

BWC Champion kickoff

Dec. 10–11, 2003
William Green Auditorium



Ohio Bureau of Workers' Compensation

Governor Bob Taft
Administrator/CEO James Conrad

Welcome BWC Champions!

Thank you for agreeing to participate in our Champion network.

As you know, BWC continually works to improve the service we provide our workers' comp partners and customers. With that goal, our new customer-focused business model will deliver more efficient, coordinated services to Ohio's employers and workforce. In addition, by being even more proactive in assisting employers to improve their workplace safety efforts, we'll help them cut their workers' comp costs.

As our Champion, you'll play a vital role in helping BWC transition to this new way of doing business. Within this booklet, you'll find a fact sheet and glossary of terms explaining parts of our customer-focused service delivery model. We've also included slides from the informational workshops you'll participate in during the Champion kickoff.

Thanks again for agreeing to be a Champion! I look forward to working with you to help BWC transition to our new way of doing business.

Sincerely,

A handwritten signature in black ink that reads "Irene P. Barnett". The signature is fluid and cursive, with a long horizontal stroke at the end.

Irene Barnett
Champion coordinator

Champion kickoff agenda

Dec. 10-11, 2003

William Green Building Auditorium

Dec. 10

- | | |
|------------|--|
| 10 a.m. | Registration |
| 10:30 a.m. | Kickoff introduction, Irene Barnett, Champion coordinator
Overview BWC Administrator/CEO James Conrad |
| 11 a.m. | Feet wet presentation, Jim Fograscher and Steve Meese, chief architects |
| Noon | Lunch on your own |
| 1:30 p.m. | Transitions, Tim Hutchings, chief of customer service |
| 2:30 p.m. | Business development teams updates,
Jim Fograscher, Steve Meese, Kim Robinson, chief architects |
| 3:30 p.m. | Business plan staging and timeline, Sandy Blunt, executive sponsor |
| 4 p.m. | Dinner on your own |

Dec. 11

- | | |
|------------|---|
| 7:30 a.m. | Registration |
| 8 a.m. | Executive advisory group questions and answers,
Tina Kielmeyer, Chuck Quinlan, Jeff Redman, John Romig, Barb Young |
| 9 a.m. | Delivering an effective message,
Matt Gill, training director; Greg Bolyard, training officer |
| 10 a.m. | Break |
| 10:30 a.m. | New business model Web site,
Victoria Pannell, director of communications |
| 11 a.m. | Closing remarks,
Tina Kielmeyer, chief of injury management
Champion farewell |
| Noon | Lunch on your own |

Feet wet presentation

Jim Fograscher

Chief architect

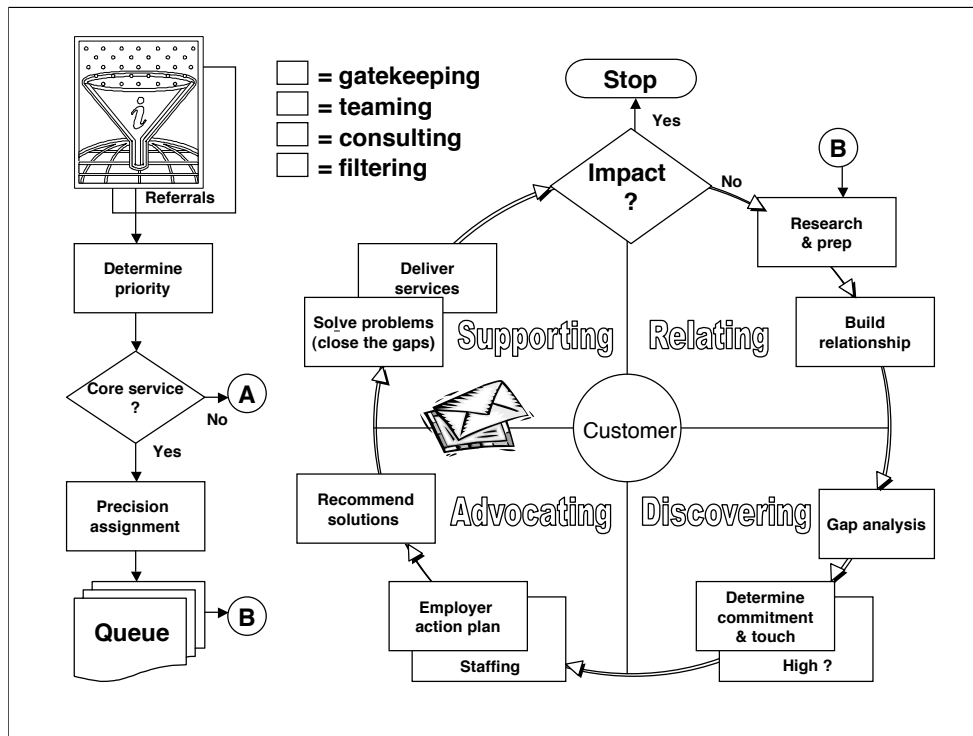
New business model

Notes:

