

BWC's \$15,000 Medical-Only Program

BWC's \$15,000 Medical-Only Program (\$15K program) offers employers the opportunity to pay up to the first \$15,000 in medical and pharmacy bills for medical-only claims. These are claims with seven or fewer lost days from work. Employers can enroll in the program by calling BWC at 1-800-644-6292 and listening to the options.

Acceptance into group-retrospective rating or deductible will remove the policy from the \$15K program effective the start of the new program. However the employer retains the right to participate for claims with a date of injury prior to the start of the new program.

How it works

Employers participating in the \$15K program:

- Pay up to \$15,000 in medical and pharmacy bills;
- Agree to the treatment in the normal course of the injury;
- Cannot authorize or deny treatment;
- May not agree to additional conditions and cannot process a *Physician's Request for Medical Service or Recommendation for Additional Conditions for Industrial Injury or Occupational Disease (C-9)*;
- Recognize their managed care organizations (MCOs) cannot authorize treatment or pay medical bills.

The program automatically covers medical-only claims with a date of injury after the enrollment date. It is the employer's responsibility to inform the employees and their treating physicians that the employer will pay the bills. The employer may remove the claim from the program at any time prior to reaching the \$15,000 limit. If an employer decides not to have a specific claim in the program, the employer must inform the assigned BWC claims services specialist (CSS). Employers can contact the CSS by phone or e-mail.

The employer also must inform the provider of the removal of the claim. Once the claim is removed from the \$15K program, the employer's MCO will then manage the claim, and BWC will pay the medical bills. If a claim changes to a lost-time claim, indicating eight or more days lost from work, BWC automatically removes it from the program, and the MCO manages the medical portion of the claim.

Once the medical bills reach the \$15,000 limit, it is the employer's responsibility to notify BWC to have the claim removed from the program. The MCO then begins managing the medical portion of the claim.

Employers should remember some injuries will logically cost more than the limit. Therefore, they may remove the claim from the program before reaching the \$15,000 limit, allowing the MCO to manage the treatment.

Requirements

Eligible \$15K program participants must be an active state-fund employer. To maintain participation, employers must:

- Be current on any premiums, assessments or other monies due to BWC;
- Maintain all records of the injury and payments, keeping them for five years after the last paid bill;
- Supply bills paid and proof of payment to BWC within 30 days of a request;
- Not include paid wages (while an employee was off work) as part of the \$15,000 limit;
- Inform all employees and medical providers of the employer's participation in the program so medical bills are sent directly to the employer;
- Pay the provider within 30 days of receipt of a bill;
- For claims with dates of injury before July 1, 2009, pay as billed or in accordance with the pre-negotiated payment agreement with providers;
- For claims with dates of injury after July 1, 2009, pay in accordance with BWC's fee schedule;
- Not process C9 forms or deny bills if claim/condition is allowed;
- Report some claims to Medicare beginning July 2010. You can learn more about this through the Centers for Medicaid Service Web site, www.cms.gov. Reminder: This is a federal requirement.

BWC maintains the right to remove participants from the program who do not continue to meet participation requirements.

For more information about the \$15K program, click on Ohio Employers, then Programs and then \$15,000 Medical-Only Program.