WSIA Liaison Committee Report

Glenn Hansen, WC Manager, Multicare Health System Patrick Reiman, Manager Claims, Sedgwick May 12, 2016

The Liaison Committee met with representatives from the Department of Labor & Industries on May 12, 2016. Present for the meeting in whole or part from the Department were Jim Nylander, LaNae Lien, Brian Schmidlkofer, Bill Bailey, Gary Franklin, Simon Javaher, Karen, Leah, Misti Puening and a graduate student Dr. Gauda working with Dr. Franklin. Present from WSIA were Kris Tefft, Lisa Vivian, Glenn Hansen and Patrick Rieman.

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 S-I Employer Representative Glenn Hansen, Self-Insured Employer Representative 253-459-6803 or email at glenn.hansen@multicare.org or TPA Representative Pat Reiman at 206-214-2813 or email at patrick.reiman@sedgwickcms.com with any issues you would like discussed during our next scheduled meeting in November.

GENERAL

The safety topic was not discussed at this meeting.

FOLLOW-UP ITEMS

Staffing

They are down two staff members presently. They are looking for a Lead position. Audit is fully staffed now.

Legal Services

No updates here.

WSIA NEW ISSUES

SIRAS Workflows

Bill Bailey and Misti Puening discussed how the medical data would flow into SIRAS and also how ISO reports could be designed. There is a charge of \$195 per month to access reporting. There was a discussion about building "help me" and "make me" processes into the audits. Jim stressed that they prefer education before sanction. A request was made to think about what types of reports and data our community would

use. A suggestion was made to see if there are reports used in other states that are already created could be shared so we have a starting point.

VDRO Collaboration with SI Adjudicators

An issue was brought up regarding whether or not the adjudicators are collaborating with VDRO before issuing an order adverse to the VDRO outcome upheld by the Director. Self-Insurance is revisiting that process.

Provider Education on Closing Exams

An issue was brought up on what efforts are being made by the Department to educate providers on the methods and value of performing closing examinations. This might impact the number of IME requests for the purpose of rating only. The Department is looking at that.

IME Bill Data

Glenn brought up that the IME bills are inconsistently submitted and not always on a HCFA form with all of the data required to submit to ISO. He suggested that the Department reach out to IME providers to have a discussion about uniform billing requirements. it seemed to be the Department's common practice to request that an IME be scheduled on a high percentage of reopening applications. He questioned whether or not Self-Insurance had a process on this topic. LaNae said she would look into that.

Occupational Health Best Practices

Dr. Franklin came and presented his thoughts on improving the outcomes for workers. His vision is to have all doctors treating injured workers use a stepped care approach to reduce long term disability. This would be a five year plan for procedures to follow in every single case. He discussed Healthy Worker 20/20 which extends the 12 week COHE model to up to a year. We discussed the issue of network providers not all living up to the treatment guidelines and the standards. He discussed his desire to see Self Insurers use the COHE model and discussed reviewing why a previous attempt failed. He discussed wanting all employers to be able to use Qualis for utilization review so that every employee who is injured is evaluated using the same guidelines. He wants UR taken away from the claims person. We discussed how the Department could influence providers differently. We suggested that those providers who are toward the bottom tier of providers should be moved out of the network if they are not making progress toward the middle to top tiers.

Imaging

It was reported that imaging was backed up 2-3 days. We were assured this was being worked on and that documents in the que would be dated the date they arrived and not the date they were posted by the imaging staff.

Printable Phone List

We requested and were able to obtain an updated phone list, but also asked that this be updated on the Department's web site regularly.

Rules for Attendance of Functional Capacity Evaluations

An issue came up regarding whether or not attendance at an employer scheduled Functional Capacity Evaluation would fall under the same compliance rules as IME examinations. The Department will research that issue.

CRI Unit

It was reported that the CRI unit had stopped working on Self Insured claims contrary to the rules. There was a new supervisor and it is believed this problem is being solved.

Tobacco Cessation Treatment

Simone shared the new knee treatment guideline changes and the tobacco cessation treatment guideline for surgical care. The policy outlines when employers should pay for tobacco cessation treatment prior to surgery.

Wage Matrix:

The Tier 1 audit matrix was shared with the group. There was a long discussion about the confusing nature of the matrix and the same terminology used to describe different wage types. It was suggested that some of the descriptions have more detail for clarity. Some wages that were previously directed during audit to be included are now not included. There was an issue raised on how we deal with that for employers who have added wages they now shouldn't have.

