

WSIA Liaison Committee Report

Patrick Reiman, Assistant VP Claims, Sedgwick
Laura Merritt, King County
March 5, 2020

The Liaison Committee met with representatives from the Department of Labor & Industries on March 5, 2019 9AM-12PM. Present for the meeting in whole or part of meeting from the Department were Jim Nylander, Brian Schmidlkofer, LaNae Lien, Starla Treznoski, Mike Ratko, Gina Mayo, Mark Phillips, Debra Hatzialexiou, Noha Gindy, Jeannine Griffo, Kim Wallace, Karen Jost & Ray Handley. Present from WSIA were Lisa Vivian (by phone), Lloyd Brooks, Patrick Reiman and Laura Merritt (by phone). Kris Tefft was tied up with Legislative efforts.

As your representatives for the WSIA Liaison Committee we can provide assistance in resolving claim management issues, policy or procedure concerns or specific individual claim related issues through our bi-monthly meetings with the L&I representatives.

Please contact Employer Representative Laura Merritt at 206-477-3380 or email Laura.Merritt@kingcounty.gov or TPA Representative Pat Reiman at 206-214-2813 or email at patrick.reiman@sedgwick.com with any issues you would like discussed during our next meeting will be rescheduled for May.

WSIA ITEMS

Office Careers

Debra H. discussed status of situation with Office Careers. VDRO is aware of one case being pulled back from the BIIA and addressing issues with defense counsel. Concern is for those who gained program completion but didn't complete all the classes. Common sense should prevail on program/training completed. Also recommended is a vocational evaluation of what the quality of training received by the employee and what was learned. They are not approving new plans with this vendor. Anticipate more disputes; but also recognize some employees have expressed satisfaction with program from this vendor. Interesting to note one of employees in news stories was already on pension for some period.

Legislation

Department's SI section, under current Director, position on legislation has been and will remain neutral; but attempt to impact legislation from behind the scenes. HB2409 anticipate some change in language (see Kris T. latest blog subsequently published). IME watered down from initial proposal and to a Legislative work group with L&I charged with guidance and a tight timeframe for report out. 911 operators ability to file PTSD on claims; but not presumptive other pending action.

LEP

Committee meeting scheduled today canceled due to conflicts. Making good progress and anticipate draft next couple meetings then stakeholder input.

Compliance Performance Measures

SI section established an internal workgroup to look at reducing goal timeframes currently in place starting with PPD closures. Also they are reviewing consistent reviews for Adjudicators on closing requests. Metrics provided (see attached). Current with metrics in spite of community concern expressed. No change in dispute volume.

Inquiry made on role of Wage Specialist now that few wage orders are issued. The Wage Specialist is engaged more in Lead duties. Wage order requests almost immediately zeroed out due to effective communication leading to 7/1 implementation.

Denial requests and overpayment request-preference by SI Section is to receive both at same time. They will issue separate orders.

COVID-19

Position being taken by WA L&I is time loss owed during quarantine period <https://www.governor.wa.gov/news-media/inslee-announces-workers-compensation-coverage-include-quarantined-health-workersfirst> Concern expressed on scope of who is quarantined and if mandatory vs. voluntary (statement seems to support quarantine by physician or public health officer). Also concern on treating different than other exposure cases so inquiry raised in health care setting does source patient need identified. By allowing time loss unclear if saying compensable if testing results comes back negative or no source patient identified. Also unclear whether Governor's bulletin applies only to health care providers or others such as nurses in education settings. Dept. is relying on similar treatment when Ebola was an issue a few years ago. Also unclear how this would tie to pending unemployment benefit bill. Further consideration asked to review treatment of self-insured vs. State Fund employers on Governor's/L&I position. More information to be forthcoming on list serve next few days.

Also under review is telemedicine payment policy and information should be forthcoming on any changes along with recognition it needs to be brought more current.

Claims Rules Modernization

Contractor engaged on test revamp. WSIA core curriculum approved. Pending is issue of classes for continuing education credits.

Revisions to 7/19 letters and templates should come out soon with a couple week stakeholder review by those groups involved in earlier feedback on revisions.

