific Z codes. Fees represent maximum reimbursable amount. All compound ingredients must be listed by quantity used.

CT BR AWP + \$5.00
GR AWP + \$8.00

- Reimbursement lesser of NDC for underlying drug from manufacturer or therapeutic equivalent drug product from manufacturer NDC. If information pertaining to original manufacturer is not provided or is unknown, payer may select NDC and associated AWP for reimbursement.

DE BR AWP - 12% + \$4.00
GR AWP - 20% + \$5.00

- Lesser of provider's U&C, negotiated contract amount, or FS.
- Reimbursement based on AWP for underlying drug product, as identified by its NDC, from original labeler. Physicians dispensing from office do not receive DF. No practitioner, unless properly licensed, shall dispense a controlled substance beyond a medically necessary 72-hour supply.
- Billed listing each ingredient and separately calculating charge using NDC; single compounding fee of \$10 per prescription.

FL BR AWP + \$4.18
GR AWP + \$4.18

- Reimbursement at FS except where employer/carrier or entity "acting on behalf of" employer/carrier directly contracts with provider seeking lower reimbursement.
- AWP for repackaged/re-labeled drugs dispensed by "dispensing practitioner" shall be AWP of original manufacturer/underlying drug x 12.5% + \$8.00 DF.
- Permitted when prescribed formulation not commercially available and reimbursement shall be mutually agreed upon.

GA BR AWP + \$4.26
GR AWP + \$6.38

- Reimbursement based on current published manufacturer's AWP of product on date of dispensing.
- Bills must include NDC of original manufacturer/distributor's stock package.
- Must be billed only by the compounding pharmacy. Reimbursement shall be the sum of AWP for each ingredient - 50% plus a single compound fee of \$20. Reimbursement limited to compounds containing three or fewer ingredients.

HI BR AWP + 40%
GR AWP + 40%

- Repackaged medications reimbursed at fee schedule based on original manufacturer NDC.
- Reimbursed at fee schedule based upon gram weight of each underlying ingredient. AWP shall be that set by the original manufacturer.

ID BR AWP + \$5.00
GR AWP + \$8.00

- Reimbursement is lesser of FS, billed charge, or charge agreed to pursuant to contract.
- Reimbursement based on AWP of original manufacturer. Physicians not reimbursed a DF or compounding fee.
- Reimbursed at sum of AWP of each individual drug, plus a \$5 DF and \$2 compounding fee. Ingredients of compounds require NDC of original manufacturer.

KS BR AWP - 10% + \$3.00
GR AWP - 15% + \$5.00

- Lesser of FS or provider's U&C.
- Reimbursed at fee schedule based on original manufacturer's NDC and require prior approval of carrier.
- Same as physician dispensing.

KY BR AWP + \$5.00 *Of lowest priced therapeutically equivalent in stock
GR AWP* + \$5.00

- FS is for the lowest priced therapeutically-equivalent in stock. Lesser than FS permitted if agreed.
- Reimbursement based on AWP of original NDC. DF only payable to licensed pharmacist. Doctors are restricted to dispensing only a 48-hour supply of any CII or CIII medication containing hydrocodone from their office.

LA BR AWP + 10% + \$10.51
GR AWP + 40% + \$10.51

- DF is based on current state Medicaid DF.
- Physicians may only dispense controlled substances or drugs of concern if registered as a dispensing physician and only up to a single 48-hour supply.
- Paid at FS formula for generics and bill must indicate "COMPOUND Rx" on form.

MA BR AWP - 16% + \$3.00
GR AWP - 16% + \$3.00

- FS tied to Medicaid. Single Source is lesser of AWP - 16% / EAC + DF or U&C. Multi Source/Generic is lesser of FUL/MAC/EAC + DF or U&C.
- Permitted only when necessary for immediate and proper treatment until possible for patient to have prescription filled by a pharmacy.
- Additional DF amounts depending on type of ingredients.

MI BR AWP - 10% + \$3.50
GR AWP - 10% + \$5.50

- Lesser of MAR in FS or provider's U&C charge
- Billed and reimbursed based on original manufacturer's NDC.
- Reimbursement for "custom" compounds limited to max of \$600 (charges exceeding subject to review). Topical compounds billed using specific amount of each ingredient and original manufacturer's NDC. Reimbursed at max of AWP - 10% of original manufacturer's NDC, pro-rated for each ingredient, plus a specific DF. Ingredients without NDCs not reimbursed. Additional "medical necessity" requirements on custom and topical compounds.

MN BR AWP - 12% + \$3.65* *Electronic. Paper for both
GR AWP - 12% + \$5.50*

- FS is bifurcated depending on paper billing and electronic or "real-time" billing and payment (as required) and includes MAC for GR.
- Permitted if not for profit, or if for profit, physician must file with the appropriate licensing board and receive approval.

MS BR AWP + \$5.00
GR AWP + \$5.00

- Unless contract, reimbursement is lesser of provider's total billed charge or FS.
- Reimbursed using NDC from underlying drug product from original labeler. DF not payable to doctors.
- Bills shall include listing of each individual ingredient NDC. Reimbursement sum of AWP of each underlying NDC drug product + \$5.00 DF, and limited to a max of \$300 per 120 grams per month quantity (without prior authorization).

MT BR AWP - 10% + \$3.00
GR AWP - 25% + \$3.00

- Lesser of FS or provider's U&C.
- Practice limited to certain exceptions.

NC BR AWP - 5%
GR AWP - 5%

- Lesser of FS or an agreement between the provider/payer.
- Original manufacturers NDC required on bills for repackaged and doctor dispensed medications. Reimbursement for doctor dispensed drugs shall not exceed 95% of AWP and based on AWP of the original NDC. No outpatient provider (other than pharmacies) may receive reimbursement for any CII through CV drugs over an initial 5-day supply commencing on the employee's initial treatment.

ND BR \$4.00 DF
GR \$5.00 DF

- Based on WAC, except compounds.
- Reimburses compounds at AWP - 72%, plus a single item compounding fee based on level of effort (LOE). Additional restrictions on topical pain preparations.

NM BR AWP - 10% + \$5.00
GR AWP - 10% + \$5.00

- Lesser of FS, U&C, or contract.
- Reimbursement at AWP - 10% with no DF. Initial physician dispense not greater than 10 days for new prescriptions. Provider dispensed medications shall not exceed cost of generic equivalent.
- Reimbursed at ingredient level, plus single DF. Bills must include original NDC. Ingredients with no NDC not redeemable.

NV BR AWP + \$10.25
GR AWP + \$10.25

- Lesser of FS, U&C, or contracted rate.
- May dispense initial supply (15 days) of CII or CIII. Include original NDC on bills. May not charge or seek reimbursement for OTC.

NY BR AWP - 12% + \$4.00 GR AWP - 20% + \$5.00

- FS or lower contracted rate.
- Physician dispensing limited to 72 hours with exceptions. Repackaged drugs reimbursed based on AWP for underlying drug.
- Reimbursed at ingredient level. Payment based on sum of allowable fee for each ingredient, plus a single DF per compound. Ingredients with no NDC not reimbursable.

