

BWC Monthly Employer Update

**Welcome. The webinar will begin
at 1:30 p.m. EST.**

Note – you will hear webinar audio
through your computer speakers.
Click 'Yes' on WebEx integrated
audio request to hear the audio.



Email questions to BWCEmployerWebinars@bwc.state.oh.us

Today's Topics



○ Topics for Discussion

- Program Reminders
- National Council on Compensation Insurance (NCCI) Manual Classifications
- Recreational Waiver
- Violation of Specific Safety Requirements (VSSR) Awards
- Safety Tip of the Month

BWC Program Reminders

○ Public Employers

- **November 30**

- Drug-Free Safety Program application deadline for Policy Year 2019
- Industry Specific Safety Program application deadline for Policy Year 2019
- Transitional Work Bonus application deadline for Policy Year 2019

- **December 21**

- First Policy Year 2019 Premium Installment Payment due
 - Early Payment Discount if full policy year 2019 premium paid by December 21

BWC Program Reminders

○ Policy Activity Rebate (PAR) Program

- Private Employers can enroll through January 31, 2019 for Policy Year 2018.
- Public Employers can enroll beginning December 1, 2018 for Policy Year 2019.

○ Private Employers

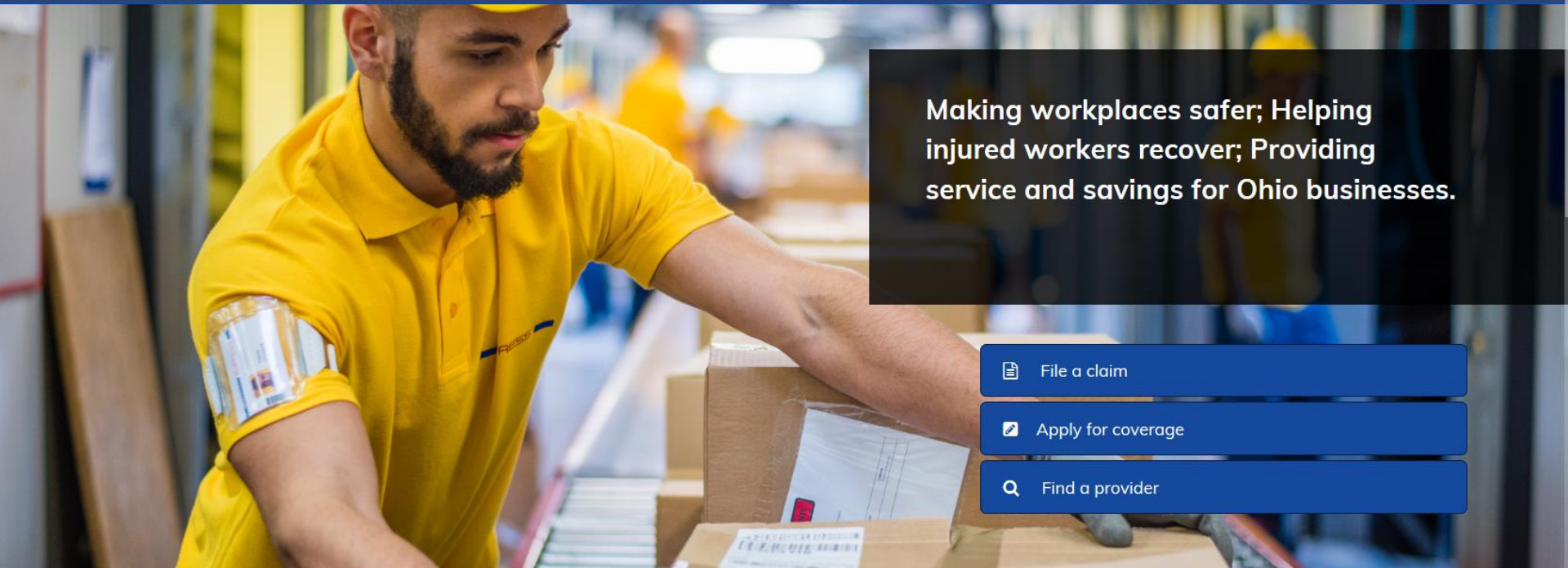
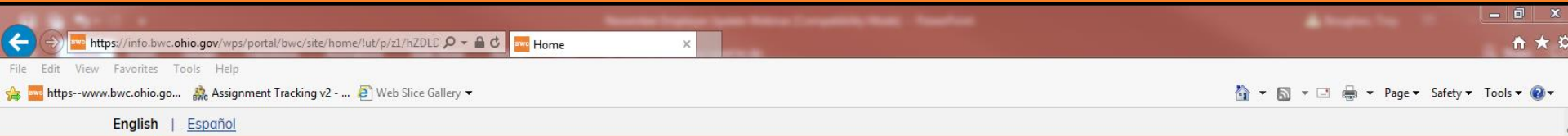
- **January 31, 2019**
 - Application deadline for alternative rating plans
 - Individual Retrospective Rating
 - Deductible Plan
 - One Claim Program
 - Group Retrospective Rating