SELF INSURANCE UPDATES

Provider Incentives

Noha, Jeannine, Kim, Karen and Ray presented slide deck on this (see attached). Seeking input from SI community on how to engage us and thoughts on working draft document.

See also list serve on new physical medicine best practices and form.
Physical Medicine Progress Report

https://www.lni.wa.gov/forms-publications/F245-453-000.pdf?utm_medium=email&utm_source=govdelivery

Best Practices Physical Medicine

https://www.lni.wa.gov/forms-publications/F245-464-000.pdf?utm_medium=email&utm_source=govdelivery

Website Launch

Issues continue on search and some links. Request made to add RCW/WAC links under Claims Management as well as rebrand Insurance to Self-Insurance so more intuitive where to find information. LEP calculator has been fixed, but medical bill interest calculator stills needs fixed.

Audit

See attached

SI-Claims Performance Metrics

See attached



OCCUPATIONAL HEALTH **BEST PRACTICES**

WORKING TOGETHER TO KEEP PEOPLE WORKING

HW2020 Incentives

Self-Insured Employers Liaison Committee

March 5, 2020

Today's Objectives

- Share information about provider incentives.
- Gather your feedback about the financial incentives recommendations.



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Agenda

1. Discuss best practices.
2. Discuss incentives objectives.
3. Discuss incentives recommendations.
4. Gather your feedback.



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Occupational Health Best Practices

1. Report of Accidents are timely and complete.
2. Activity Prescription Forms are appropriate and timely.
3. Two-way communication occurs on claims with restrictions.
 - Provider/health services coordinator and employer/employer rep
4. Barriers to recovery are recognized by the health services coordinator conducting the Functional Recovery Questionnaire.
 - Six question survey developed by the University of Washington
5. Opioids are prescribed appropriately.



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Centers of Occupational Health & Education (COHE)

- Process improvement program with providers.
- A systems approach: partnering with healthcare.
- Non-Surgical attending provider (AP) within L&I's Medical Provider Network.
- Measure L&I's occupational health best practices.
- Annual best practice training.
- Assigned a health services coordinator.



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Adoption Level

- Incentive level based on how many best practices the provider/practice can meet or exceed the threshold.
 - Top Tier
 - High
 - Medium
 - Low



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Top Tier Criteria

- Non-Surgical attending provider (AP) within L&I's Medical Provider Network.
- Not a process improvement program.
- Provider's results and not the healthcare system or the practice.
- Pass the program's test.
- Meets/exceeds L&I's occupational health best practices measure thresholds.
- Quality checkpoints.
- Electronic Submission of key forms.
- Have a health services coordinator.



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Surgical Quality Care Program

- Best practices:
 - Pre and Post-op Activity Prescription Forms (APFs).
 - Timely surgery.
 - Surgeon sets release to work plans and goals early.
 - Review and process the Physical Medicine Progress Report form.
- Surgeons have a surgical health services coordinator.



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Why Update Incentives?

Healthy Worker 2020

Best Practices for:

Primary Occupational Health Care

Ensure ongoing care provided to injured workers is delivered using available best practices.

Surgical Care

Ensure surgical care provided to injured workers is delivered using available best practices; explore the opportunity to use innovative payment methods.

Chronic Pain and Behavioral Health Care

Implement methods to prevent chronic pain and/or behavioral health issues from creating or extending disability. Create a stepped care pathway that includes collaborative care and appropriate clinical care steps.

Physical Medicine

Develop best practices for physical therapists that will encourage early use of active care with a focus on function.

Catastrophic Care Services

Implement internal and external support systems for IW with catastrophic injuries.

