

Employer Educational Guide



HPP Workers' Compensation Managed Care Program

CompManagement
Health Systems, Inc.

Introduction

Workers' compensation can be confusing, time consuming and asset consuming. Having CompManagement Health Systems (CHS) as a member of your workers' compensation team is like having your own workers' compensation expert on staff. Our professionals work to reduce the complexities of the system and help process your claims as efficiently as possible. Our ultimate goal is to help injured employees return to their employment as timely and safely as possible. This naturally benefits the employee and you, the employer.



Managed Care Background

State legislators passed the Health Partnership Program (HPP) in 1993. On March 1, 1997, after four years in development, the Ohio Bureau of Workers' Compensation (BWC) implemented the HPP. As the first program of its kind and size in the country, it was a massive undertaking. The program established a new process by which claims are reported and medically managed. The changes streamlined the claims procedures to be faster and more cost-effective. The BWC developed the program with input from employers, managed care organizations, medical providers and employee representatives. The results have been very positive to date. The BWC continues to work with the various stakeholders to further improve the HPP system and enhance what has already been accomplished.

The Importance of Employer Involvement

Claims costs do affect the amount of premium you pay for workers' compensation coverage. The increase in premium from only one claim could dramatically impact your rates for several years. A single claim may also prevent you from enjoying the favorable rates of membership in a group rating program. In addition to the costs of premium, you will also have indirect costs when an injured employee is off work. Hiring and training of replacement workers, loss of production, lower quality, and possibly future business loss are only a few of the indirect costs most employers never consider when evaluating injury costs.

If you already have a favorable claims experience, you should be congratulated. But don't relax, be cautious. Continue your oversight and involvement to ensure your good claims experience is protected.

What can an employer do to help reduce claims costs?

Become Involved in Your Workers' Comp Claims:

Too often employers simply refer their injured employees to the BWC or MCO to handle and never try to understand or follow the progress in the case. Many employers do not realize how much they can help the process by being involved. There are some simple steps every employer should follow for an effective program. CHS will be happy to sit down with you and help you establish these elements for your program.

Prompt Reporting:

Employer involvement to ensure prompt reporting is an absolute must for any successful workers' compensation program. Establish internal reporting procedures and policies, and educate your entire staff from the top down on the importance of prompt reporting. CHS can help by providing materials such as posters, ID cards and injury reporting kits. We are also happy to help you develop these procedures and can assist in presenting these training programs.

Maintain Contact:

Stay in touch with injured workers while they are off work. Make sure they understand who their primary contact should be within your company if they have any questions about their claim. Employees who do not hear from the employer often assume the employer does not care about them, and may even wonder whether they will have a job in the future. This contact will help maintain their confidence, positive attitude and willingness to return to work. A brief telephone call once or twice a week is all it takes. CHS will be in contact with the injured worker as well, but nothing replaces a call directly from you, the employer.

Know the Doctor:

Establish a working relationship with the medical provider in your area. These providers should become familiar with your operation, provide prompt quality care, timely reports, and be available to discuss cases when needed. CHS has an active Provider Services department ready to assist you with this process.

Offer Transitional Work:

Employers with strong workers' compensation programs almost always recognize transitional work as one of the most important elements of their program. If you do not have a formally written plan, at least be flexible in considering transitional duty to prevent workers from being off work. Transitional work can eliminate the need for the BWC to pay disability, which causes the greatest impact on your premium rates. This subject is covered as a separate topic later in this guide.

Ask Questions:

As you get involved, ask questions. CHS is here to help you and your injured workers. We are happy to talk to you by phone or in person to help you establish a better workers' compensation program.



Medical Case Management

Medical case management is involved to bridge the gap between the health care provider, the employee, the employer and the BWC. The experienced staff at CHS has the ability to help simplify the intricacies of medical treatment. Our priority is to return injured employees to work in a safe and timely manner. Utilizing our medical expertise, we communicate with the providers to coordinate and manage appropriate, quality and cost-effective medical care for your injured worker.

Early Intervention

Our philosophy is to provide early intervention in all claims. We can achieve better results for all parties when we are involved from the beginning. This illustrates the need for the employer's involvement in prompt reporting of new injuries. While medical providers are required by BWC to report to the MCO within 24 hours of initial treatment, employers should also report all claims to the MCO promptly. This will ensure our ability to intervene in a timely manner to assist in the critical early stages of the claim. Early intervention is also a key to a successful transitional duty program. Together these practices can nearly eliminate lost time cases and the need for payment of disability by the BWC which may result in an increase of premium.

After receiving notice of a claim, case management will contact all necessary parties to gather additional information, including appropriate medical reports and treatment plan from the provider. That information will be disseminated as required, and monitoring of the ongoing treatment will begin.

Utilization Review

This assures the delivery of quality, cost effective health care to your injured worker. We will evaluate the necessity, appropriateness and efficiency of the use of health care services, procedures and facilities to assure the most appropriate treatment is provided as soon as possible. Our staff of nurse case managers and case examiners have been provided with, and thoroughly trained on, the most up-to date treatment guidelines. When medical care lags or exceeds these guidelines, the case may be sent for peer review before the approval of further treatment.