NCCI Manual Classifications

- National Council on Compensation Insurance
 - Produces manual classifications representing various degrees of hazards.
 - BWC produces a rate for approximately 530 manual classifications.
- Employers are assigned manual classifications based on product made or service provided.
- Employers need to:
 - Report payroll to correct manual classifications
 - Verify manual classification indicated on claim order is correct
 - Notify BWC if operations change

Recreational Waiver

- Ohio Revised Code 4123.01 (C) (3)
 - Injury does not include *“Injury or disability incurred in voluntary participation in an employer-sponsored recreation or fitness activity if the employee signs a waiver of the employee's right to compensation or benefits under this chapter prior to engaging in the recreation or fitness activity”*.
- Recreational Waiver – BWC form C-159



Making workplaces safer; Helping injured workers recover; Providing service and savings for Ohio businesses.

File a claim

Apply for coverage

Find a provider



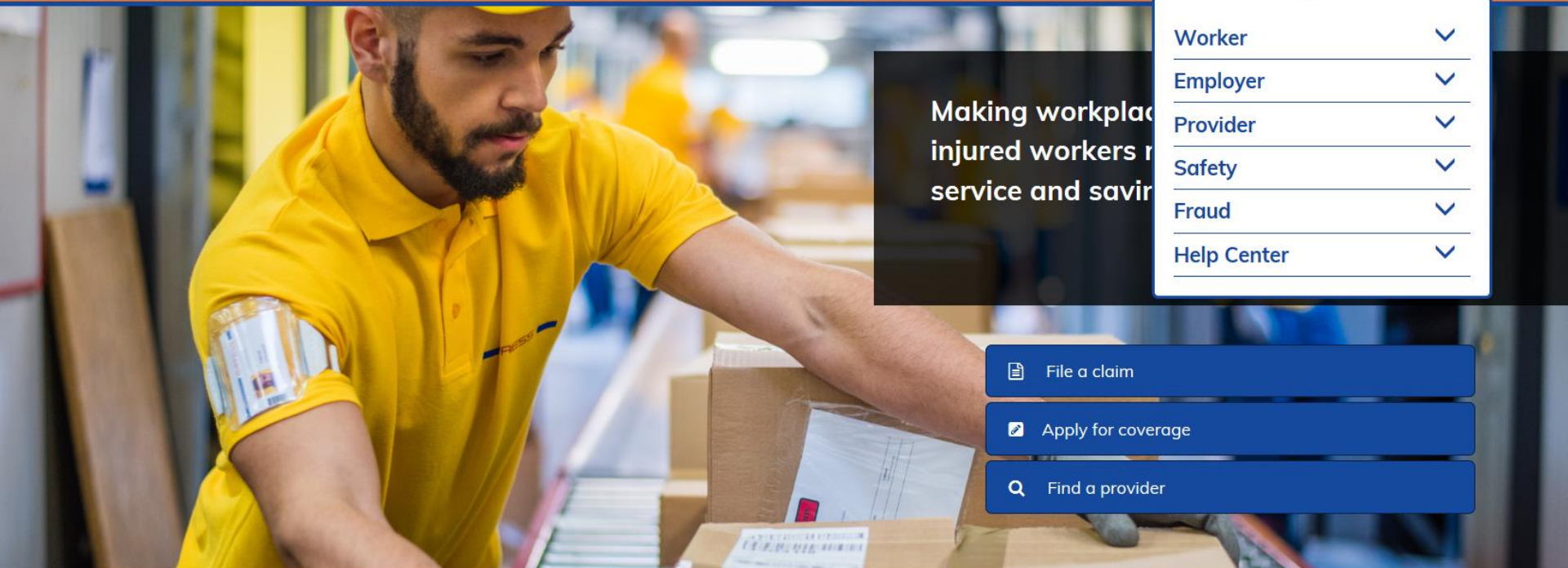
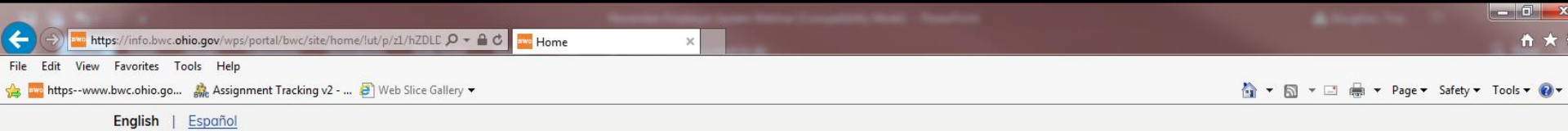
Worker