OH BR AWP - 9% + \$3.50 (DF N/A for compounds) GR AWP - 9% + \$3.50 (DF N/A for compounds)

- Lesser of U&C or FS
- Drugs supplied to IW in physician's office not considered outpatient medication and not reimbursed by BWC. Repackaged brand medications, product cost component shall be calculated using AWP of original labeler (repackaged generics not addressed). Only pharmacy providers eligible for DF.
- Billed and reimbursed based on ingredient NDCs (no reimbursement for ingredients without NDC). Max product cost component reimbursement for any 1 compounded Rx is \$600, different DF for sterile/non-sterile compounds.

OK BR AWP - 10% + \$5.00 GR AWP - 10% + \$5.00

- Lesser of FS or provider's U&C for same or similar service.
- Physician dispensed (non-repackaged) lesser of AWP - 10% (exclusive of DF) or payer's contracted rate. Repackaged drugs reimbursed at lesser of AWP for original NDC - 10% or AWP of lowest cost therapeutic equivalent drug - 10%.
- Shall be billed by compounding pharmacy and at the ingredient level. Reimbursement shall be sum of allowable fee for each ingredient, plus a single \$5 DF. Ingredients without NDC not reimbursed.

OR BR AWP - 16.5% + \$2.00 GR AWP - 16.5% + \$2.00

- Lesser of FS, provider's U&C, or contract.
- Compensability of physician dispensing limited to initial 10-day supply except in emergency.

PA BR AWP + 10% GR AWP + 10%

- If provider's actual charge less than FS, pay actual charge.
- Reimbursement shall be at fee schedule based on original manufacturer's NDC, which must be submitted on bill. If original NDC is not submitted, reimbursement shall be fee schedule of the least expensive clinically-equivalent drug. Outpatient providers (other than licensed pharmacies) may not seek reimbursement for Schedule II drug in excess of an initial 7-day supply commencing on "initial treatment" for specific WC claim. Should an IW require a "medical procedure," one additional 15-day supply permitted, commencing on date of procedure. Providers may not seek reimbursement for any other prescription medications in excess of an initial 30-day supply, commencing on "initial treatment" by a provider for specific WC claim and may not seek reimbursement for an OTC drug.

RI BR AWP - 10% GR AWP - 10%

- Physicians cannot bill for dispense, only to administer drugs (injectables) in office.
- Compounds containing repackaged drugs shall be reimbursed using NDC of the underlying drug. Compounds shall be billed by separating the ingredients by NDC and corresponding quantity.

SC BR AWP + \$5.00 GR AWP + \$5.00

- Lesser of FS or provider's U&C.
- Billed with original NDC and reimbursed accordingly. If original NDC not provided or unknown, payer shall select most closely associated AWP.
- Billed by listing each ingredient NDC and reimbursed at sum of each NDC's amount, plus a single \$5 DF (no payment required for ingredient with no NDC).

TN BR AWP + \$5.10 GR AWP + \$5.10

- Lesser of FS, provider's U&C, or contracted rate.
- Reimbursement based on published manufacturer's AWP of product/ingredient, calculated on a per-unit basis, on date of dispense. If original manufacturer's NDC not provided on bill, reimbursement based on AWP of lowest priced therapeutically equivalent drug. Physician should not receive a DF.
- Compounding fee not to exceed \$25 per compound and may be charged by any entity other than physician. All compound bills shall include NDC of original manufacturer.

TX BR AWP + 9% + \$4.00 GR AAWP + 25% + \$4.00

- Reimbursement at compliant contracted rate (a direct contract with provider or through a registered pharmacy network) or lesser of FS or billed amount.
- Physician dispensing only permitted to meet immediate needs or in rural area.
- Calculate each ingredient separately (AWP in FS) plus a \$15 compounding fee per prescription.

VT BR AWP + \$3.15 GR AWP + \$3.15

- Lesser of FS or actual charge.

WA BR AWP - 10% + \$4.50 GR AWP - 50% + \$4.50

- L&I (state fund) does not pay for medication dispensed in physician's office and policy is to not pay for repackaged drugs.
- Reimbursement allows cost of ingredients, plus a \$4.50 professional fee and a \$4 compounding time fee. Must be billed with NDC for each ingredient. Compounds require pre-authorization.

WI BR AWP + \$3.00 GR AWP + \$3.00

- DF only payable to pharmacist.

WY BR AWP - 10% + \$5.00 GR AWP - 10% + \$5.00

- Lesser of FS or provider's U&C.
- Physicians billing for compounds must provide pharmacy invoice and pay at 130% of supplier's/manufacture's invoice price.
- Compounding pharmacies that bill are compensated per FS, per line item if ingredient determined coverable. Pharmacists/third-party billers must submit itemization for all ingredients and quantities used in compounding process.

FEDERAL SERVICES

BR AWP - 15% + \$4.00 DFEC
AWP - 10% + \$4.00 Non-DFEC

GR AWP - 30% + \$4.00 DFEC
AWP - 25% + \$4.00 Non-DFEC

- Lesser of FS or U&C charge amount
- For OWCP programs, all Rx drugs dispensed from physician's office and submitted with codes J3490, J8499, J8999, and J9999 require accompanying original NDC. For FECA/Black Lung any doctor dispensed Rx submitted using CPT code 99070 require accompanying original NDC.

NO FEE SCHEDULE

DC Paid at U&C.

IA Paid at U&C.

IL Insurer pays all necessary and reasonable costs.
Drugs dispensed outside of licensed pharmacy are AWP plus \$4.18 and repackaged drugs use AWP of underlying drug as identified by NDC from original labeler.

IN Reimbursement for repackaged drugs dispensed (other than retail/mail pharmacy) use AWP of original manufacturer. If NDC not determined, max reimbursement is lowest cost generic for prescribed/dispensed drug.
Doctors dispensing medications from their office(s) are only entitled to receive reimbursement for medications dispensed during the first 7 days from DOI.

MD For drugs or products lacking FS, carriers can assign a relative value to product/service. May be based on nationally recognized/published relative values or values assigned for similar products/services.

ME Paid at U&C.

MO Paid at U&C.

NE Paid reasonable value

NH 100% of actual charge billed

NJ Paid at U&C
Physician dispensing limited to only 7-day supply unless more than 10 miles from nearest pharmacy. Additional limit on charges.

SD Not to exceed U&C

UT Paid at U&C
Physician dispensing permitted only in very limited situations.

VA Disputes use prevailing community rate.
Physician dispensing only permitted with certain specified limits (i.e., samples, emergency, not available) unless properly licensed by the Board of Pharmacy.

