

SELF-INSURING EMPLOYERS EVALUATION BOARD

Karen L. Gillmor, Ph.D., *Chairman*
Carol A. Wilson, *Member*
Steven J. Hatton, *Member*

John R. Kasich, *Governor*

SELF-INSURING EMPLOYERS EVALUATION BOARD

IN THE MATTER OF:

Blanchard Valley Health System (Employer), SI #20005148-0

and

[REDACTED] (Injured Worker), [REDACTED]

Complaint No. 1000545033

[REDACTED]

Blanchard Valley Health System
1900 S. Main St.
Findlay, OH 45840

Roetzel and Andress
ATTN: Doug Spiker
1375 E. Ninth St.
Cleveland, OH 44114

On April 11, 2015, [REDACTED] (Injured Worker) was injured when she was pushing a food cart, went to turn the cart, and her knee popped and gave out on her. On June 22, 2015, the Injured Worker filed a FROI-1 "First Report of an Injury, Occupational Disease or Death." Also on June 22, 2015, Blanchard Valley Health System (Employer) rejected the FROI-1, noting that the Employer is not in agreement with it; that same day, the Bureau of Worker's Compensation (BWC) referred the claim to the Industrial Commission for consideration of the FROI-1 based on the Employer's rejection of the Injured Worker's claim.

The claim was allowed for right knee strain and right knee medial meniscus tear. The Injured Worker complained of pain with mechanical symptoms. Her physician attempted treatment with corticosteroid injection, which helped the Injured Worker for about a week. She continued to have pain and mechanical symptoms, and she elected to undergo surgical intervention. The risks and benefits were discussed with the Injured Worker, and she elected to undergo surgical intervention. On June 24, 2016, the Injured Worker underwent right knee arthroscopy with partial synovectomy.

Relevant History of the Complaint:

On November 2, 2017, the Injured Worker filed Self-Insured Complaint #1000545033 against the Employer. She had previously requested (1) copies of the front and back of checks listed on a printout that had been given to her, and (2) copies of all paid medical bills. The initial allegation was that the Employer did not provide the requested file documents, including front and back check copies and medical bills.

The Employer's representative indicated the requested documentation was provided timely, but the Employer was not able to produce the details of how and when it occurred. On December 11, 2017, the Self-Insured (SI) Department of BWC followed up with the Employer's third-party administrator and counsel for supporting documentation. Because the information was not provided, the SI Auditor found the Employer in violation of R.C. 4123.35 and Ohio Adm.Code 4123-19-03(K)(9), and the SI Auditor found the complaint was valid and unresolved.

The Employer's counsel offered to overnight the documents to the Injured Worker if the complaint would be found invalid. On December 18, 2017, the Employer's counsel provided email documentation showing the information had just been given to the Injured Worker and her counsel, and the Employer requested reconsideration of the valid finding.

On February 22, 2018, the BWC Administrator's Designee upheld the initial decision and found the complaint to be valid, but now resolved. On March 20, 2018, the SI Department received the Employer's appeal to Self-Insuring Employers Evaluation Board ("SIEEB").

On March 29, 2018, a "Notice of Presentation to the Self-Insuring Employers Evaluation Board" was sent to the parties. This matter then came before the Self-Insuring Employers Evaluation Board on April 11, 2018.

Ohio Adm.Code 4123-19-03(K)(9) states in pertinent part as follows:

- (K) Minimal level of performance as a criterion for granting and maintaining the privilege to pay compensation directly.

- (9) Upon written request by the claimant or claimant's representative, the employer shall make available for review all the employer's records pertaining to the claim. *Such review is to be made at a reasonable time (not to exceed seventy-two hours) and place.* The claimant, upon written request, shall provide the employer or its representative with an appropriate written authorization to obtain medical reports and records pertaining to the claim.

(Emphasis added.)

On October 30, 2017, the Injured Worker requested in writing from the Employer (1) copies of the front and back of checks listed on a printout that had been given to her, and (2) copies of all paid medical bills.

As the Administrator's Designee found in the February 22, 2018 decision, the Employer's third-party administrator confirmed that it sent the check copies to the Employer's representative on November 7, 2017, but it had not sent the check copies to the Injured Worker. The Administrator's Designee also found the following:

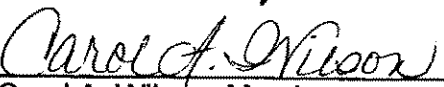
It is only when the [SI] auditor spoke to Mr. Miller [the Employer's representative] on December 11, 2017, that he offered to overnight the check copies to the IW [Injured Worker]. This is well past the 72 hour timeframe required by O.A.C. 4123-19-03(K)(9). For the foregoing reasons, I affirm the decision of the Self-Insured Department, and deny your request for reconsideration. The complaint is valid and resolved.

DETERMINATION:

Therefore, based on the foregoing, the Self-Insuring Employers Evaluation Board hereby finds the Employer (Blanchard Valley Health System) failed to make the records requested by the Injured Worker [REDACTED] available for the Injured Worker's review within 72 hours of her request as required by Ohio Adm.Code 4123-19-03(K)(9). The records were provided well past the 72-hour timeframe. Therefore, Complaint No. 1000545033, filed by the Injured Worker against the Employer on November 2, 2017, is **valid and resolved**.

SELF-INSURING EMPLOYERS EVALUATION BOARD:


Karen L. Gillmor, Chairman YES


Carol A. Wilson, Member YES


Steven J. Matton, Member YES

DATE MAILED: 1976 DAY OF June, 2018