Employer



Provider





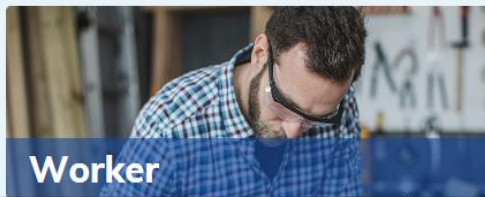
Making workplace
injured workers
service and saving

File a claim

Apply for coverage

Find a provider

- Worker
- Employer
 - Understanding Workers' Compensation
 - Applying for coverage
 - Understanding Managed Care Organizations
 - Maintaining a Policy
 - Viewing Policy Information
 - Rating Information
 - Paying Premiums
 - Reporting Payroll
 - Managing Claims
 - Discount Programs and Grants
 - Professional Employer Organizations
 - Self-Insured Employers
 - Employer Policies
 - Employer Publications and Videos
 - Employer Forms
- Provider



Worker



Employer



Provider

Employer Forms

Whether you want to take advantage of a new program or take the next step in the workers' compensation process, you often have to complete a form. Now, you can complete many of those forms online, or order them from the forms and publications department.

Note: If there is a form you are looking for and it is not listed below, please see Worker, Provider or Industrial Commission forms.

- [Employer Forms](#)

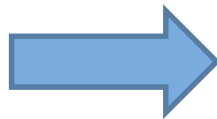
The [free Adobe Reader software](#) is required to display and print forms that are available for viewing online

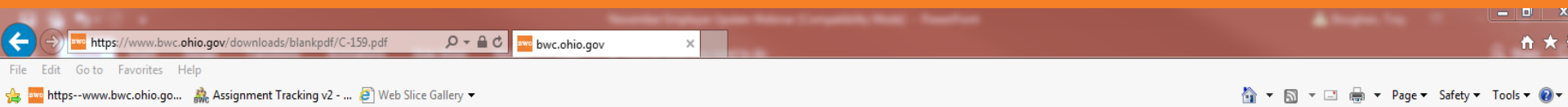
[Make a payment](#)[Payroll true-up](#)[View my policy](#)

Other Important Resources

[State construction contractor](#)[Drug-Free Safety Program](#)[Drug-Free Safety Program at a glance](#)[Policy Activity Rebate \(PAR\) Program activities](#)[Rebate Q and A](#)

AC-4	Request for Business Transfer Information			
AC-28	Request to Charge the Surplus Fund for Non-At-Fault Motor Vehicle Accident			
C-9-A	Request for Additional Medical Documentation for C-9			<input type="checkbox"/>
C-11	ADR Appeal to the MCO Medical Treatment/Service Decision			<input type="checkbox"/>
C-11-ES	Apelación a la decisión por servicio/tratamiento médico de la MCO de ADR			
C-18	Notice to BWC of the Injured Worker and Employer Agreement and Authorization to Send Injured Worker's Check(s) to the Employer			<input type="checkbox"/>
C-30	Request for Medical Information			
C-55	Salary Continuation Agreement			
C-59	Self-Insurer's Agreement as to Compensation on Account of Death			<input type="checkbox"/>
C-86	Motion			<input type="checkbox"/>
C-86-ES	Moción			
Wages-EMP	Employer Report of Employee Earnings - formerly Wage Statement (C-94A)			
Wages-EMP-ES	Informe del empleador de ingresos del empleado			
C-101	Authorization to Release Medical Information			<input type="checkbox"/>
C-101-ES	Autorización para divulgar información médica			
C-108	Waiver of Appeal			<input type="checkbox"/>
C-110	Employer/Employee Agreement to Select Ohio as the State of Exclusive Remedy for Workers' Compensation Claims			<input type="checkbox"/>
C-112	Employer/Employee Agreement to Select a State Other Than Ohio as the State of Exclusive Remedy for Workers' Compensation Claims			<input type="checkbox"/>
C-142	Employer Report of Employee Earnings for Wage Loss Compensation			<input type="checkbox"/>
C-159	Waiver of Workers' Compensation Benefits for Recreational or Fitness Activities			<input type="checkbox"/>
C-159-ES	Renuncia a los beneficios por indemnización de los trabajadores para actividades recreativas o de ejercicios físicos			
C-174	Self-Insured Semiannual Report of Claim Payments			
C-240	Settlement Agreement and Application for Approval of Settlement Agreement			<input type="checkbox"/>
C-262	Self-Insured Employer's Certification of Assignment After Initial Allowance			
C-263	State Fund Employer's Agreement to Accept Claim Assignment			
C-264	Request to Correct Employer and/or Policy Number Assignment			
C-512	Notice of intent to Settle			
CHP-4A	Application for Handicap Reimbursement			<input type="checkbox"/>
DFSP-1	DFSP Accident Report			<input type="checkbox"/>
DFSP-3	Drug-Free Safety Program (DFSP) Annual Report - Basic and Advanced Levels (sample)			<input type="checkbox"/>
DFSP-4	Drug-Free Safety Program (DFSP) Annual Report - Comparable Program Only (sample)			<input type="checkbox"/>