WV No Controlling Rx FS - Providers bill their U&C
Legend drugs dispensed by a physician will not be reimbursed except in emergency

BRAND-GENERIC MEDICATION INDEX

BRAND	GENERIC	THERAPEUTIC CLASS
Abilify®	aripiprazole	Antipsychotics—Atypical
Abstral®	fentanyl	Opioid Analgesics
Aciphex®	rabeprazole	Anti-Ulcers
Actiq®	fentanyl lozenge	Opioid Analgesics
Adderall®	amphetamine/ dextroamphetamine	Stimulants
Advil®	ibuprofen	NSAIDs
Aleve®	naproxen sodium	NSAIDs
Aloxi®	palonosetron	Anti-Emetics
Ambien®	zolpidem	Sedatives/Hypnotics
Amrix®	cyclobenzaprine	Skeletal Muscle Relaxants
Amitiza®	lubiprostone	Laxatives
Anaprox®	naproxen sodium	NSAIDs
Anzemet®	dolasetron	Anti-Emetics
Atarax®	hydroxyzine	Anxiolytics (Anti-Anxiety)
Ativan®	lorazepam	Anxiolytics (Anti-Anxiety)
Avinza®	morphine	Opioid Analgesics
Axid®	nizatidine	Anti-Ulcers
Belsomra®	suvorexant	Sedatives/Hypnotics
Benadryl®	diphenhydramine	Antihistamine
Brintellix®	vortioxetine	Antidepressants
Buprenex®	buprenorphine	Opioid Analgesics
Buspar®	buspirone	Anxiolytics (Anti-Anxiety)
Butrans®	buprenorphine	Opioid Analgesics
Carafate®	sucalfate	Anti-Ulcers
Cataflam®	diclofenac potassium	NSAIDs
Celebrex®	celecoxib	NSAIDs
Celexa®	citalopram	Antidepressants
Clinoril®	sulindac	NSAIDs
Clozaril®	clozapine	Antipsychotics—Atypical
Colace®	docusate sodium	Laxatives
Colace®	glycerin suppository	Laxatives
Compazine®	prochlorperazine	Anti-Emetics, Antipsychotics—Typical
Concerta®	methylphenidate	Stimulants
ConZip®	tramadol	Opioid Analgesics
Cymbalta®	duloxetine	Antidepressants
Cytotec®	misoprostol	Anti-Ulcers
Dantrium®	dantrolene	Skeletal Muscle Relaxants
Daypro®	oxaprozin	NSAIDs
Demerol®	meperidine	Opioid Analgesics
Desyrel®	trazodone	Sedatives/Hypnotics
Dexedrine®	dextroamphetamine	Stimulants
Dexilant™	dexlansoprazole	Anti-Ulcers
Dilaudid®	hydromorphone	Opioid Analgesics
Dolophine®	methadone	Opioid Analgesics
Dulcolax®	bisacodyl	Laxatives
Duragesic®	fentanyl patch	Opioid Analgesics
Effexor®	venlafaxine	Antidepressants
Elavil®	amitriptyline	Antidepressants
Embeda®	morphine/naltrexone	Opioid Analgesics

BRAND	GENERIC	THERAPEUTIC CLASS
Enulose®	lactulose	Laxatives
Exalgo®	hydromorphone	Opioid Analgesics
Fazaclo®	clozapine	Antipsychotics—Atypical
Feldene®	piroxicam	NSAIDs
Fentora®	fentanyl buccal tablet	Opioid Analgesics
FiberCon®	polycarbophil	Laxatives
Flexeril®	cyclobenzaprine	Skeletal Muscle Relaxants
Focalin®	dexmethylphenidate	Stimulants
Geodon®	ziprasidone	Antipsychotics—Atypical
Gralise®	gabapentin	Anticonvulsants
Horizant®	gabapentin	Anticonvulsants
Hysingla® ER	hydrocodone	Opioid Analgesics
Indocin®	indomethacin	NSAIDs
Invega®	paliperidone	Antipsychotics—Atypical
Kadian®	morphine	Opioid Analgesics
Klonopin®	clonazepam	Anxiolytics (Anti-Anxiety)
Kytril®	granisetron	Anti-Emetics
Lamictal®	lamotrigine	Anticonvulsants
Lazanda®	fentanyl nasal spray	Opioid Analgesics
Lexapro®	escitalopram	Antidepressants
Librium®	chlordiazepoxide	Anxiolytics (Anti-Anxiety)
Lidoderm®	lidocaine patch	Anesthetics (Topical)
Lioresal®	baclofen	Skeletal Muscle Relaxants
Lodine®	etodolac	NSAIDs
Lorzone®	chlorzoxazone	Skeletal Muscle Relaxants
Lunesta®	eszopiclone	Sedative/Hypnotics
Luvox®	fluvoxamine	Antidepressants
Lyrica®	pregabalin	Anticonvulsants
Mellaril®	thioridazine	Antipsychotics—Typical
Meperitab®	meperidine	Opioid Analgesics
Metadate®	methylphenidate	Stimulants
Metamucil®	psyllium	Laxatives
Methadose®	methadone	Opioid Analgesics
Miralax®	polyethylene glycol	Laxatives
Mobic®	meloxicam	NSAIDs
Motrin®	ibuprofen	NSAIDs
Movantik™	naloxegol	Laxatives (Opioid Antagonist)
MS Contin®	morphine	Opioid Analgesics
MSIR®	morphine	Opioid Analgesics
Nalfon®	fenoprofen	NSAIDs
Naprosyn®	naproxen	NSAIDs
Neurontin®	gabapentin	Anticonvulsants
Nexium®	esomeprazole	Anti-Ulcers
Norco®	hydrocodone/ acetaminophen	Opioid Analgesics
Norflex®	orphenadrine	Skeletal Muscle Relaxants
Norpramin®	desipramine	Antidepressants
Nucynta®	tapentadol	Opioid Analgesics
Nuvigil®	armodafinil	Stimulants
Onsolis®	fentanyl	Opioid Analgesics

BRAND	GENERIC	THERAPEUTIC CLASS
Orudis®	ketoprofen	NSAIDs
Opana®	oxymorphone	Opioid Analgesics
OxylR®	oxycodone	Opioid Analgesics
Pamelor®	nortriptyline	Antidepressants
Parafon Forte®	chlorzoxazone	Skeletal Muscle Relaxants
Paxil®	paroxetine	Antidepressants
Pepcid®	famotidine	Anti-Ulcers
Percocet®	oxycodone/ acetaminophen	Opioid Analgesics
Phenergan®	promethazine	Anti-Emetics
Prevacid®	lansoprazole	Anti-Ulcers
Prilosec®	omeprazole	Anti-Ulcers
Pristiq®	desvenlafaxine	Antidepressants
Prolixin®	fluphenazine	Antipsychotics—Typical
Protonix®	pantoprazole	Anti-Ulcers
Provigil®	modafinil	Stimulants
Prozac®	fluoxetine	Antidepressants
Qudexy® XR	topiramate	Anticonvulsants
Reglan®	metoclopramide	Anti-Emetics
Relafen®	nabumetone	NSAIDs
Relistor®	methylinaltrexone	Laxative (Opioid Antagonist)
Restoril™	temazepam	Sedatives/Hypnotics
Risperdal®	risperidone	Antipsychotics—Atypical
Ritalin®	methylphenidate	Stimulants
Robaxin®	methocarbamol	Skeletal Muscle Relaxants
Roxicodone®	oxycodone	Opioid Analgesics
Rozerem®	ramelteon	Sedatives/Hypnotics
Sancuso®	granisetron	Anti-Emetics
Savella®	milnacipran	Antidepressants
Senokot®	senna	Laxatives
Serax®	oxazepam	Anxiolytics (Anti-Anxiety)
Seroquel®	quetiapine	Antipsychotics—Atypical
Silenor®	doxepin	Sedatives/Hypnotics
Skelaxin®	metaxalone	Skeletal Muscle Relaxants
Soma®	carisoprodol	Skeletal Muscle Relaxants
Sonata®	zaleplon	Sedatives/Hypnotics
Stelazine®	trifluoperazine	Antipsychotics—Typical
Strattera®	atomoxetine	Stimulants
Suboxone®	buprenorphine/naloxone	Opioid Analgesics
Subsys®	fentanyl sublingual spray	Opioid Analgesics
Tagamet®	cimetidine	Anti-Ulcers
Tegretol®	carbamazepine	Anticonvulsants
Thorazine®	chlorpromazine	Antipsychotics—Typical
Tivorbex®	indomethacin	NSAIDs
Tofranil®	imipramine	Antidepressants
Tolectin®	tolmetin sodium	NSAIDs
Topamax®	topiramate	Anticonvulsants
Toradol®	ketorolac	NSAIDs
Tranxene-T®	clorazepate	Anxiolytics (Anti-Anxiety)
Trilafon®	perphenazine	Antipsychotics—Typical