Model of Care

Care Coordination

Opioid Prescribing Best Practices

Incentive Methods

Operations



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Incentives Objectives

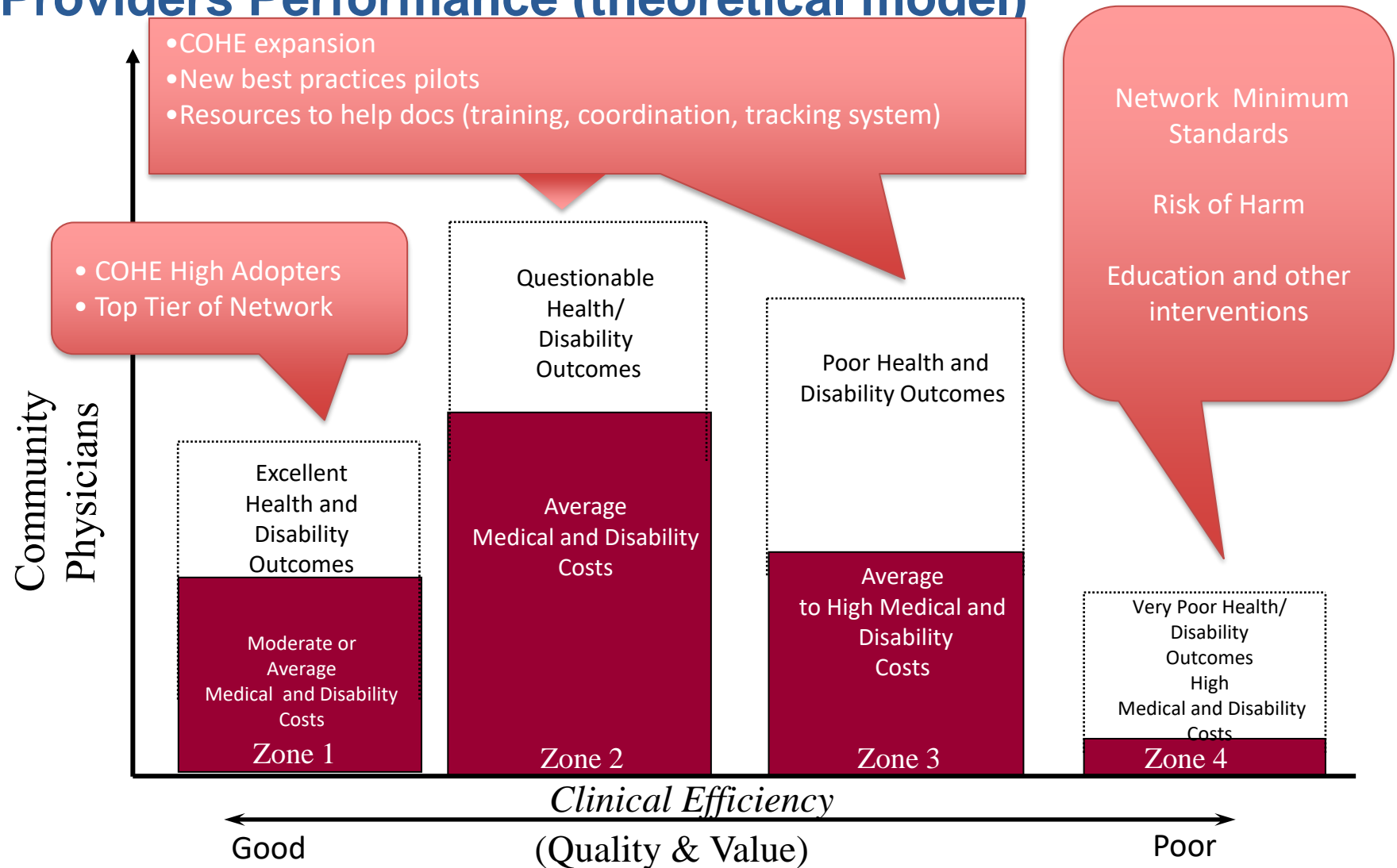
1. To engage with providers so that they join best practices.
2. To engage with providers so that they care about their best practice adoption level.
3. Leads to better outcomes for the worker and the employer.



