

# WSIA Liaison Committee Report

**Glenn Hansen, WC Manager, Multicare Health System**  
**Patrick Reiman, Manager Claims, Sedgwick**  
**March 2, 2017**

The Liaison Committee met with representatives from the Department of Labor & Industries on May 4, 2017. Present for the meeting in whole or part of meeting from the Department were Jim Nylander, LaNae Lien, Brian Schmidlkofer, Mike Ratko, Gina Mayo, Kelli Zimmerman, Sara Martin, Sara Wetsch-Betts, Sarah Holm, Brian Malcom and Emily Gunderson. Present from WSIA were Kris Tefft, Lisa Vivian, Glenn Hansen and Patrick Reiman.

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](mailto:glenn.hansen@multicare.org) or TPA Representative Pat Reiman at 206-214-2813 or email at [patrick.reiman@sedgwickcms.com](mailto:patrick.reiman@sedgwickcms.com) with any issues you would like discussed during our next scheduled meeting in November.

## **GENERAL**

Handout on Top 10 Workplace Safety Tips for Every Employee-see attached.

## **FOLLOW-UP ITEMS**

### **Benefit Accuracy Work Group / Wage Consistency**

Discussion held on State Fund use of SIF5A forms or similar and also payroll detail for wage consistency with SIE. Mike R. to check into further as assured State Fund trained and using SIF5A similar. About a year from them have electronic copy programmed. Suggest Brian S. share with State Fund matrix developed for SIE on wages.

### **OMD Policy Updates**

Simone was unable to attend. See Health Policy News for SIE hand out attached. Discussion on what happens to public comment provided and in particular on CTS changes, was it considered or was policy adopted as presented. Concern was language use of "liberally construed" in guide.

### **FTTP File Material to LNI**

ACHIEV-Lisa discussed provider community concerns their view of CAC not the same as view they get with State Fund claims. CAC wouldn't have assigned SIE adjudicator information and only documents provided to date by SIE/TPA on claim. Discussion around Multi-Care and Eberle Vivian pilots on upload of documents and should it be out of pilot phase. Challenge is at request of L&I vs. drop/exchanged as received. Also discussed thoughts around Health Info Exchange or One Port so L&I has all SIE info to consider on items such as Top Tier for providers. Medical EDI doesn't appear will get

information needed for those decisions. Still working on criteria for Top Tier. Also discussed SIE electronic billing by providers and records needed for it.

### **COHE**

Discussed briefly concerns is COHE data only for 1<sup>st</sup> 12 weeks they are involved are does data file life of claim for metrics. Agree benefit is provider education and consistency delivered by COHE model. Also concern expressed does 12 weeks capture lags in reporting time. What is impact of claim once EE leaves COHE?

### **Surety Improvement Project**

Discussed opportunity to move to electronic report like State Fund does on quarterly basis and could that eliminate annual reporting. Challenge is current reporting L&I has to double check math as errors and additional funds or refunds addressed so lots of rework of reports. Also discussed challenges with ACH for payment. Question arose if L&I could use SIE actuarial report if one done. Glenn also explored could it be changed to semi-annual and bi-annual. LEAN project likely. SIE would need to benefit from change from current reporting to new i.e. new shouldn't have a bunch of additional requirements to report quarterly normally only found on annual report. Currently tight timeframe for 4Qtr and Annual report completion.

### **LEP**

Current Adjudication Guide provided. If SIE/TPA sees areas need clarification reach out to Kelli Z. with L&I Training. L&I already looking at bonus and labor market fluctuation issues. Glenn requested review to see if L&I onsite form could be enhanced to do more of calculations that need done behind scenes to input into current form.

### **Swedish Hospital**

See handout from Joel Sacks. L&I to improve communication to WSIA-Kris T. on issues when arise in medical community such as CA fraud and any WA MPN physicians involved.

### **Tier II Audit**

Initiation letter not being changed to add administrator of claims as all but 8 notifications already out. Will consider next round. See Brian's status update handout. Seem to be picking up speed. Biggest challenge is scheduling for walk through. Inquiry made if State Fund has similar metrics the use to measure benefit timeliness.

### **Rules Review Committee**

As they reach tentative agreements they will publish updates. Agenda item following under this was review of CE and reporting of these by completing online SI-CATS, certification submission and L&I form completion. Mike and Lisa voiced committee is making progress.

### **Second Injury Fund Assessments**

Discussed equity of current assessment in particular socialized costs as SIE use more or less more recent use of SIF. Should it be looked at in 2 parts-changes due to mortality tables or discount rates vs. usage. Should Fund be eliminated entirely? Better way to come up with balance needed for fund? Jim N. asked Glenn for specific

example of impact usage and new costs had vs. another way to asses. Likely town hall for WSIA/SIE/LNI to discuss.

### **EE Pamphlet / Problem Portal**

Pamphlet revisions with input provided under review and 2<sup>nd</sup> draft will be provided for review. Balance of use of problem language on portal site with concern and EE understanding of them was why utilized problem language. Will revisit.

### **Medical EDI**

20% complete. Discussion held around ISO letter that was sent to reporting parties seeking assistance with others who need direction on how to report. All agreed ISO communications should be reviewed prior to release. Explore posting as resource for those in need, the providers who have passed through already as reporting entities so they can review as resource for their use.

## **WSIA NEW ISSUES**

### **Attending Physican Form / Functional Capacity Summary**

Sarah M.-occupational specialist works with claim managers on FCE, OT/PT/MT, home/vehicle modifications, job mods, DME resource discussed change in form. Asked to review again see if can sequence same lines as restriction areas of APF form so less confusion trying to reconcile 2 forms by employers/medical providers. Form has reduced times for decisions and form receipt.

### **Medical information to Attending Physician when AP requested IME**

Clarification from IME training. Agreed if IME for closure requested by AP then notification/copy of IME report only needs sent to AP and provided 14 days to respond prior to ER closure. Concurrence request by letter not needed just notification. If AP deferred to IME on causality, segregation issues or Dept. closures then copy of report needs sent to AP, but no requirement on timeframe for their review/response.

### **Over 7 Reopening**

Issue is L&I issues generic reopening O&N allowing and no over 7 year language. Is over 7 year language required or IN benefits owed? Discussed at L&I legal review. L&I challenged by recognizing over 7 reopening dates in their system so something SIE need to watch. Decision pends on how to address issue of generic reopening O&N.

### **Reopening Letter When Reopening Denied**

Though letter was corrected previously. To see remove 2<sup>nd</sup> paragraph said denied application to reopen when 1<sup>st</sup> paragraph states no application for reopening made.

### **Allowance O&N**

Will update occupational disease allowance O&N to be same as specific injury where allowance at top and protest language follows. Has reduce calls when EE previously read protest language and didn't get to section on claim being allowed.

## **SELF-INSURANCE UPDATE**

### **SI-CAMS**

L&I SI Team Leads introduced.

See measures attached. Team has brought all but TL/NC within goal and it was only off 1% in April. Question arose addressing seasonal/vacation variations plan to remain current. Mike R. meets regularly with leadership on stop light items and mitigation plan for items in Red. Leads/Supervisors/Management receives information drilled to Adjudicator level.

### **Pre-Authorization Requests**

Form provided for review.

### **Staffing**

The claims section new hire OA Kendra Bowers, compliance new hire Daniel Brittan, Mgmt Analyst. Audit is full staffed. Claims has one position carrying open.

### **Certifications/Surrenders**

Top Build, prior Masco Corp, new SIE 7/1/17.