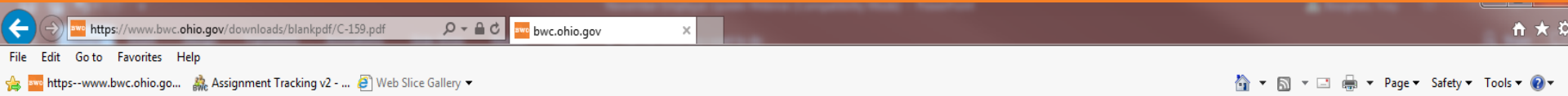
Instructions

- Complete this form to waive workers' compensation coverage for voluntary participation in employer-sponsored recreational activities or fitness programs.
- In the space provided, list all employer-sponsored recreational activities and fitness programs for which the employee wishes to waive workers' compensation coverage. Make a line through any blank spaces.
- The employee **must** sign and date this form to acknowledge agreement.
- The employer shall retain the original for his or her files and provide a copy to the employee.
- The employer should submit a copy to BWC **only when an employee files a claim** for an injury or occupational disease sustained in the employer-sponsored recreational activity or fitness program. For further information call 1-800-644-6292.

Employee name (please print or type)	Date
Employer name	Policy Number

Pursuant to Section 4123.01(C)(3) of the Ohio Revised Code (ORC), the employer and employee shall list those employer-sponsored recreational activities and fitness programs for which the employee wishes to waive all rights to compensation and benefits under Chapter 4123 of the ORC. The waiver must be signed and dated prior to the date of injury or, in an occupational disease claim, the date of disability. Should an employee sustain an injury or occupational disease in an employer-sponsored recreational activity or fitness program **which is not listed**, the employee may be eligible for workers' compensation benefits.

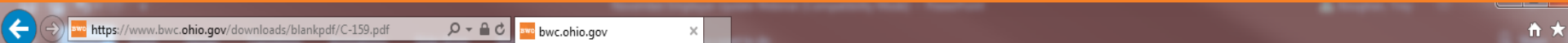
Recreational activities/Fitness programs
--



Pursuant to Section 4123.01(C)(3) of the Ohio Revised Code (ORC), the employer and employee shall list those employer-sponsored recreational activities and fitness programs for which the employee wishes to waive all rights to compensation and benefits under Chapter 4123 of the ORC. The waiver must be signed and dated prior to the date of injury or, in an occupational disease claim, the date of disability. Should an employee sustain an injury or occupational disease in an employer-sponsored recreational activity or fitness program **which is not listed**, the employee may be eligible for workers' compensation benefits.

Recreational activities/Fitness programs

The undersigned declares that he or she is a voluntary participant in the employer-sponsored



The undersigned declares that he or she is a voluntary participant in the employer-sponsored recreational activities or fitness programs listed above. He or she hereby waives and relinquishes all rights to workers' compensation benefits under Chapter 4123 of the ORC for any injury or disability incurred while participating in the above activities or programs. This waiver is valid for two calendar years. The waiver may not bar any workers' compensation claim filed for death benefits by the employee's dependents.

Employee signature

Date signed

Violation of a Specific Safety Requirement (VSSR)

Ohio Administrative Code

<u>4123:1-1</u>	Elevators
<u>4123:1-3</u>	Construction
<u>4123:1-5</u>	Workshops and factories
<u>4123:1-7</u>	Metal casting
<u>4123:1-9</u>	Steel making, manufacturing, and fabricating
<u>4123:1-11</u>	Laundering and dry cleaning
<u>4123:1-13</u>	Rubber and plastic industries
<u>4123:1-17</u>	Window cleaning
<u>4123:1-21</u>	Fire fighting

Violation of a Specific Safety Requirement (VSSR)

- An injured worker with a BWC claim may be eligible to receive an additional award of compensation if the injury occurred as a result of the employer's violation of a specific safety requirement
- The injured worker must show
 - the safety requirement was both specific and applicable,
 - the employer was not in compliance when the accident occurred,
 - and the non-compliance contributed to the injury, illness or death.

Violation of a Specific Safety Requirement (VSSR)

- A VSSR allegation is investigated by BWC's Safety Violation Investigation Unit (SVIU).
- The Industrial Commission of Ohio determines if a violation has occurred and, if the violation contributed to the injury.