Wage Audits:

Brian provided an update dated 5/1/16 that is attached to these minutes. The Tier 1 audit is not complete yet, but work is going into the Tier 2 audit which will focus on timeliness and timing of benefits. The next meeting of the Audit Advisory Committee is June 6. 2016.

Certifications/Surrenders

None.

SELF-INSURANCE BUSINESS PLAN UPDATE

Audit Reform

A new draft letter was shared for future audits and is attached to these minutes.

Measures

No changes in measures.

SI-CAMS
LaNae provided an update on the number of work items presently in SICAMS. The report is attached to the minutes.



Audit Reform Brief: Self-Insurance - Update

May 1, 2016

Background

In 2015, the Self-Insurance Audit Program and Self-Insurance community took part in a Tier 1 Audit Pilot where the area of focus was the calculation of an injured workers base monthly wage which is the basis for providing Workers Compensation Benefits to the worker.

We learned a lot in 2015 about the new T1 audit model, specifically; what worked, what did not work, and areas overall that we would like to continue to develop and focus on moving forward. There are approximately 180+ employers left to finish the Tier 1 Pilot. From January to October of 2016 the focus is to complete the remaining employers and continue development of Tiers 2, 3 audit processes and SIRAS development efforts.

Current Statistics as of April, 2016

Audit Statistics	
Total Audits Initiated	56
Phase of Audit	
Planning	11 41
Fieldwork Finalization	41
Total	56
Walkthrough of Audit Results	
Total Walk-Throughs Declined	0
Total Walk-Throughs Pending Total Walk-Throughs Completed	4 0
	0
Total	
Employer Pass/Not Pass	
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Not Passed	0
Total	0
Claims Reviewed/Reported	en, canagramami ana kanana ang kanana
Total Claims Reviewed	0
Total Claims Reported	
Audits Completed Total Audits (No Audit Eligible Claims)	
Total Final Reports Issued	0

Key Performance Indicator's (KPI's) for 2016

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

2016 Goal - 68% Actual - 65%

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

2016 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.

2016 Goal - 75% Actual - 83%

Opportunities/Resolution

Opportunities	Resolution		
Audit Vacancies	Vacancies have been filled. 2 new auditors started on April 18, 2016 and have begun training.		
Audit Production	Audit team sent out initiation letters to 56 employers. The goal is to complete the remaining 180 employers by end of September 2016. With 8 auditors it averages out to 4 audits per month. New initiation letter, with attestation and wage matrix have been finalized and implemented.		
Tier 2, 3 and SIRAS Development	Audit staff is currently working on procedures for Tier 2 audit and contribute to SIRAS Development as needed.		
Lean and Process Improvement	Developing plan to work on 5 action items to help improve efficiencies immediately. This effort is being coordinated with the Lean Transformation Office.		

Staff contact

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

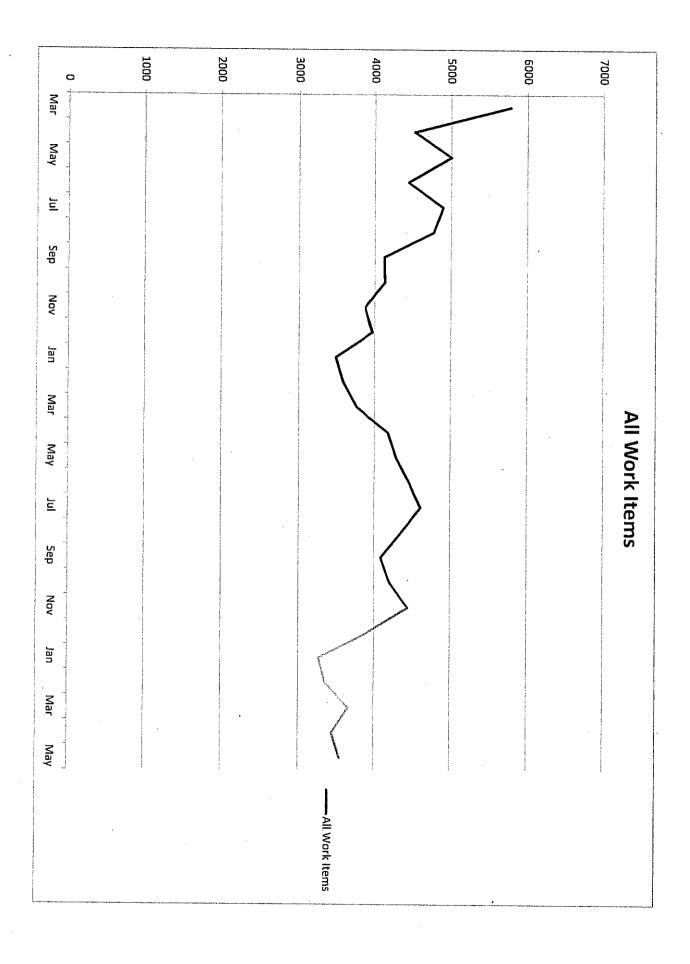
¹ The International Professional Practices Framework (IPPF) aka *Redbook* is the conceptual framework that organizes Authoritative Guidance published by the Institute of Internal Audit for auditors.

