

On September 13, 14 and 20, 2017, the Self-Insured Department held a series of workshops discussing the self-insured underwriting financial review, a tool used to determine the financial strength and default risk for new self-insured applicants and existing self-insured employers as part of the annual renewal process. We also discussed the self-insured assessment rates for 2017-2018 assessments, Ohio Administrative Code 4123-6-32, and some claims management items.

The self-insured financial underwriting team completes a detailed financial report which assesses and employer default risk rating with each renewal. This rating is used but the self-insured underwriting team to help determine whether security is necessary as part of the annual renewal. The rating is established using a rating system similar to Moody's Bond Rating measures. The financial underwriting team uses several resources to evaluate an employer's current financial strength. While the report addresses many measures, an employer's Leverage and Liquidity are of high importance. The claims risk is also evaluated to determine the number of active claims within the statute of limitations, current reserves and a consideration of Incurred But Not Reported Claims. This helps understand the actual exposure should an SI employer default. It is important to understand the number of open or closed claims that may still be within the statute of limitations.

Assessments have remained flat for the past three years. Total reported compensation has dropped significantly over the past 10 years.

OAC 4123-6-32- Effective 11/1/17, requires 60 days of conservative care before a Lumbar Fusion will be approved

Effective 9/29/17, injury claims must be filed within one year of the incident or injury. Does not apply to OD claims.