Violation of a Specific Safety Requirement (VSSR)

- An injured worker may receive additional compensation if employer is found to have violated a specific safety requirement that led to an injury
- Award can be 15% to 50% of compensation paid (minors = 100%)
- Out-of-pocket expense for employer (*BWC will bill the additional award to the employer*)
- IC can impose a penalty of up to \$50,000 for two or more VSSR violations occurring within a 24-month period.



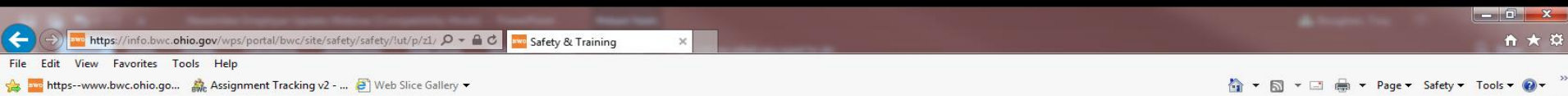
Injured workers recover, providing service and savings for Ohio businesses.

[File a claim](#)

[Apply for coverage](#)

[Find a provider](#)





Below are some of the most frequently asked questions that we receive. A list of all questions for worker and claims related topics can be found on the [Safety FAQ page](#).

- [Where do I sign up for a training class?](#)
- [What tools are available to keep my employees safe?](#)
- [What data is available about workplace safety?](#)
- [Where do I find information about safety grants?](#)
- [What are the Safety Innovation Awards?](#)
- [Where do I find information about the Ohio Safety Congress & Expo?](#)
- [Can I earn a discount by participating in ISSP or other employer safety programs?](#)
- [How do I request a safety consultation?](#)
- [What resources are available at BWC's Library?](#)
- [What are the benefits of joining a safety council?](#)

Featured Resources for Safety

**Better You
Better Ohio!**
Ohio Bureau of Workers' Compensation

Health and wellness program

Register here!

NE Ohio Safety Expo

Safety Grants

Safety Courses

Be Safe Ohio

Safety campaign

Safety Consultations

[See all resources for Safety](#)

News & Events

Get to know what's happening at BWC; news releases, training events and much more at your fingertips.

News

BWC awards \$426,000 in grants to protect Ohio firefighters

Events

NE Ohio Safety Expo

The screenshot shows a web browser window with the URL <https://info.bwc.ohio.gov/wps/portal/bwc/site/safety/resources/lut/p>. The browser's address bar and tabs are visible at the top. The website content is organized into a grid of links under various headings.

Programs

- [Health and wellness program](#)
- [PERRP Safety Partnership Agreement \(SPA\) Program](#)

Research & Statistics

- [Bureau of Labor Statistics/SOII 2016 Data](#)
- [BWC/NIOSH partnership](#)
- [Industry comparison](#)
- [Safety and health research program](#)
- [Bureau of Labor Statistics/SOII 2012 Data](#)
- [Bureau of Labor Statistics/SOII 2013 Data](#)
- [Bureau of Labor Statistics/SOII 2014 Data](#)
- [BLS program contacts](#)
- [BLS resources](#)
- [Research & Statistics](#)
- [Bureau of Labor Statistics/SOII](#)
- [Bureau of Labor Statistics/SOII 2015 Data](#)
- [Bureau of Labor Statistics/CFOI](#)
- [Complete your survey](#)

Resources

- [Ohio Revised Code \(ORC\)](#)
- [Ohio Administrative Code \(OAC\)](#)
- [About Us](#)

Safety Congress & Expo

Safety Consultations

- [OSHA on-site consultation program](#)
- [Industrial hygiene consultation](#)
- [Requesting consultations](#)
- [Construction safety consultation](#)
- [Ergonomics consultation](#)
- [Industrial safety consultation](#)
- [Safety and Health Achievement Recognition Program \(SHARP\)](#)
- [Report an occupational death or hospitalization](#)
- [File safety and health complaint](#)
- [Safety Consultations](#)
- [PERRP FAQs](#)
- [PERRP alerts, fact sheets, checklists](#)
- [Public employment risk reduction program](#)
- [Request a safety and health poster](#)

Safety Councils

- [Safety council locations](#)
- [Safety Councils](#)

Safety Courses

- [NE Ohio Safety Expo](#)
- [Online courses](#)

Safety Grants

- [Safety intervention grant](#)
- [Past safety grant recipients](#)
- [Workplace wellness grant](#)
- [Safety Grants](#)
- [Drug-free safety grant](#)
- [Wellness program FAQs](#)
- [Developmental disabilities \(EWPDD\) grant](#)
- [Firefighter \(FEEEG\) grant](#)

Safety Innovation Awards

- [Safety award recipients](#)
- [Safety award finalists](#)
- [Safety Innovation Awards](#)

Safety Resources

- [Safety campaign](#)
- [NE Ohio Safety Expo](#)
- [Safety programs, services and resources](#)
- [Industry-specific safety program \(ISSP\)](#)
- [Safety resources](#)
- [PERRP Safety Partnership Agreement \(SPA\) Program](#)