SICAM Performance Measures 2016

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Deniai							
New Control of the Co	381	407	463	426			
Out	428	480	558	435			
Completed within 30 days	399	463	526	415			
Issued within 30 days percentage 98%	93%	%96	96%	95%			
Average days to complete	15	् : 9 ः	1	900			
Pending	101	94	54	51			
Closure PPD						:	
New	204	237	294	274		:	
Out	244	244	338	299			
Completed within 60 days	216	229	314	273			
issued within 60 days percentage	89%	94%	93%	91%			
Completed within 90 days	233	234	328	291			
Issued within 90 days percentage 90%	95%	96%	97%	97%			
Average days to complete	26	23	22	25			
Pending and attributed books and an experience of the analysis of the second of the se	141	174	186	189			
Closure TC/NC							
New The State of t	481	565	617	587			
Out	610	548	818	639			
Completed within 60 days	452	470	704	574			
Issued within 60 days percentage	74%	86%	86%	20%			
Completed within 90 days	552	513	769	613			
Issued within 90 days percentage 90%	90%	94%	94%	96%			
Average days to complete	43	∵ 34	36	325			
Pending	463	787	282	ם נו			

SICAM Performance Measures 2016

Protest				
New	276	298	364	349
100 to 10	292	351 (459	459	20
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Wage				
New	67	757 1822 755	822	705 TANK
Out	929	798	1002	830
Completed Within 60 days.	676 709 935 773	709	935	773
Issued within 60 days percentage 70%	73%	89%	93%	93%
Average days to complete:	49	30	34 26	
Pending	631	725	617	299
Total New	2637	2920 3244 3049	244 3	049
Total Out	3501	3105 4	4054 3	3250
Total Pending	1926	2228 1882 2074	882 2	074 Marie Control of the Control of
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PROGRAM COMPLIANCE

PO Box 44893, Olympia, WA 98504-4893

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RE: L&I Self-Insurance P Firm Number: Click	rogram Compliance '	Tier 1 Audit Pilot	The state of the s
Dear Click here to enter text.:	and the second		e de la companya de
We are starting a Tier 1 Audinvolve a 3-tiered approach. injured workers' monthly watto set benchmarks for future	Tier 1 began on Januages. The pilot will al	ary 02, 2015 as a pil	lot focusing on verifying
Penalties will not be issued in this letter by Click here to enter	-	ess we do not receive	the records requested in
What we need:	•		
Please provide the following the enclosed "Clarification o	· · · · · · · · · · · · · · · · · · ·		•
☐ "Earning Statements"	, by pay periods, for	the time frame listed	l in the chart.
☐ Daily time records fo	r 3 months prior to th	e date of injury.	
☐ Definitions of all pay	codes used in Earnin	g Statements and tir	ne records.
☐ "Bonuses" and "lump included on the Earni If no "bonuses" a of injury, please of	ng Statements).	ments" were paid 12	months prior to the date
☐ Monthly amount of the	ne employer's contrib	oution into the health	care plan on the date of

injury.