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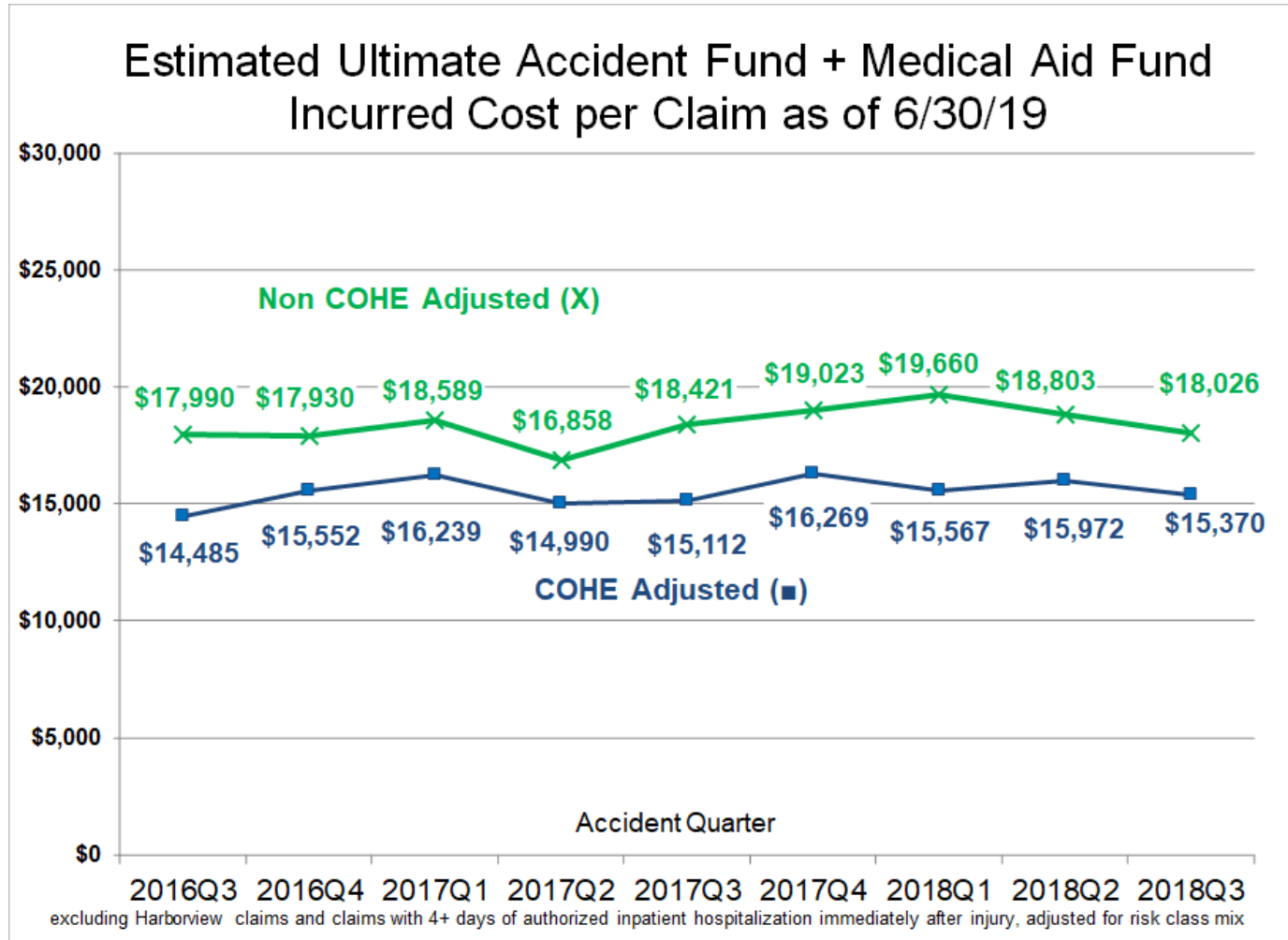
Providers Performance (theoretical model)



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COHE Program Measures



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Incentive Recommendations

Incentive	Provider Ranking	Implementation Team Recommendations
Financial Incentives	1	Recommended
Complex Claims Stipend	2	Recommended
Complex Claims Prep Work	3	Recommended
L&I Provider Liaison	4	Not Recommended
Incentive Reporting	5	Recommended
Recognition – Find-A-Doctor	6	Recommended – Delayed because of P1 Project
Virtual Town Hall	7	Not Recommended
Top Provider List	8	Not Recommended
Certificates & Conferences	9	Not Recommended
DME Authorization	10	Not Recommended



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Complex Claim

- Available to Top Tier providers only.
- Non-Financial incentives:
 - File preparation.
 - Case conference.
 - Treatment planning and coordination.
- Stipend amounts:
 - Provider: \$850 recommended (refer to financial model)
 - HSC: \$250
- Alignment with IME program.