BRAND	GENERIC	THERAPEUTIC CLASS
Trileptal®	oxcarbazepine	Anticonvulsants
Trokendi XR®	topiramate	Anticonvulsants
Ultracet®	tramadol/acetaminophen	Opioid Analgesics
Ultram®	tramadol	Opioid Analgesics
Valium®	diazepam	Anxiolytics (Anti-Anxiety), Skeletal Muscle Relaxants
Versed®	midazolam	Anxiolytics (Anti-Anxiety)
Vicodin®	hydrocodone/ acetaminophen	Opioid Analgesics
Vistaril®	hydroxyzine pamoate	Anxiolytics (Anti-Anxiety)
Voltaren®	diclofenac sodium	NSAIDs
Vyvanse®	lisdexamfetamine	Stimulants
Wellbutrin®	bupropion	Antidepressants
Xanax®	alprazolam	Anxiolytics (Anti-Anxiety)
Xartemis® XR	oxycodone/ acetaminophen	Opioid Analgesics
Zanaflex®	tizanidine	Skeletal Muscle Relaxants
Zantac®	ranitidine	Anti-Ulcers
Zohydro® ER	hydrocodone	Opioid Analgesics
Zofran®	ondansetron	Anti-Emetics
Zoloft®	sertraline	Antidepressants
Zorvolex®	diclofenac	NSAIDs
Zubsolv®	buprenorphine/naloxone	Opioid Analgesics
Zyprexa®	olanzapine	Antipsychotics Atypical

SPECIALTY MEDICATIONS

BRAND	GENERIC	THERAPEUTIC CLASS
Actemra®	tocilizumab	DMARDs
Arixtra®	fondaparinux	Anticoagulants
Botox®	onabotulinumtoxinA	Botulinum Toxins
Copegus®	ribavirin	Hepatitis C Antivirals
Enbrel®	etanercept	DMARDs
Fragmin®	dalteparin sodium	Anticoagulants
Harvoni®	ledipasvir-sofosbuvir	Hepatitis C Antivirals
Humira®	adalimumab	DMARDs
Isentress®	raltegravir	Anti-retrovirals
Lovenox®	enoxaparin	Anticoagulants
Norvir®	ritonavir	Anti-retrovirals
Olysio®	simeprevir	Hepatitis C Antivirals
Pegasys®	peginterferon, alpha-2a	Hepatitis C Antivirals
PegIntron®	peginterferon, alpha-2b	Hepatitis C Antivirals
Remicade®	infliximab	DMARDs
Sovaldi®	sofosbuvir	Hepatitis C Antivirals
Supartz®, Euflexxa®, Synvisc®, Synvisc-One®, Gel-One®	N/A	Hyaluronic Acid Derivatives
Tivicay®	dolutegravir	Anti-retrovirals
Truvada®	tenofovir/emtricitabine	Anti-retrovirals
Tyboost®	cobicistat	Anti-retrovirals
Viekira Pak®	ombitasvir, paritaprevir, ritonavir, dasabuvir	Hepatitis C Antivirals

NSAIDs = Non-Steroidal Anti-Inflammatory Drugs

DMARDs = Biologic Disease Modifying Antirheumatic Drugs

GENERIC-BRAND MEDICATION INDEX

GENERIC	BRAND	THERAPEUTIC CLASS
alprazolam	Xanax®	Anxiolytics (Anti-Anxiety)
amitriptyline	Elavil®	Antidepressants, Sedatives/Hypnotics
amphetamine/dextroamphetamine	Adderall®	Stimulants
aripiprazole	Abilify®	Antipsychotics—Atypical
armodafinil	Nuvigil®	Stimulants
atomoxetine	Strattera®	Stimulants
baclofen	Lioresal®	Skeletal Muscle Relaxants
bisacodyl	Dulcolax®	Laxatives
buprenorphine	Subutex®, Butrans®, Buprenex®	Opioid Analgesics
buprenorphine/naloxone	Suboxone®, Zubsolv®	Opioid Analgesics
bupropion	Wellbutrin®	Antidepressants
buspirone	Buspar®	Anxiolytics (Anti-Anxiety)
carbamazepine	Tegretol®	Anticonvulsants
carisoprodol	Soma®	Skeletal Muscle Relaxants
celecoxib	Celebrex®	NSAIDs
chlordiazepoxide	Librium®	Anxiolytics (Anti-Anxiety)
chlorpromazine	Thorazine®	Antipsychotics—Typical
chlorzoxazone	Lorzone®, Parafon Forte®	Skeletal Muscle Relaxants
cimetidine	Tagamet®	Anti-Ulcers
citalopram	Celexa®	Antidepressants
clonazepam	Klonopin®	Anxiolytics (Anti-Anxiety)
clorazepate	Tranxene-T®	Anxiolytics (Anti-Anxiety)
clozapine	Clozaril®, Fazaclo®	Antipsychotics—Atypical
cyclobenzaprine	Amrix®, Flexeril®	Skeletal Muscle Relaxants
dantrolene	Dantrium®	Skeletal Muscle Relaxants
desipramine	Norpramin®	Antidepressants
desvenlafaxine	Pristiq®	Antidepressants
dexlansoprazole	Dexilant™	Anti-Ulcers
dexmethylphenidate	Focalin®	Stimulants
dextroamphetamine	Dexedrine®	Stimulants
diazepam	Valium®	Anxiolytics (Anti-Anxiety), Skeletal Muscle Relaxants
diclofenac potassium	Cataflam®	NSAIDs
diclofenac sodium	Voltaren®, Zorvolex®	NSAIDs
diphenhydramine	Benadryl®	Antihistamine
docusate sodium	Colace®	Laxatives
dolasetron	Anzemet®	Anti-Emetics
doxepin	Silenor®	Sedatives/Hypnotics
duloxetine	Cymbalta®	Antidepressants
escitalopram	Lexapro®	Antidepressants
esomeprazole	Nexium®	Anti-Ulcers
eszopiclone	Lunesta®	Sedative/Hypnotics
etodolac	Lodine®	NSAIDs
famotidine	Pepcid®	Anti-Ulcers
fenoprofen	Nalfon®	NSAIDs
fentanyl	Abstral®, Onsolis®, Subsys®	Opioid Analgesics
fentanyl buccal tablet	Fentora®	Opioid Analgesics
fentanyl lozenge	Actiq®	Opioid Analgesics
fentanyl nasal spray	Lazanda®	Opioid Analgesics