Click here to enter a date. Page 2 of 4						
☐ Union contract in effect on the date of injury.						
☐ Most current SIF-5A, if not yet submitted to the department.						
☐ If the worker indicated on the SIF-2 (report of accident) that they had more than one employer at the time of injury, provide the information listed in the enclosure.						
☐ (Auditor Select) For seasonal/intermittent injured workers: wages from all employment for the 12 months preceding the date of injury. If records were not obtained, explain why and attach your letter to the worker requesting all wages paid 12 months prior to date of injury.						
☐ The name, phone number, and email of the contact person in the payroll department, the worker's compensation department, and your third party administrator.						
<u>Injured Worker</u> <u>Claim Number</u> <u>Date of Injury</u> <u>Period From</u> <u>Period To</u>						
Your response is required within 14 working days of the date of this letter. We look forward to receiving the requested information by Click here to enter a date.						
Please mail the requested documents to my attention at:						
PO Box 44893 Olympia, WA 98504-4893						
If you prefer to e-mail the information, contact me to set up a secure e-mail account.						
Need assistance?						
I would be happy to talk with you. If you have any questions regarding the documents requested, please contact me.						
We appreciate your cooperation in working with us to pilot the Tier 1 audit.						
Sincerely,						
Choose an item.						

Click here to enter text. Click here to enter a date. Page 3 of 4

Program Compliance Representative (360) 902-Click here to enter text.

cc: Click here to enter text.
Choose an item., Compliance Supervisor
Audit File

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Clarification of Documents required for Tier 1 Audit

Earning Statements for all days paid in the period requested

- a. Earning statements may also be pay stubs, payroll registers or earnings history.
- b. Must show all hours and earnings paid in each pay period.

Daily Time Records (time sheets, time cards)

a. To determine the correct employment pattern for the worker, a minimum of 3 months of daily time records prior to the date of injury is required.

Bonuses and Lump Sum Payments paid in the 12 months prior to date of injury

a. See enclosed "Wage Classification Matrix".

Employer's Contribution to Health Care Benefits

- a. Provide documentation showing the employer's monthly contribution for health care benefits for the worker and their family at the date of injury.
- b. If the employer's contribution for health care benefits are based on hours worked or you contribute into a union trust plan provide the hourly contribution rate on the date of injury. Please state the maximum number of hours paid per month, if applicable.

Union Contract effective on the Date of Injury

- a. If more than one contract, please identify which contract covers which worker.
- b. If a contract is pending ratification, please let me know.

If the worker indicated on the SIF-2 (report of accident) that they had more than one employer at the time of injury, provide:

- a. Documents used to calculate the wages for that employer.
- b. If records were not obtained, explain why. And send copies of your letters to the worker requesting the wages.

If you have a Claims Administrator, contact them to assist you with items pertaining to the SIF-2 and SIF-5A forms.

Additional records or information may be requested at any time during the audit process.

Bonus and Lump Sum Payment Attestation Document

Complete and return this document with your payroll documentation if there are claims where no bonuses or lump sum payments have been paid in the 12 months prior to the date of injury.

Employer Name:	Account ID	n en
(Select All that Apply):	en en grande de la companya de la c La companya de la co	
□ None of the claimants selected for audiinjury.	t have received a bonus in the 1	2 months preceding the date of
Below is a list of the claimants selected preceding their respective dates of injuries.		d a bonus in the 12 months
Claimant Name	Claim Number	Date of Injury
		. /
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the dates of injury. □ Below is a list of the claimants selecter months preceding their respective dates		d a lump sum payment in the 12
Claimant Name	Claim Number	Date of Injury
Ciamian Name	Claim Number	Date of Injury
·		
		-
I am reporting complete and accurate information provided is true and accurate.	tion on this form. I swear under p	penalty of perjury that the
Authorized Rep Signature		

Wage Classification Matrix

This is a resource tool and does not include all the possible payroll types. If you have questions about a payroll type that is not found on this list please contact Self-Insurance Claims Training at 360-902-6901 or SITrainerquestions@lni.wa.gov

<u>Bonus</u>: A sum paid for services in addition to or in excess of that which would ordinarily be given and is closely linked to the work and the wages paid for that labor, must be paid pursuant to contract of hire or paid as consideration for work performance and included on the W-2 form (FICA and income taxed paid).

• Period Used to Calculate Bon us: 12 months prior to date of injury per RCW 51.08.178(3)

Other Compensation (Lump Sum Payments): A sum paid that doesn't meet the definition of a "bonus" but still qualifies as part of the worker's wages under RCW 51.08.178(1), which provider: ... "wages" shall include the reasonable valuate of board, housing, fuel or other consideration of like nature received from the employer as part of the contact of hire, ..."

• <u>Period Used to Calculate Other Compensation</u>: If paid annually use 12 months. If paid monthly, bi-weekly or weekly use monthly value at date of injury.