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Incentive Reporting

- For financial incentives only.
- Research shows its importance.
- Needs to be messaged clearly to providers to avoid confusion.
- Needs to arrive consistently and with the best practice reporting.



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Financial Incentives Amounts

- Recommended Amounts:
 - Top Tier: \$350
 - High adopter: \$225
 - Medium adopter: \$175
 - Low adopter: \$35
- COHE/Top Tier premium



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Financial Incentives Methodology

Primary Occupational Health:

- Aligns all best practice programs.
- No double dipping (COHE, Top Tier, and Surgical).
- One time incentive for each provider per claim for the first year of the claim with the first E&M visit based on the adoption level.
- Capped at the first three providers.
- Do not have to be Attending Providers.
- Incentives proportional to the top-level incentive (65%, 50%, 10%)
- Ties to incentives' objectives and provider feedback.
- Must be billed, using an incentive only local code.



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Financial Incentives Methodology

Surgical: Same methodology as primary occupational health with the following changes:

- Focused on allowing providers similar per claim compensation.
- Tied to first two visits rather than first three providers.
- Not limited to the first year of the claim.
- Allows for multiple surgeries.



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Implementation Approach

- In the Medical Aid Rules & Fee Schedule (MARFS)
 - For all employers.
 - For only state-fund employers.
 - For state-fund employers and self-insured employers who sign a supplemental application.



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Questions and Further Feedback

Noha Gindy

Health Services Analysis

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Work Item	Target	Feb	Mar	Apr	May
Denial					
In (Newly Received)		319	589	420	440
Out (Completed During Month)		324	594	431	484
Completed within 30 days		314	564	418	476
Issued within 30 days percentage	98%	97%	95%	97%	98%
Average days to complete*		11	11	9	7
Pending		42	45	33	73
Closure PPD					
In (Newly Received)		163	217	267	139
Out (Completed During Month)		158	174	259	205
Completed within 60 days		152	171	249	192
Issued within 60 days percentage	90%	96%	98%	96%	94%
Average days to complete*		19	19	17	23
Pending		80	139	123	93
Closure TC/NC					
In (Newly Received)		531	605	638	576
Out (Completed During Month)		551	625	662	526
Completed within 60 days		521	580	623	486
Issued within 60 days percentage	90%	95%	93%	94%	92%
Average days to complete*		25	30	25	26
Pending		459	466	424	503
Protest					
In (Newly Received)		230	322	334	261
Out (Completed During Month)		261	322	381	326
Completed within 90 days		251	308	364	313
Issued within 90 days percentage	90%	96%	96%	96%	96%
Average days to complete*		63	56	42	54
Pending		412	417	383	400
Disputes					
In (Newly Received)		123	122	143	126
Out (Completed During Month)		96	98	107	115
Completed within 90 days		79	87	89	93
Issued within 90 days percentage	90%	82%	89%	83%	81%
Average days to complete*		54	40	54	50
Pending					
Total New		1366	1855	1802	1542
Total Out		1390	1813	1840	1656
Total Pending		993	1067	963	1069

* This figure has historically been mislabeled, and was in actuality "Average Age of Pending Work Items: complete".