GENERIC	BRAND	THERAPEUTIC CLASS
fentanyl patch	Duragesic®	Opioid Analgesics
fluoxetine	Prozac®	Antidepressants
fluphenazine	Prolixin®	Antipsychotics—Typical
fluvoxamine	Luvox®	Antidepressants
gabapentin	Gralise®, Horizant®, Neurontin®	Anticonvulsants
glycerin suppository	Colace®	Laxatives
granisetron	Kytril®, Sancuso®	Anti-Emetics
hydrocodone	Hysingla® ER, Zohydro® ER	Opioid Analgesics
hydrocodone/acetaminophen	Norco®, Vicodin®	Opioid Analgesics
hydromorphone	Dilaudid®, Exalgo®	Opioid Analgesics
hydroxyzine	Atarax®	Anxiolytics (Anti-Anxiety)
hydroxyzine pamoate	Vistaril®	Anxiolytics (Anti-Anxiety)
ibuprofen	Advil®, Motrin®	NSAIDs
imipramine	Tofranil®	Antidepressants
indomethacin	Indocin®, Tivorbex®	NSAIDs
ketoprofen	Orudis®	NSAIDs
ketorolac	Toradol®	NSAIDs
lactulose	Enulose®	Laxatives
lamotrigine	Lamictal®	Anticonvulsants
lansoprazole	Prevacid®	Anti-Ulcers
lidocaine patch	Lidoderm®	Anesthetics (Topical)
lisdexamphetamine	Vyvanse®	Stimulants
lorazepam	Ativan®	Anxiolytics (Anti-Anxiety)
lubiprostone	Amitiza®	Laxatives
meloxicam	Mobic®	NSAIDs
meperidine	Demerol®, Meperitab®	Opioid Analgesics
metaxalone	Skelaxin®	Skeletal Muscle Relaxants
methadone	Dolophine®, Methadose®	Opioid Analgesics
methocarbamol	Robaxin®	Skeletal Muscle Relaxants
methylnaltrexone	Relistor®	Laxative (Opioid Antagonist)
methylphenidate	Concerta®, Metadate®, Ritalin®	Stimulants
metoclopramide	Reglan®	Anti-Emetics
midazolam	Versed®	Anxiolytics (Anti-Anxiety)
milnacipran	Savella®	Antidepressants
misoprostol	Cytotec®	Anti-Ulcers
modafinil	Provigil®	Stimulants
morphine	Avinza®, Kadian®, MS Contin®, MSIR®	Opioid Analgesics
morphine/naltrexone	Embeda®	Opioid Analgesics
nabumetone	Relafen®	NSAIDs
naloxegol	Movantik™	Laxative (Opioid Antagonist)
naproxen sodium	Aleve®, Anaprox®, Naprosyn®	NSAIDs
nizatidine	Axid®	Anti-Ulcers
nortriptyline	Pamelor®	Antidepressants
olanzapine	Zyprexa®	Antipsychotics—Atypical
omeprazole	Prilosec®	Anti-Ulcers
ondansetron	Zofran®	Anti-Emetics
orphenadrine	Norflex®	Skeletal Muscle Relaxants

SPECIALTY MEDICATIONS

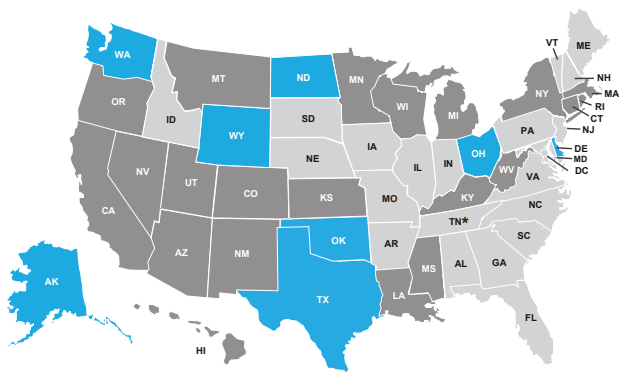
GENERIC	BRAND	THERAPEUTIC CLASS
oxaprozin	Daypro®	NSAIDs
oxazepam	Serax®	Anxiolytics (Anti-Anxiety)
oxycodone	Roxicodone®, Oxy IR®	Opioid Analgesics
oxycodone/ acetaminophen	Percocet®, Xartemis® XR	Opioid Analgesics
oxymorphone	Opana®	Opioid Analgesics
paliperidone	Invega®	Antipsychotics—Atypical
palonosetron	Aloxi®	Anti-Emetics
pantoprazole	Protonix®	Anti-Ulcers
paroxetine	Paxil®	Antidepressants
perphenazine	Trilafon®	Antipsychotics—Typical
piroxicam	Feldene®	NSAIDs
polycarbophil	FiberCon®	Laxatives
polyethylene glycol	Miralax®	Laxatives
pregabalin	Lyrica®	Anticonvulsants
prochlorperazine	Compazine®	Anti-Emetics, Antipsychotics—Typical
promethazine	Phenergan®	Anti-Emetics
psyllium	Metamucil®	Laxatives
quetiapine	Seroquel®	Antipsychotics—Atypical
rabeprazole	Aciphex®	Anti-Ulcers
ramelteon	Rozereem®	Sedatives/Hypnotics
ranitidine	Zantac®	Anti-Ulcers
risperidone	Risperdal®	Antipsychotics—Atypical
senna	Senokot®	Laxatives
sertraline	Zoloft®	Antidepressants
sucralfate	Carafate®	Anti-Ulcers
sulindac	Clinoril®	NSAIDs
suvorexant	Belsomra®	Sedatives/Hypnotics
tapentadol	Nucynta®	Opioid Analgesics
temazepam	Restoril™	Sedatives/Hypnotics
thioridazine	Mellaril®	Antipsychotics—Typical
tizanidine	Zanaflex®	Skeletal Muscle Relaxants
tolmetin sodium	Tolectin®	NSAIDs
topiramate	Qudexy® XR Topamax® Trokendi XR®	Anticonvulsants
tramadol	ConZip®, Ultram®	Opioid Analgesics
tramadol/ acetaminophen	Ultracet®	Opioid Analgesics
trazodone	Desyrel®	Sedatives/Hypnotics
trifluoperazine	Stelazine®	Antipsychotics—Typical
venlafaxine	Effexor®	Antidepressants
vortioxetine	Brintellix®	Antidepressants
zaleplon	Sonata®	Sedatives/Hypnotics
ziprasidone	Geodon®	Antipsychotic—Atypical
zolpidem	Ambien®	Sedatives/Hypnotics