		Include	Projects At 1 Washington to	
Payroll Description Examples	Compensati on Type	in Wage? Y/N	General Description	Citation Source
COLA Payouts	Other Compensation	Y	Payment made instead of increasing the employee's base hourly rate	• RCW 51.08.178(1)
Medical Subsidy Pay in Lieu of Benefits	Other Compensation	Y	Payment made to employee for opting out of employers health care benefit plan.	Cockle v. Department of Labor & Indus.
Shift Differential Pay (Not Paid Hourly)	Other Compensation	Y	Shift differential paid for working other shifts. Blended rate or cannot be defined based on hours worked.	 RCW 51.08.178(1) Fred Meyer, Inc. v. Shearer, 102 Wn. App 336 (2000)
TransportationFuelMileage	Other Compensation	Y	Paid to the employee as the employee is using their personal vehicle for company use/benefit. Paid to employee in a flat amount or based on distance/time. Not included if the amount is reimbursed to the employee.	• RCW 51.08.178(1)
 Skill Block Level Increased Skill Pay Proficiency Compensation Education Pay Specialty Pay 	Other Compensation	Y	Paid to an employee due to the employee having a specialized skill set or level.	• RCW 51.08.178(1)
Weekend Bonus	Other Compensation	Y	Paid to an employee for working on a flex day or on a weekend day	• RCW 51.08.178(1)
Incentive Pay	Bonus	Y	Paid to the employee for department, hourly, year-end or other incentives.	 RCW 51.08.178(3) In re Maria Diaz, Dckt. No. 03 14554 (2005)

Wage Classification Matrix

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Payroll Description Examples	Compensati on Type	Include in Wage? Y/N	General Description	Citation Source
 Performance Bonus Project Bonus Quality Bonus Accuracy Bonus Year-End Bonus 	Bonus	Y :	Paid to the employee as a consideration of work performance (i.e. meeting of company production/sales goals, completion of work on/ahead of schedule, etc.)	 RCW 51.08.178(3) In re John F. Berg, Dckt. No. 02 23331 (2002)
Signing Bonus	Other Compensation	Y	Paid to the employee for signing the initial contract of hire paperwork	• In re Park E. Johnson, Dckt. No. 99 13440 (2004)
Reward & Recognition Payment Care Award	Bonus	V 1 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	Paid to the employee for recognition or reward for job performance or service.	 RCW 51.08.178(3) Kenicott v. Bd. of Sup'rs of Wayne County Larson's Treatise on Workmen's Compensation
	Other Compensation	Y	Paid to the employee for actual signing of the union contract	• RCW 51.08.178(1)
Union Contract Settlement	Retro Payment	N	Payment of the underpayment owed to employee for the hourly rate increase due to contract signing being delayed. Could be a Change of Circumstance if received after date of injury but effective on or before the date of injury.	• RCW 51.28.040
 Gift Card Christmas Gift Christmas Bonus 	Other Compensation -	Y	Paid to the employee as a consideration of work performance (i.e. meeting of company production/sales goals, completion of work on/ahead of schedule, etc.)	 RCW 51.08.178(3) Kenicott v. Bd. of Sup'rs of Wayne County
		N	Paid to the employee as gratuity or gift and is not related to work performance	Larson's Treatise on Workmen's Compensation

Wage Classification Matrix

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Payroll Description Examples	Compensati on Type	Include in Wage? Y/N	General Description	Citation Source
,		Y	If paid in cash and reported to the IRS as taxable income	 RCW 51.08.178(3) In re Scott A. Waugaman, Dekt. No. 01 16694 (2002)
Profit Sharing Bonus	N	If not paid in cash and part of a qualified retirement plan	 In re Gary L. Priley, Dckt. No. 05 21426 (2006) Corrected Board Order Cockle v. Department of Labor & Indus. 	
Vacation PayoutSick Leave PayoutPTO Lump Sum	Cash in Lieu Of	N	Payment for vacation, sick or PTO is not a bonus and is not used in calculation wages.	• Fred Meyer, Inc. v. Shearer, 102 Wn. App 336 (2000).
Longevity Pay (Not Paid Hourly)	Other Compensa t ion	Y	Paid to the employee for years of service.	• RCW 51.08.178(1)

Tobacco Cessation Treatment for Surgical Care

Smoking or other use of tobacco does not meet the definition of an industrial injury or occupational disease and the insurer will not accept it as a condition under the claim. However, tobacco cessation treatment may be covered as a temporary aid to recovery when it is preauthorized prior to surgery and certain criteria are met. This is based on evidence that shows tobacco cessation before surgery helps reduce post-operative complications and improve surgical outcomes (insert link to evidence).