2019								
Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Year Average
618	381	445	422	468	454	395	385	445
542	400	495	410	416	482	396	400	448
534	391	482	400	405	478	382	395	437
99%	98%	97%	98%	97%	99%	96%	99%	98%
6	9	11	10	8	8	7	7	9
26	50	49	52	55	48	50	70	49
202	187	150	160	171	157	163	141	176
172	264	161	197	164	167	210	128	188
163	248	155	178	158	161	198	122	179
95%	94%	96%	90%	96%	96%	94%	95%	95%
26	23	19	27	17	17	18	22	21
136	87	97	65	68	68	60	87	92
594	456	336	312	363	338	334	307	449
613	769	404	389	382	279	370	375	495
558	708	375	355	358	270	355	364	463
91%	92%	93%	91%	94%	97%	96%	97%	94%
32	31	27	32	22	22	27	24	27
532	259	236	137	112	248	234	181	316
323	300	296	256	379	289	291	265	296
313	359	287	287	404	259	317	310	319
293	349	275	273	389	251	309	299	306
94%	97%	96%	95%	96%	97%	97%	96%	96%
45	48	38	46	49	47	53	39	48
391	372	388	363	335	386	362	340	379
149	137	142	162	206	142	166	150	147
119	102	108	148	174	112	148	179	126
97	76	89	128	152	102	126	167	107
82%	75%	82%	86%	87%	91%	85%	93%	85%
53	67	58	45	45	37	55	55	51
		228	231	230	257	264	253	244
1886	1461	1369	1312	1587	1380	1349	1248	1513
1759	1894	1455	1431	1540	1299	1441	1392	1576
1085	768	998	848	800	1007	970	931	958

:". Beginning in September 2019, these figures have been corrected to reflect the true "Average days to

Audit Plan Brief: Self-Insurance – Audit

March 4, 2020

Background

The new SI Compliance audit plan was approved on December 31st, 2019. The audit team began work on the plan January 1st, 2020. The Timeliness Review consists of 351 employers. The performance portion of the plan is to run concurrently. Employers that do not pass the Timeliness Review will move directly into the Accuracy (Wage) Review and those that do not pass Accuracy (Wage) Review will move directly into the Entitlement Review. This brief is intended to show where the audit team is at in completing the audit plan. This will be shared quarterly or as needed.

Current Statistics as of March 4, 2020

Audit Statistics Summary	
Total Employers Scheduled Timeliness Review	351
Total Employers Remaining Timeliness Review	297
Phase of Audit	
Planning	7
Fieldwork	43
Total in Process	50
Employer Pass/Not Pass	
Passed (80% threshold)	0
Not passed and moved to Tier 2	2
Employer No Audit Eligible Claims	
# of Employers	2
Total	54
Total Employers Accuracy (Wage) Review	0
Total Employers Remaining Accuracy (Wage) Review	0
Phase of Audit	
Planning	0
Fieldwork	0
Total in Process	0
Employer Pass/Not Pass	
Passed (80% threshold)	0

Not passed and moved to Tier3	0
Employer No Audit Eligible Claims	
# of Employers	0
Total	0
Total Employers Entitlement Review	0
Total Employers Remaining Entitlement Review	0
Phase of Audit	
Planning	0
Fieldwork	0
Total in Process	0
Employer Pass/Not Pass	
Passed (80% threshold)	0
Not passed	0
Employer No Audit Eligible Claims	
# of Employers	0
Total	0

Key Performance Indicator's (KPI's) for 2020 through 2021

Direct Hours – Measures the percentage of gross hours used in providing client services (i.e. actual audit work).

2018 to 2019 Goal – **68%** Actual – **75% as of February 29, 2020**

Red Book Standards¹ – Measures the percentage of services satisfying Red Book requirements using a two-level quality assurance review process.

2018 to 2019 Goal – **99%** Actual – **100%**

Client Satisfaction – Measures the percentage of clients who, based on their experience during the audit, report being satisfied with the service they received.

2018 to 2019 Goal – **75%** Actual – **TBD – Nothing to report yet on this measure**

Opportunities/Resolution

Opportunities	Resolution

¹ The International Professional Practices Framework (IPPF) aka *Redbook* is the conceptual framework that organizes Authoritative Guidance published by the Institute of Internal Audit for auditors.

Staff contact

Brian Schmidlkofer, Self-Insurance Compliance Operations Manager (360) 902-6839

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