Safety And Video Library

- [Safety catalog](#)

Ohio administrative codes

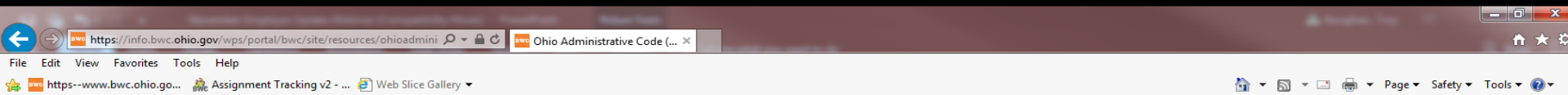
- [Safety management resources guide](#)
- [Safety newsletters](#)
- [Lifting guidelines](#)
- [Safety publications](#)
- [Safety and Video Library](#)
- [Safety related links](#)
- [Ergonomics resource guides by industry](#)
- [Safety talks](#)
- [Safety videos](#)
- [Industry-specific safety tools](#)
- [Safety resources](#)
- [School safety tools](#)

Wellness

- [Health and wellness program](#)

Youth And Older Workers

- [Older workers resources](#)
- [Youth safety resources](#)
- [Youth & Older Workers](#)



[4167-13](#) Abatement verification.

[4167-14](#) Contest of violation.

[4167-15](#) Exemption application.

OAC 4123:1 Division of safety and hygiene

[4123:1-1](#) Elevators.

[4123:1-3](#) Construction.

[4123:1-5](#) Workshops and factories.

[4123:1-7](#) Metal casting.

[4123:1-9](#) Steel making, manufacturing, and fabricating.

[4123:1-11](#) Laundering and drycleaning.

[4123:1-13](#) Rubber and plastic industries.

[4123:1-17](#) Window cleaning.

[4123:1-21](#) Fire fighting.

Resources

[Injured Workers' Rights](#)
[Ohio Industrial Commission](#)

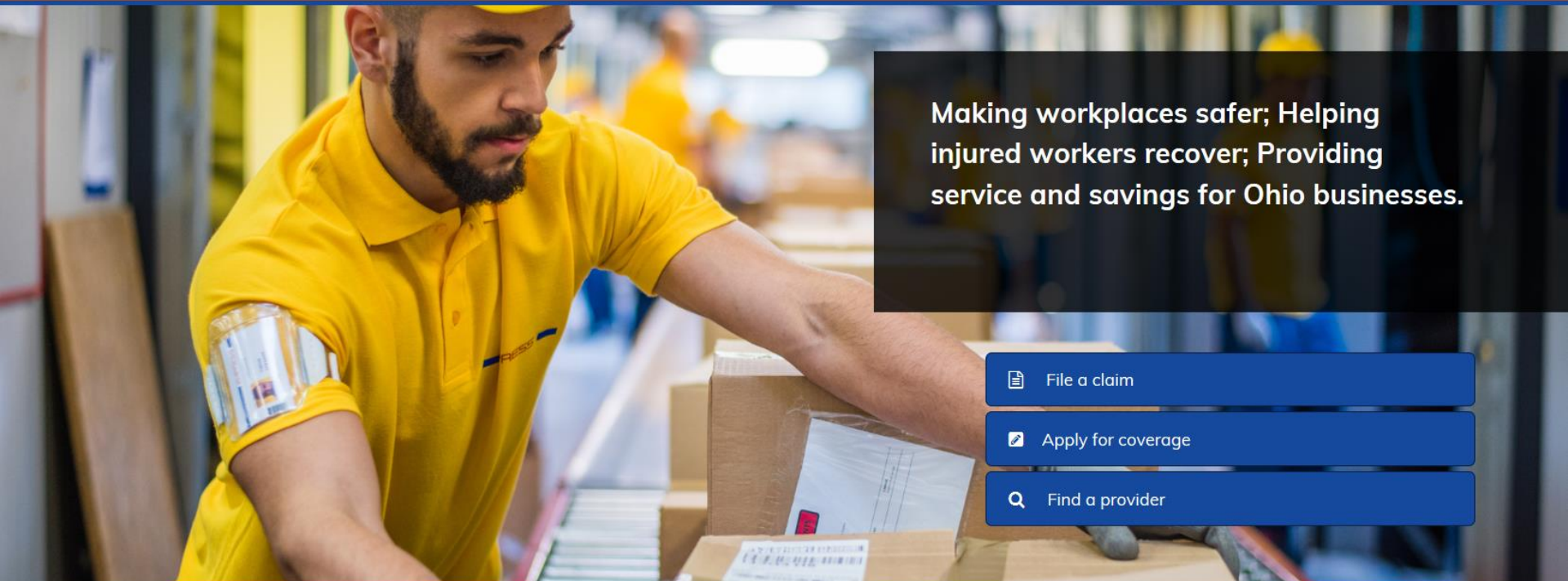
Connect with us

[News](#)
[Contact us](#)