GENERIC	BRAND	THERAPEUTIC CLASS
adalimumab	Humira®	DMARDs
cobicistat	Tybost®	Anti-retrovirals
dalteparin sodium	Fragmin®	Anticoagulants
dolutegravir	Tivicay®	Anti-retrovirals
enoxaparin	Lovenox®	Anticoagulants
etanercept	Enbrel®	DMARDs
fondaparinux	Arixtra®	Anticoagulants
infliximab	Remicade®	DMARDs
ledipasvir-sofosbuvir	Harvoni®	Hepatitis C Antivirals
N/A	Supartz®, Euflexxa®, Synvisc®, Synvisc-One®, Gel-One®	Hyaluronic Acid Derivatives
ombitasvir, paritaprevir, ritonavir, dasabuvir	Viekira Pak®	Hepatitis C Antivirals
onabotulinumtoxinA	Botox®	Botulinum Toxins
peginterferon, alpha-2a	Pegasys®	Hepatitis C Antivirals
peginterferon, alpha-2b	PegIntron®	Hepatitis C Antivirals
raltegravir	Isentress®	Anti-retrovirals
ribavirin	Copegus®	Hepatitis C Antivirals
ritonavir	Norvir®	Anti-retrovirals
simeprevir	Olysio®	Hepatitis C Antivirals
sofosbuvir	Sovaldi®	Hepatitis C Antivirals
tenofovir/emtricitabine	Truvada®	Anti-retrovirals
tocilizumab	Actemra®	DMARDs

NSAIDs = Non-Steroidal Anti-Inflammatory Drugs

DMARDs = Biologic Disease Modifying Antirheumatic Drugs

WORKERS' COMPENSATION JURISDICTIONAL LAWS AND REGULATIONS



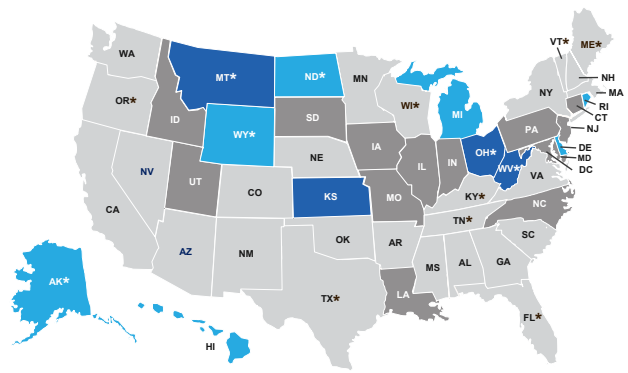
MEDICATION FORMULARIES AND GUIDELINES

- WC Treatment Guidelines
- WC Treatment Guidelines, as well as State WC Specific Formulary or Preferred Drug List (PDL)
- None

*Drug formulary adopted to be effective February 2016

Reflects most current published jurisdictional workers' compensation treatment guidelines or formularies (prescription drug utilization specific)

Current as of January 2016



JURISDICTIONAL GENERIC MEDICATION MANDATES

- Substitution mandated
- Substitution mandated except where written statement of medical necessity, prior authorization, or other requirement provided/med
- Substitution mandated except where prescriber notates DAW, DNS, or similar
- Substitution not specifically mandated for workers' compensation

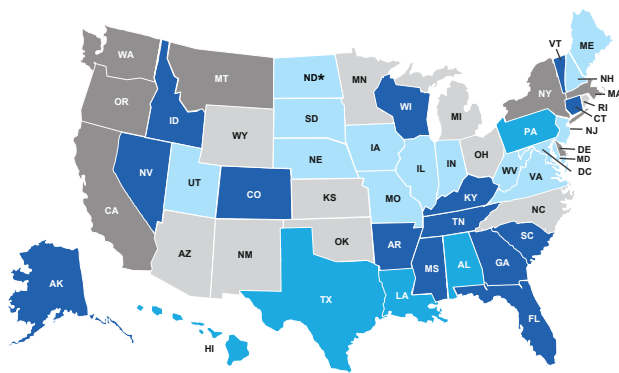
DAW = Dispense as Written

DNS = Do Not Substitute

Data – Reflects published state statutes/regulations on generic dispensing

*Indicates injured worker can pay difference between brand and generic when brand dispensed without proper authorization.

Current as of January 2016



PHARMACY STATE FEE SCHEDULES

- TIER 1: FS < AWP - 15% for either brand and/or generic
- TIER 2: FS between AWP and AWP - 15%
- TIER 3: FS = AWP
- TIER 4: FS > AWP
- TIER 5: No Fee Schedule

AWP = Average Wholesale Price

FS = Pharmacy Fee Schedule

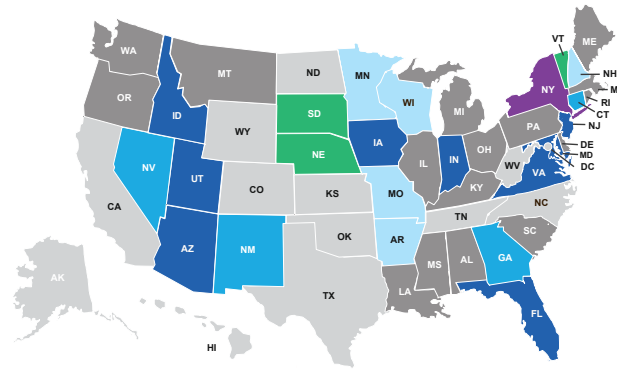
MAR = Maximum Allowable Reimbursement

Note – Tiers set according to MAR indicated by state fee schedule (not all states have fee schedule)

*Uses Fee Schedule not based on AWP

Data – Reflects published state fee schedule for pharmacies, not dispensing practitioners

Current as of January 2016



DURABLE MEDICAL EQUIPMENT AND SUPPLIES STATE FEE SCHEDULE

- State-established MAR
- Medicare allowable (may be +/- percentage markup)
- State Medicaid allowable
- Provider cost and/or invoice amount + markup
- U&C or reasonable amount
- Provider billed charge (may be +/- percentage markup)
- Not regulated or addressed/no specific Fee Schedule established

FS = Fee Schedule

MAR = Maximum Allowable Reimbursement

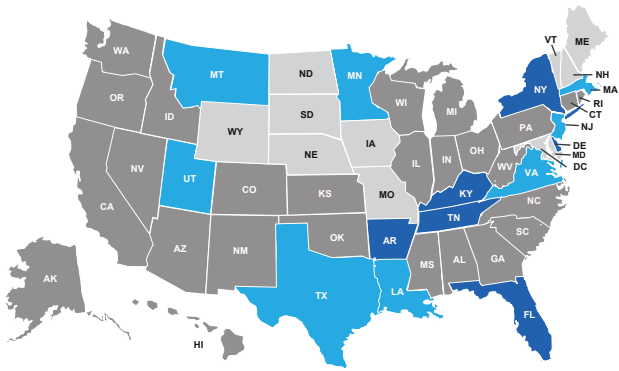
U&C = Usual & Customary Charge

Note – Categories represent interpretation of state requirements. Some states use tiered/multiple levels of reimbursement

