From: Ohio Bureau of Workers' Compensation
Sent: Monday, May 02, 2016
Subject: RepConnect - May 2016

RepConnect

TABLE OF CONTENTS

- **Independent medical exams and physician file reviews**
- **ICD-10 update**
- **Tools for authorized representatives**
- **Private employer payroll true-up is coming in July**

IN OTHER NEWS

E-account help

Forgot your password?

Any other problems logging on to our website?
Call our contact center at 1-800-644-6292.

Independent medical exams and physician file reviews

We updated our independent medical examination policy effective Feb. 4, 2016. Specifically:

- We define terminology useful in the exam and physician file review process;
- We provide guidance to claims staff for selecting the appropriate physician based on the allowed conditions in the claim and/or the issue presented for consideration;
- We reinforce that the Disability Evaluators Panel physician selection must have neither a conflict of interest nor the appearance of a conflict of interest;
- We added a section to the policy requiring verification that conditions listed in the claim accurately reflect the narrative description of conditions as they appear on BWC or Industrial Commission of Ohio orders prior to scheduling an examination or conducting a physician file review;
- We clarify the process for contacting an injured worker for availability prior to scheduling the exam and discussing determination of good cause and suspension as the result of failure to appear for a scheduled exam.

To view the policy directly, click **here**.

ICD-10 update

Since the implementation of the International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10) coding system on Oct. 1, 2015, we've identifie some challenges that affect how we assign conditions in a workers' comp claim. We have customized some codes and changed some processes to work within the ICD-10 guidelines.

Generally, ICD-10 provides a choice of new codes that allow more specificity. However, some codes have become less specific. For example, in ICD-10, the back strain codes only offer two choices: S16.1xxA "Cervical Strain" and S39.012A "Low Back Strain." The low back strain code covers the thoracic through sacral areas. For

BWC purposes, we've customized the narrative description for this code to read “Strain of Muscle, Fascia and Tendon Thoracic through Sacral regions.”

In the past, we required identification of a specific part of the low back for a strain (e.g. lumbar, sacral and thoracic). ICD-10 does not. Because of the changes within ICD-10, we no longer require a site/location for the condition of low back strain. If a provider submits information that cites the specific part of the low back that was strained, our staff will only note the information in claim notes without modifying narrative descriptions. We'll dismiss requests for specific strains of the low back if the claim already addresses the condition “Strain of Muscle, Fascia and Tendon Thoracic through Sacral regions.”

Another issue we identified was the use of the seventh character encounter codes in ICD-10. The seventh character of an ICD-10 code represents the episode of care (different phases in a patient’s healing/treatment process), or it provides additional information about the injury (i.e., fracture codes). We're only concerned that the allowance reflects the actual treated condition(s). Therefore, we're removing the words “initial encounter” and “subsequent encounter” from the narrative descriptions. In most cases that require a seventh character, we will assign the seventh character “A” (initial encounter) to the allowed ICD-10 code. We'll dismiss requests to add the condition with the subsequent encounter code “D” to a claim if we have allowed the same condition with the initial encounter code. While we'll dismiss a request to allow the subsequent encounter code, we'll pay bills for an allowed condition using any of the seventh character codes.

For example, consider an injured worker with a twist and fall injury to the right knee. The provider assigned “knee sprain – initial encounter” using the seventh character “A.” We allowed the claim for knee sprain using the seventh character “A.” When the injured worked returned for follow-up care, the provider assigned “knee sprain – subsequent encounter” using the seventh character “D.” A motion was filed requesting “knee sprain – subsequent encounter” using seventh character “D” to be added to the claim. We dismissed the motion because the claim is already allowed for the knee sprain. We paid submitted bills for “knee sprain – subsequent encounter” since we initially allowed knee sprain in the claim.

The exception to the above is for fractures. The seventh character for a fracture code provides additional information about the fracture. The seventh character may be assigned based on whether the fracture is:
• Open vs. closed (A, B, or C);
• Complications of fracture delayed (G, H, or J);
• Nonunion (K, M, or N);
• Malunion (P, Q, or R).

If we identify additional issues with ICD-10, we'll continue to keep you updated regarding these issues and their resolution.

Please direct questions to **repconnect@bwc.state.oh.us**.

Tools for authorized representatives

Did you know we have tools to assist you on our website? To find them:

- Go to **www.bwc.ohio.gov**;
- Select BWC Library;
- From the menu on the left, mouse over About BWC;
- From the dropdown menu, select Tools for authorized reps.

From this page, you can access a variety of resources and the current Field Operations contact list. To view the tools directly, click **here**.

Private employer payroll true-up is coming in July

Our new payroll true-up process requires employers to report their actual payroll for the previous policy year and reconcile any differences in premium paid. This important step is necessary for us to calculate premiums accurately. Even if an employer's payroll for the year matches the estimate we provided or the employer had zero payroll, the employer must complete a true-up report.

The quickest and easiest way to true up is online with a BWC e-account.

To create an e-account, go to **www.bwc.ohio.gov**, and click on the **Create e-account** link in the top right-hand corner of the home page.

Ohio | Bureau of Workers' Compensation
30 W. Spring St.
Columbus, Ohio 43215-2256

Questions? Send us an email
repconnect@bwc.state.oh.us