Agency

[About us](#)
[Board of Directors](#)
[Locate a claims office](#)
[Privacy](#)
[Site map](#)



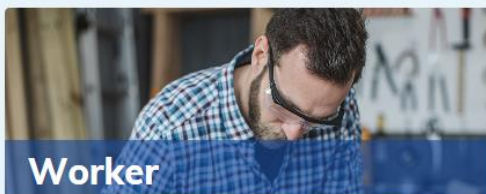


Making workplaces safer; Helping injured workers recover; Providing service and savings for Ohio businesses.

File a claim

Apply for coverage

Find a provider



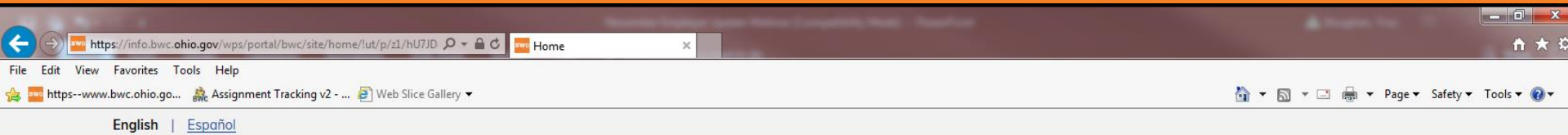
Worker



Employer



Provider



- Worker
- Employer
- Provider
- Safety
- Fraud
- Help Center

Making workplace
injured workers
service and saving

File a claim

Apply for coverage

Find a provider



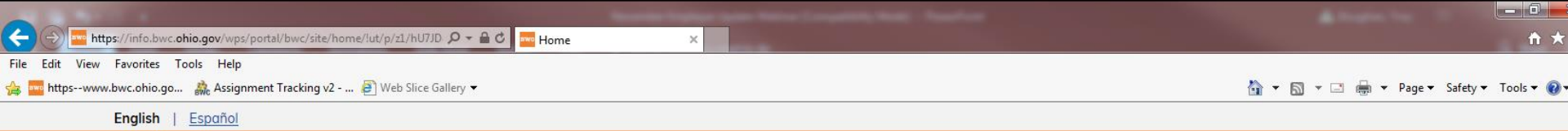
Worker



Employer



Provider



- Worker
- Employer
- Understanding Workers' Compensation
- Applying for coverage
- Understanding Managed Care Organizations
- Maintaining a Policy
- Viewing Policy Information
- Rating Information
- Paying Premiums
- Reporting Payroll
- Managing Claims
- Discount Programs and Grants
- Professional Employer Organizations
- Self-Insured Employers
- Employer Policies
- Employer Publications and Videos
- Employer Forms
- Provider





Worker

Employer

Understanding Workers' Compensation

Applying for coverage

Understanding Managed Care Organizations

Maintaining a Policy

Viewing Policy Information

Rating Information

Paying Premiums

Reporting Payroll

Managing Claims

Discount Programs and Grants

Professional Employer Organizations

Self-Insured Employers

Employer Policies

Employer Publications and Videos

Employer publications

Employer videos

Employer Forms

Provider

Safety



Employer publications

BWC provides resource materials such as brochures and fact sheets to help you become more familiar with Ohio's workers' compensation system

To see a listing of resource materials available to you click below:

- [Employer Publications](#)

Note: If there is a publication you are looking for and it is not listed below, please see Worker, Provider or Industrial Commission sections.

The [free Adobe Reader software](#) is required to display and print forms that are available for viewing online

[Make a payment](#)[Payroll true-up](#)[View my policy](#)

Other Important Resources

[Employer videos](#)[Employer Publications and Videos](#)

OhioBWC - Employer - Form: (BWC publications) - Employer publications

Employer
Publications

You may copy or reprint these public domain documents. We request source credit.

[Adobe Reader is required to view/print publications. click here.](#)

BWC #	Publication title	Description	View/ Print	Order
Brochures				
	Destination: Excellence A customizable risk-management plan			
FB	Fraud Brochure			<input type="checkbox"/>
CD-40	Workers' Compensation Guide for Self-Insuring Employers and their Employees			
SVIU	Investigating Violations of Specific Safety Requirements			
OMBUDS	The OMBUDS Office Can Help			<input type="checkbox"/>
Fact sheets				
FSAR	Alternative Rating Plans			
	Claim Reactivation			
FSCH	Claims Hearing Process			
	Common Questions About Self-Insurance			
	BWC's Coverage Exemption for Religious Sects			
FSDWRF	Disabled Workers' Relief Fund			
FSESS	Employer Services Specialists: Here to assist you			
FS15K	BWC's \$15,000 Medical-Only Program			
	Forms and Health Information Requested Under HIPAA			
	Group-Experience Rating			
	Guidelines for Group-Experience and Group-Retrospective Rating Two-Hour Safety Training			
FSHR	Handicap Reimbursement			
LSSEA	Lump Sum Settlement Direct Reimbursement Payment and Rating Program			
FSLSS	Lump Sum Settlements			
FSMM	Maximum Medical Improvement			



Safety violations investigation unit

Ohio employers try to provide a workplace free of safety pitfalls. However, oversights can occur, and workers may be injured while on the job. What happens when the injury occurs if an employer overlooks a specific safety requirement?

