



MCO Selection Guide

We work closely with employers on improving safety and preventing workplace accidents, because the best workers' compensation claim is the one that never happens. However, despite everyone's best efforts, accidents and injuries can occur in any workplace.

If a workplace injury occurs, it's important to have the resources to provide care for your injured workers. Your managed care organization (MCO) is here to help you file and manage claims, and to ensure injured workers receive the quality medical care they deserve. Your MCO also helps facilitate a quick and safe return to work, which benefits your company and your workforce.

As a new employer, you have the opportunity to choose an MCO that best suits your company's needs. However, if you do not make a selection within 30 days of receiving your certificate of coverage, we may assign an MCO to you.

To explain your options and help you make the best choice for your employees, we have produced this *MCO Selection Guide* and an accompanying *MCO Report Card*, which is also available on www.bwc.ohio.gov. You can access the *MCO Report Card* by visiting www.bwc.ohio.gov and choosing:

- BWC Library
- BWC publications
- Ohio employer publications
- MCO Report Card.

Note: If you do not have Internet access but would still like a copy of the report card, please call 1-800-644-6292 to request a hard copy.

How to select your MCO

The following three easy steps will guide you through the process of selecting an MCO.

Step 1 Review the Alphabetical MCO list found on page 3.

Step 2 Use our *MCO Report Card* (available on www.bwc.ohio.gov) to compare the performance of MCOs. In the report card, we have evaluated each MCO based on quality of medical management, safe return-to-work strategies and timeliness of service.

We have listed the MCOs' contact information under the Alphabetical MCO list found on page 3. We encourage you to call the MCOs you are considering choosing to find out more about their services and network providers.

Step 3 Submit your MCO selection using one of the options listed below.

Note: It's possible your selection would not be accepted if the MCO you choose is at capacity. At capacity means the MCO is not accepting additional employers. If you have questions, contact the MCO.

Option 1

Complete and submit a selection form electronically on www.bwc.ohio.gov

Visit www.bwc.ohio.gov, and choose the Employers link from the home page. From there, click on Featured Links, then click on the MCO selection form link. Follow the instructions to complete and submit the form electronically.

Option 2

Complete a hard-copy selection form and mail or fax it to BWC

Complete the form on page 4 of this guide and mail or fax it to BWC. The address and fax number are included on the form. We must receive your signed selection form within 30 days of receipt of your certificate of coverage.

County codes

Below is a list of all 88 Ohio counties and their corresponding two-digit code. Please locate your county of main business operations and make note of its code number. You'll need this county code number to complete your selection form.

Two-digit county codes

01 Adams	45 Licking
02 Allen	46 Logan
03 Ashland	47 Lorain
04 Ashtabula	48 Lucas
05 Athens	49 Madison
06 Auglaize	50 Mahoning
07 Belmont	51 Marion
08 Brown	52 Medina
09 Butler	53 Meigs
10 Carroll	54 Mercer
11 Champaign	55 Miami
12 Clark	56 Monroe
13 Clermont	57 Montgomery
14 Clinton	58 Morgan
15 Columbiana	59 Morrow
16 Coshocton	60 Muskingum
17 Crawford	61 Noble
18 Cuyahoga	62 Ottawa
19 Darke	63 Paulding
20 Defiance	64 Perry
21 Delaware	65 Pickaway
22 Erie	66 Pike
23 Fairfield	67 Portage
24 Fayette	68 Preble
25 Franklin	69 Putnam
26 Fulton	70 Richland
27 Gallia	71 Ross
28 Geauga	72 Sandusky
29 Greene	73 Scioto
30 Guernsey	74 Seneca
31 Hamilton	75 Shelby
32 Hancock	76 Stark
33 Hardin	77 Summit
34 Harrison	78 Trumbull
35 Henry	79 Tuscarawas
36 Highland	80 Union
37 Hocking	81 Van Wert
38 Holmes	82 Vinton
39 Huron	83 Warren
40 Jackson	84 Washington
41 Jefferson	85 Wayne
42 Knox	86 Williams
43 Lake	87 Wood
44 Lawrence	88 Wyandot

Alphabetical MCO list

We have assigned a five-digit number to identify each MCO. This number is located under the MCO's name below. **You will need this number when completing your selection form. Note:** All of the MCOs in this list have statewide certification.

1-888-OHIOCOMP
10041
2900 Carnegie Ave.
Cleveland, OH 44115
Phone: 888-644-6266
Fax: 888-644-7339

3-hab
10013
P.O. Box 429540
Cincinnati, OH 45242
Phone: 800-869-1871, 0 for operator or
513-221-3422, 0 for operator
Fax: 513-985-1381

AultComp MCO
10016
2458 Lincoln Way E., Unit 11
P.O. Box 4817
Massillon, OH 44648-4817
Phone: 888-738-5800 or 330-830-4919
Fax: 330-830-4902

CareWorks
10010
P.O. Box 182726
Columbus, OH 43218
Phone: 888-627-7586
Fax: 1-888-358-5319

Comp One
10073
725 Boardman-Canfield Road, Unit A-3
Boardman, OH 44512
Phone: 877-281-9821 or 330-259-0083
Fax: 877-283-0921

CompManagement Health Systems
10005
P.O. Box 1040
Dublin, OH 43017
Phone: 888-247-7799
Fax: 866-746-2621

CorVel Ohio MCO
10008
P.O. Box 30306
Cleveland, OH 44130
Phone: 800-275-6463
Fax: 1-888-337-7611

GENEX Care for Ohio
10042
11590 Century Blvd., Suite 202
Cincinnati, OH 45246
Phone: 800-447-6250
Fax: 877-239-5769

Health Management Solutions
10006
2545 Farmers Drive, Suite 400
Columbus, OH 43235
Phone: 888-202-3515
Fax: 614-923-7696

Occupational Health Link
10017
445 Hutchinson Ave., Suite 205
Columbus, OH 43235
Phone: 888-844-0039
Fax: 888-208-0050

Sheakley UNICOMP
10002
One Sheakley Way
Cincinnati, OH 45246
Phone: 888-743-2559 or 513-326-8003
Fax: 513-672-4515

Spooner Medical Administrators
10011
28301 Ranney Parkway
Westlake, OH 44145
Phone: 800-542-9479 or 440-899-2400
Fax: 800-542-9480

The Health Plan
10060
P.O. Box 97
St. Clairsville, OH 43950-0097
Phone: 888-847-7810
Fax: 877-318-4489

WorkStar Health Services
10074
7100 Sennet Place, Suite C
West Chester, OH 45069
Phone: 800-256-8833
Fax: 800-256-9540

MCO Selection Form

Complete this form, then mail or fax it to BWC using the address or fax number found below. Remember to keep a copy for your records.

Employer policy number: (Use the policy number found on your certificate of coverage.)

Company name: _____

Doing business as: _____

Contact name: _____

Number of employees: _____

Phone number with extension: _____ - _____ - _____ ext. _____

Fax number: _____ - _____ - _____

County of operation: (Use the two-digit number from the County codes on page 3 of this guide.)

Mailing address: _____

City: _____ State: _____ ZIP code: _____

Name of MCO selected: _____

MCO number: (Use the five-digit number from the Alphabetical MCO list on page 3 of this guide.)

Employer's signature: _____

Employer name (print): _____

Employer title: _____

Date: - -

Employer's right to select

An employer may select any MCO that meets its individual business needs. The MCO selection is solely the employer's choice.

Mail or fax form to:

Ohio Bureau of Workers' Compensation

Policy processing
30 W. Spring St., 22nd floor
Columbus, OH 43215-2256

Fax: 614-719-5313