Data – Reflects published State Fee Schedules

Current as of January 2016

WORKERS' COMPENSATION JURISDICTIONAL LAWS AND REGULATIONS



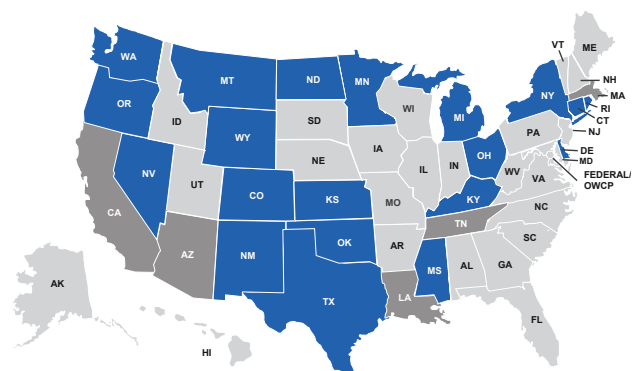
PHYSICIAN DISPENSING/REPACKAGING RESTRICTIONS

- Workers' compensation statutes/regulations limit physician dispensing and/or repackaging (restrictions on dispensing, billing, and/or reimbursement).
- Legal restrictions (Practice Act) in addition to workers' compensation controls
- Legal restrictions on physician dispensing (Practice Act)
- No clear legal or workers' compensation limits on physician dispensing and/or repackaging

Note – States such as AR, DE, FL, KY, NY, and TN have overlapping workers' compensation and state Practice Act controls

Data – Reflects published state statutes/regulations/case law on Physician Dispensing/Repackaging

Current as of January 2016

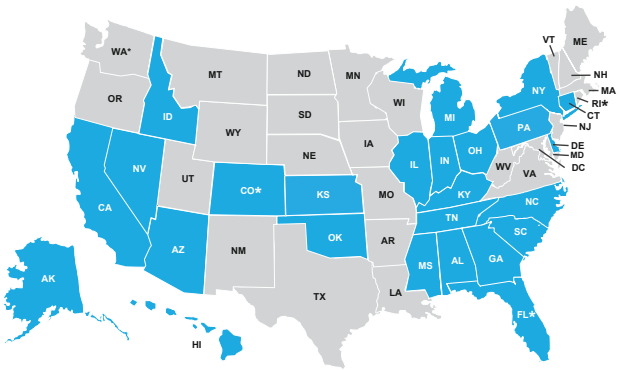


PAIN/OPIOID UTILIZATION POLICIES

- No Recent WC specific policy developments
- Developing/Discussing WC specific policy changes
- Adopted WC policies regarding pain treatment and/or opioid utilization

Data - Reflects adopted statutes/regulations regarding treatment of pain or opioid utilization specifically for workers' compensation claims. Also reflects ongoing development/discussion of policy changes

Current as of January 2016



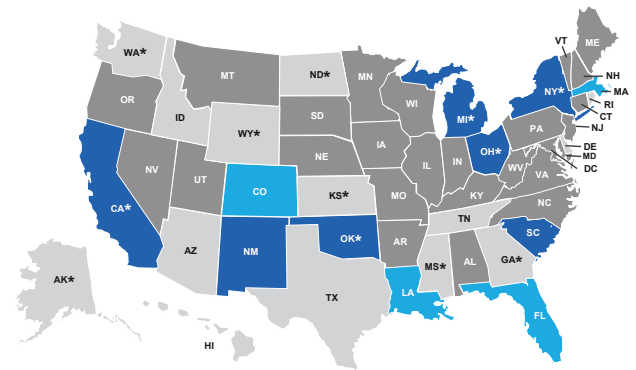
USE OF ORIGINAL NDC FOR REPACKAGED DRUGS

- Mandates use of original NDC for billing and/or reimbursement
- No mandate for use of original NDC for billing/reimbursement

*Additional regulatory/statutory factors and qualifications may apply

Data – Reflects published statutes/regulations/case law on usage of underlying NDC for repackaged drugs

Current as of January 2016



COMPOUNDED MEDICATION REGULATIONS

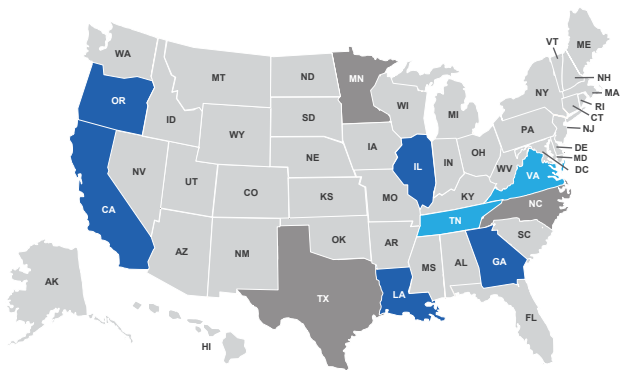
- Not addressed by specific WC regulations/fee schedules
- Unique state compounded medications reimbursement/billing qualifiers and/or provisions
- Individual ingredient(s) NDC required on compounded medications bills
- Language explicitly permits denial of reimbursement for individual ingredients lacking an NDC

*Additional state regulatory/statutory language regarding billing and reimbursement for compounded medications (including physician dispensed compounded medications)

Data – Reflects published statutes/regulations/fee schedules related to workers' compensation compounded medication billing/reimbursement

Current as of January 2016

WORKERS' COMPENSATION JURISDICTIONAL LAWS AND REGULATIONS



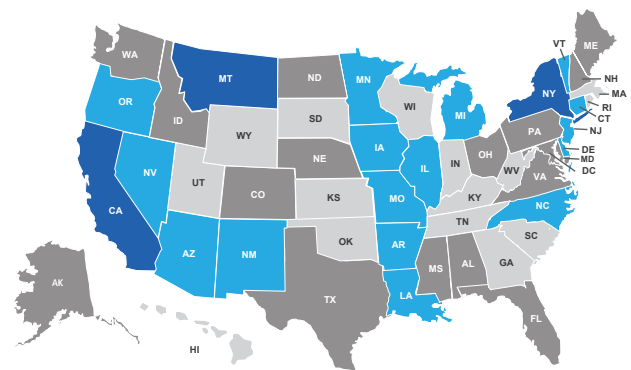
eBILLING REGULATIONS

- Regulations adopted but not mandated on providers
- eBilling regulations under development or legislatively required to be developed
- eBilling not mandated
- Mandated on providers/payers

Note – Map reflects eBilling mandates inclusive of all workers' compensation medical and pharmacy services

Data – Reflects published statutes/regulations requiring eBilling or published implementation guides with an eBilling effective date

Current as of January 2016

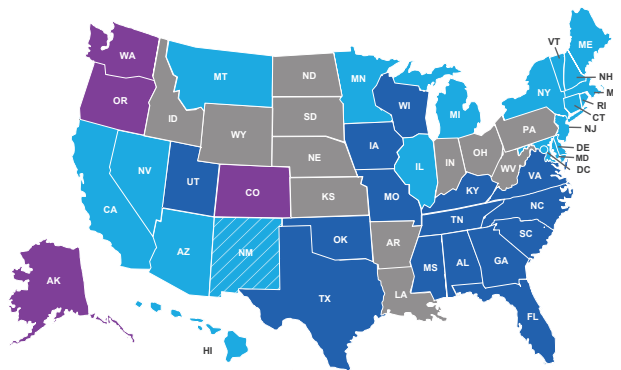


PHARMACY DIRECTION OF CARE

- Permitted under regulatory conditions
- Potentially permitted with restrictions/qualifications
- Prohibited by statute/regulation/case law
- Statute/regulation silent or unclear

Note – Categories set according to statute/regulation/case law relating to direction of care for pharmacy benefit/medical provider networks. Does not reflect dispensing physicians.