Required Criteria for Treatment

To provide workers with the best chance of having a good surgical outcome, the insurer will cover tobacco cessation treatment for planned surgeries when all the following criteria are met:

- 1. The worker uses tobacco product(s) (cigarettes, pipes, cigars, smokeless tobacco) on a regular basis AND
- 2. Tobacco cessation treatment has not previously been paid on the claim, *or if it has*, an exception for repeat treatment has been made based on individual claim review AND
- 3. The provider recommends tobacco cessation treatment, OR L&I's medical treatment guideline for the surgery recommends or requires tobacco cessation treatment prior to surgery (Table 1) AND
- 4. A worker meets the surgical criteria in L&I's medical treatment guideline when authorization for a planned surgery is requested AND
- 5. The provider and the worker sign and return the department's authorization letter for tobacco cessation treatment.

Table 1: L&I Guidelines Requiring or Recommending Tobacco Cessation

- <u>Cervical Radiculopathy</u> (requires two negative Cotinine tests)
- Lumbar Fusion
- Shoulder Conditions: Rotator Cuff Repair

Future guidelines that require or recommend tobacco cessation will be posted on the <u>Medical Treatment Guidelines</u> webpage as they are created.

Treatment Description and Coverage

Studies show the most effective tobacco cessation treatment includes both pharmacotherapy and behavioral therapy or counseling support.

Pharmacotherapy

Pharmacotherapy should start at least 4 weeks before the planned surgery and may continue for up to 12 weeks. It consists of one of the following treatments:

- 1. Any combination of covered nicotine replacement therapies (NRT) patches, gum or lozenges), OR
- 2. Varenicline (brand name Chantix) oral medication OR
- 3. Buproprion (brand name Zyban) oral medication

Limitations on Pharmacotherapy

- Nicotine nasal sprays and inhalers are not L&I approved cessation products.
- Electronic cigarettes (e.g "e-cigarettes" and "vaping") are increasingly being used to deliver nicotine, sometimes as an aid to quitting cigarettes. There is insufficient evidence for their effectiveness and safety and they are not FDA-approved for tobacco cessation. The department does not cover these products.
- All medications must be prescribed on standard prescription forms and obtained from a pharmacy for them to be payable.

Behavioral Therapy or Counseling

Behavioral therapy or counseling on quitting tobacco may be done through multiple methods such as in-person office visits, a telephone hotline, or use of an application on an electronic device. L&I covers up to 8 sessions of in-person counseling provided by an L&I covered provider. Workers may have additional resources for behavioral therapy or counseling for tobacco cessation outside the workers' compensation system, and if so, those services will not be covered by L&I.

Resources for Workers and Provider

- Washington State Department of Health: http://www.doh.wa.gov/YouandYourFamily/Tobacco/HowtoQuit
 - o SmartQuit TM * App, which is free to anyone that lives in Washington State
 - o Call the Washington Department of Health Tobacco Quitline at 1-800-QUIT-NOW (1-800-784-8669).
- U.S Department of Health and Human Services: http://smokefree.gov/
- Centers for Disease Control and Prevention: http://www.cdc.gov/tobacco/quit_smoking/index.htm

Authorization Request Procedure

For State Fund Claims

All requests will be reviewed by L&I claim managers.

- Complete the <u>Preauthorization Form</u> and fax to: (360) 902-4567
- For additional information contact the claim manager
 - o To obtain the claim manager's phone number call 1-800-831-5227
 - o Attending provider, concurrent care provider or IME provider log into the <u>Claims</u> & Account <u>Center (CAC)</u>.

For Self-Insured Claims

Please contact the self-insured employer (SIE) or their third party administrator (TPA). For a list of SIE/TPAs, go to:

http://www.Lni.wa.gov/ClaimsIns/Insurance/SelfInsure/EmpList/Default.asp

Billing Information

Billing information can be found in the Payment Policies section of L&I's fee schedule CPT Codes for Tobacco Cessation Counseling (limited to a maximum of 8 units of any combination):

99406: 3-10 minutes – intermediate level

99407: > 10 minutes – intensive level