This brochure is a guide for employers and employees who may, one day, find themselves in this situation.

What the law says

The Ohio Revised Code (ORC) states it is the responsibility of every employer in Ohio to provide a safe workplace and adhere to all safety rules (refer to ORC 4101.12). Likewise, it is the responsibility of every Ohio worker to properly use any provided safety equipment (refer to ORC 4101.13).

What is a violation of a specific safety requirement?

- An injured worker with a BWC claim may be eligible to receive an additional award of compensation if the injury occurred as a result of the employer's violation of a specific safety requirement (VSSR) as outlined in the Ohio Administrative Code.
- The state authorizes the Industrial Commission of Ohio (IC) to grant this additional award to an injured worker when a workers' compensation injury, illness or death results from an employer's VSSR. This additional award ranges from 15 percent to 50 percent of the maximum allowable weekly

compensation rate granted to the injured worker.

- The injured worker appearing before the IC must show the safety requirement was both specific and applicable, the employer was not in compliance when the accident occurred, and the non-compliance contributed to the injury, illness or death.

How to file a VSSR claim

- File an *Additional Award for Violation of Specific Safety Requirement in a Workers' Compensation Claim* (IC-8/9) form within two years of the injury, death or initial diagnosis of illness.
- File the form with the IC's Columbus regional office or with any BWC customer service offices.
- The IC sends proper notification to all involved parties after it receives the VSSR applications.
- The employer may file an answer to the alleged VSSR within 30 days of notification.

How a VSSR claim is investigated

- BWC's safety violations investigation unit (SVIU) assigns an investigator to conduct an impartial investigation of the VSSR allegations. The SVIU then notifies all parties (injured worker, employer, legal representatives, etc.) in writing about the pending investigation.

- The investigator then initiates contact with the involved parties.
- The SVIU sends a request form listing common information requested, along with the initial notification to the employer. During the course of the investigation, the investigator may require additional information from the parties involved.
- The injured worker or his or her legal representative must provide any updates to the investigator regarding person(s) with investigation information.
- The investigator's fact-finding investigation includes an inspection of the incident site, interviews and any documented information relevant to the incident.
- The investigator, upon completion of the investigation, will file a Report of Investigation with the IC and place it in the claim before any IC hearing occurs.

What happens after the investigation?

- The IC forwards copies of the Report of Investigation to the principle parties.
- After receiving the report, all parties involved have 30 days to review it and provide any supplemental information.
- The IC schedules a pre-hearing conference and notifies all involved parties. The IC holds this meeting to review new information, reach a possible settlement, or to set a date for a merit hearing or request a record hearing.

Safety Tip of the Month

Developing Effective Safety Teams

Developing Effective Safety Teams

- Benefits of safety teams
 - Helps to show management commitment to employee safety
 - Provides a forum for discussion of concerns and suggestions
 - Engages employees in the safety and health process
- Form the Team
 - Develop the mission, goals and scope of the team's activities
 - Identify who should serve on the team and who should be the leader
 - Develop a team charter

Developing Effective Safety Teams

- Hold productive, action-oriented meetings
 - Establish a standard agenda
 - Set expectations for participation from all members
 - Use action plans to help clarify responsibilities and drive completion of activities
 - Consider rotating team membership and leadership
- Regularly communicate team business and activities
 - Post meeting notes and action plans
 - Encourage input and suggestions from non team members
 - Recognize team accomplishments and success

Division of Safety and Hygiene Resources

All services are available at no additional cost and are strictly consultative

- Safety, ergonomics, and industrial hygiene consultations;
- Safety management assessment and enhancement;
- Safety team development/enhancement;
- On-line and classroom-based training for people at all levels;
- Safety intervention grants and wellness grants;
- Video library and research library services
- To request assistance: www.bwc.ohio.gov and click on Safety Services

Questions?

Julie Dake

419-245-3034

BWCEmployerWebinars@bwc.state.oh.us

Troy Boughan

419-227-4763

BWCEmployerWebinars@bwc.state.oh.us

BWC toll free: 1-800-644-6292

BWC website: www.bwc.ohio.gov