Current as of January 2016



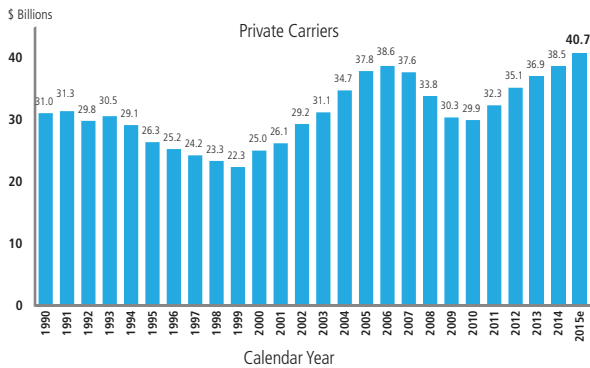
MEDICAL MARIJUANA

- Legalized Usage of Cannabidiol (CBD) for Limited Purposes
- Legalized Medical Marijuana
- Legalized Recreational and Medical Marijuana
- Medical use of marijuana currently prohibited
- Reimbursement rate(s) for Medical Marijuana Included in Fee Schedule

Current as of January 2016

Source: ProCon.org

WORKERS' COMPENSATION FINANCIAL UPDATE



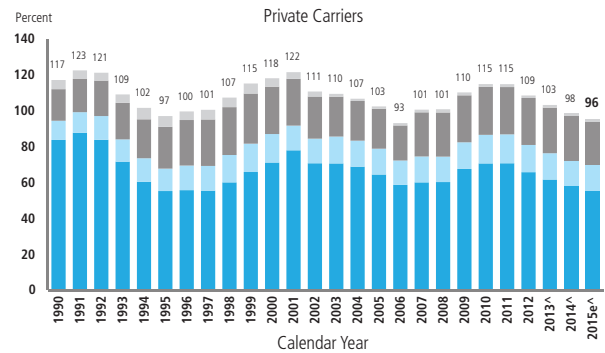
WORKERS' COMPENSATION PREMIUM CONTINUED GROWTH

■ Private Carriers (\$B)

Source: 1990 - 2014, Annual Statement data

2015e, NCCI estimate based on statutory data reported through 2nd Quarter 2015

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WORKERS' COMPENSATION COMBINED RATIO UNDERWRITING GAIN

■ Dividends ■ Underwriting Expense ■ LAE ■ Loss

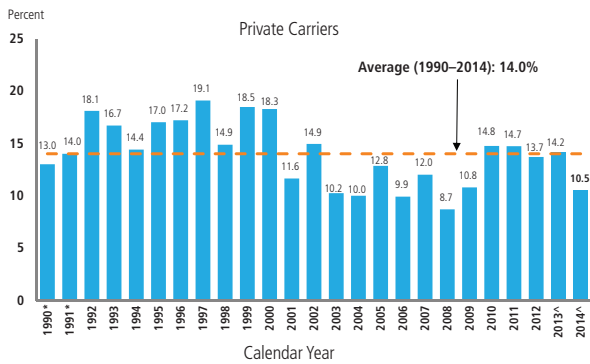
LAE = Loss Adjustment Expense

Source: 1990–2014, Annual Statement data

2015e, NCCI estimate based on statutory data reported through 2nd Quarter 2015

^2013–2015 adjusted to exclude a single large company; this exclusion has no impact on NCCI rate/loss cost filings

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WORKERS COMPENSATION INVESTMENT GAIN ON INSURANCE TRANSACTIONS RATIO TO NET EARNED PREMIUM

■ Private Carriers (\$B)

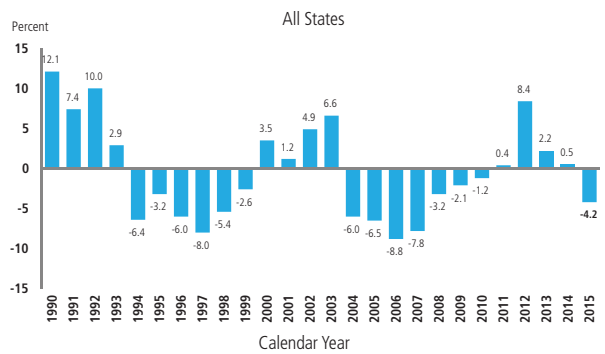
Source: Annual Statement data

Investment Gain on Insurance Transactions includes Other Income

*Adjusted to include realized capital gains to be consistent with 1992 and subsequent

^2013–2014 adjusted to exclude a single large company; this exclusion has no impact on NCCI rate/loss cost filings

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THE AVERAGE APPROVED CHANGES IN BUREAU RATES/LOSS COSTS

■ All States

States approved through October 31, 2015

Countrywide approved changes in advisory rates, loss costs, and assigned risk rates as filed by the applicable rating organization relative to the previously filed rates

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OPIOID ANALGESIC STATISTICS

THE NUMBER OF PRESCRIPTIONS FOR OPIOIDS HAVE ESCALATED FROM AROUND
76 MILLION IN 1991 TO NEARLY **207 MILLION IN 2013**



80%

OF ALL OPIOID
ANALGESICS DISPENSED
IN THE WORLD ARE
DISPENSED IN THE U.S.

99%

OF ALL HYDROCODONE
DISPENSED IN THE
WORLD IS DISPENSED
IN THE U.S.



IN 2010, ENOUGH PRESCRIPTION PAINKILLERS WERE
PRESCRIBED TO MEDICATE EVERY AMERICAN ADULT
EVERY 4 HOURS FOR 1 MONTH

6.1 MILLION

PEOPLE HAVE USED PRESCRIPTION PAIN RELIEVERS
NON-MEDICALLY IN THE PAST MONTH



52 MILLION

PEOPLE IN THE U.S., OVER THE AGE OF 12, HAVE USED
PRESCRIPTION DRUGS NON-MEDICALLY IN THEIR LIFETIME



SINCE 2000, THE RATE
OF DEATHS FROM
DRUG OVERDOSES
HAS INCREASED

137%

DURING 2014, A TOTAL OF

47,055

DRUG OVERDOSE DEATHS
OCCURRED IN THE U.S.,
REPRESENTING A
1-YEAR INCREASE OF 6.5%

46

AMERICANS DIE EACH DAY FROM
PRESCRIPTION OPIOID OVERDOSES

2 DEATHS AN HOUR

17,000

ANNUALLY

91% OF PATIENTS

WHO SURVIVE OPIOID OVERDOSE ARE PRESCRIBED MORE OPIOIDS

SOURCES

JURISDICTIONAL LAWS AND REGULATORY MAPS

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OPIOID ANALGESIC STATISTICS

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