URAC

CompManagement Health Systems was once again awarded accreditation for medical case management by the American Accreditation Health Care Commission (URAC). This prestigious accreditation represents the highest in national case management standards. In November of 2009 CHS was re-accredited for an additional two years with audits of 100% in all four locations.

The Provider Community

The importance of knowledgeable providers is a key element in a successful workers' compensation program. If a medical provider would like to perform services for workers' compensation patients, they must first be approved by the BWC. Within this approved group of providers is a specialized group – Occupational Health Providers. We strongly recommend employers make every effort to partner with the Occupational Health Facilities within their community. Bring their providers on-site; let them know of any transitional work programs you have implemented, and your expectations for the treatment of your injured workers. Whenever possible steer your employees to a specific provider for initial treatment. The rules of HPP do allow for payment to non-certified providers for initial treatment only. All follow-up treatment must be with a BWC-certified provider. Treatment by non-BWC providers may not be paid and could become the responsibility of the employee. To facilitate employer/provider relationships we encourage you to contact our Provider Services department at CHS. We can let you know the Occupational Health Providers in your area and arrange for you to tour their facilities and to meet their staff. A good relationship with your community workers' compensation providers will improve the communication flow between the employer, injured worker, provider and CHS.

Transitional Work Programs

Transitional work is usually comprised of a series of modified work assignments provided to employees for a temporary period of time while they are recovering. This allows many injured employees to remain productive and actively at work until they are able to return to their regular duties. Formal programs are the most effective, however if you are unable to implement, at least endorse the concepts and work with the case manager and the doctor to coordinate the return to work. Employers who regularly provide transitional duty find it is extremely beneficial to their business and the injured employee for the following reasons:

- Speeds recovery
- Maintains normal daily routine
- Emphasizes abilities instead of disability
- Maintains employee self-esteem and morale
- Provides positive model for peers
- Preserves a skilled and stable worker with the organization
- Helps promote open employer/employee communication
- Reduces direct and indirect costs of replacement workers
- Promotes morale among all employees
- Promotes cross training
- Maximizes productivity
- Decreases payments by the BWC and charges to employer

An Account Executive from CHS would be happy to meet with you to discuss transitional work programs and how you can begin to utilize this important cost-saving tool.

Vocational Rehabilitation

Vocational rehabilitation is another way of assisting injured workers to return to gainful employment. Our vocational specialists can help assess the needs of a specific case, and when appropriate help direct a specific plan of rehabilitation. Like transitional work, vocational rehabilitation is beneficial to both the injured worker and the employer in many ways:

- Speeds recovery and return to work
- Demonstrates positive attitude of employer
- Portions of the costs may be charged against the BWC Surplus Fund and not the employer's experience
- Coordination with provider, employer, BWC and the MCO
- Regaining productive worker for employer



Payment of Medical Bills

As your managed care organization, CompManagement Health Systems will process payment of medical bills on behalf of the BWC. The only exception is for pharmacy bills, which are handled by BWC's selected Pharmacy Benefits Administrator at 888-796-3864.

In most cases, the providers will bill CHS directly. The system at CHS can even accept billing from providers electronically. If bills are sent to you, the employer, or your injured employee, they should be forwarded to CHS at:

CompManagement Health Systems

Attn: Billing Department
PO Box 1040
Dublin, Ohio 43017

The bill payment system at CHS performs a comprehensive analysis of every bill. The system verifies that the charges and treatment are appropriate for the allowed conditions in the claims. Additionally, the system checks for pre-authorizations, treatment protocols, duplication, excessive treatment, fee schedules and other standards.

Following processing of the bill by our system, it is electronically transmitted to the BWC. Upon approval from the BWC and transfer of funds, CHS will issue a check directly to the provider.

If you have any questions about payment of a bill, please contact our customer care team at [888-247-7799](tel:888-247-7799).

Dedicated Case Management Team and Account Executive

As a client of CompManagement Health Systems, we assign a specific case management team and account executive to your company. The case management team is made up of a nurse case manager and case examiners to handle the day-to-day claim functions and coordinate return to work.

Account Executives are based throughout the state and are available to meet with you as needed. Account Executives can provide training about our services, review procedures and specific claims.



What should I do if one of my employees is injured on the job?

If the injury is serious or life threatening, see that appropriate care is provided as quickly as possible. Preference should be to utilize an Occupational Medical provider, however, emergency care may be provided by any facility or physician.

If the injury does not require immediate emergency care, or after emergency care has been provided, please follow these steps as soon as possible:

- 1 | Provide the injured worker with the CHS folder – “Five steps to take if you are injured on the job.”
- 2 | Review the contents with the worker and have them complete the BWC First Report of Injury (FROI) form contained in the folder.
- 3 | Direct the injured worker to the closest Occupational Medical provider, or a BWC certified provider that you are familiar with in the area. Provide the worker with an MCO ID card and instruct them to show the card to the provider when they go for treatment.
- 4 | As soon as possible, report the claim to CHS by any of the three methods:
 1. Call our Injury Report line: 888-247-4800
 2. Visit our website www.chsmco.com and click on “Submit a First Report of Injury”
 3. Fax the FROI to 800-334-4229

You may report the claim before receiving the FROI form from the injured worker.

After reporting the claim, maintain periodic contact with the injured worker to help sustain a positive and supportive attitude.

REPORT
CLAIMS
RIGHT AWAY.





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