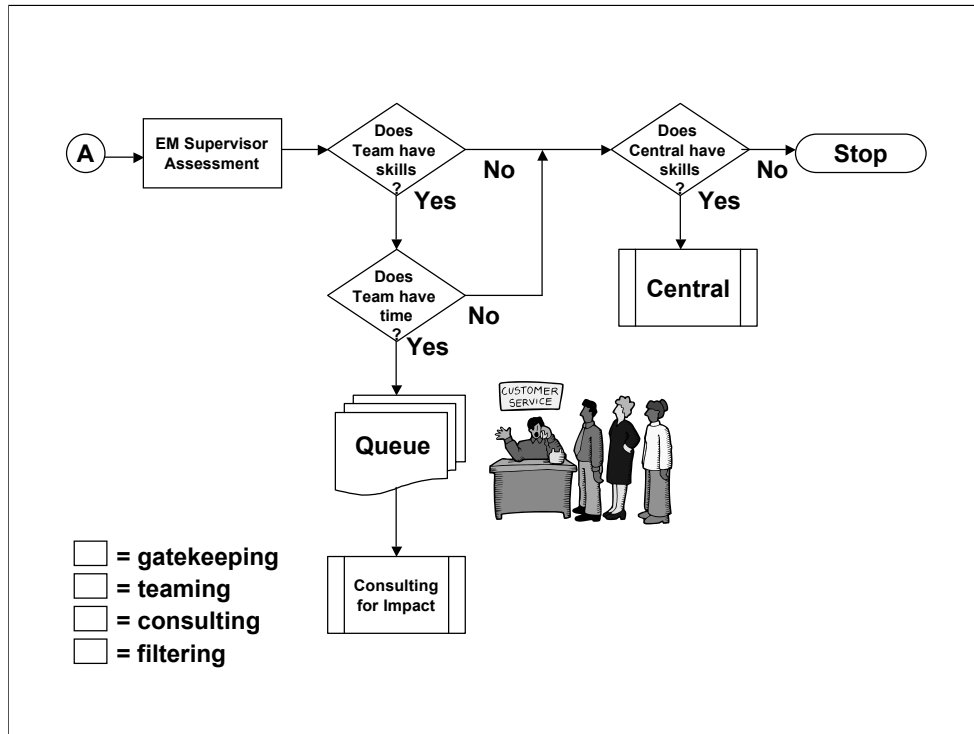
Employer Management (EM)

Service Delivery Model

Notes:



Notes:



Notes:

Feet wet presentation

Steven Meese

Chief architect

New business model

Notes:

Claim Triage

- **Measure of a claim's severity**
- **Triage displayed / stored in V3**
 - **In data warehouse for reporting**
 - **Claims touch-level history captured, including reasons for changes, and begin / end dates**

Notes:

Claim Triage

Touch levels

- Low touch = No ICD code in initial claim data, low severity (level 1 ICD code, no compensation)**
- Medium touch = Medium severity (compensation, psychological conditions, level 2 ICD without compensation)**
- High touch = High severity (death, CAT, statutory OD, amputation / loss of use)**

Notes:

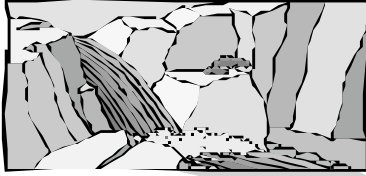
Claim Triage

- **Systematic and manual process**
 - **Entry via V3 or Dolphin = Touch levels assigned in real time**
 - **Entry via EDI 148 = Touch levels assigned during overnight batch**
 - **CSS can change touch levels during claim life cycle (i.e., reassessment)**

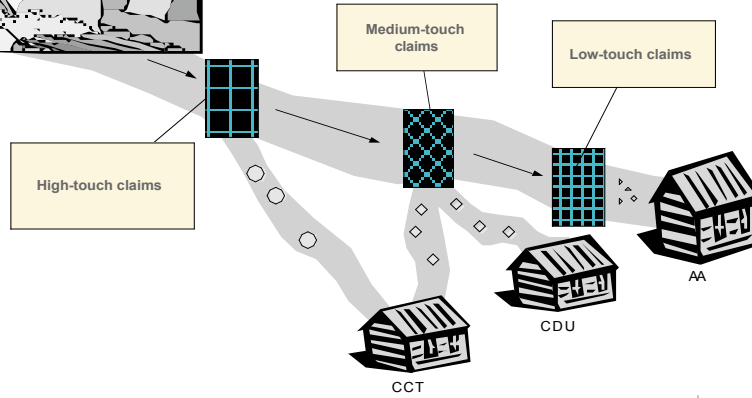
Notes:

Claim Triage: "Panning for Gold"

Tuesday, December 09, 2003



A good way to pan for gold is to place filters of increasing density in a river. Each will collect gold nuggets of corresponding sizes as the water flows through. BWC's claim triage process is very similar to this (i.e., claims will be filtered based on their characteristics).



Notes:

Auto Adjudication

- **AA driven by a rules engine**
 - **Terminating vs. non-terminating rules**
- **If claim isn't a candidate for AA, current processes for new claim procedure are used.**

Notes:

Auto Adjudication

- **If claim is candidate for AA, place in allow / appeal status.**
 - **Exception: Employer-certified claims allowed**
- **One letter / order sent for AA claims**

Notes:

Injury Management

- **Claim assignment**
 - **Always to customer care team (CCT), regardless of where claim is in life cycle**
- **Customer care plan (CCP)**
 - **Shooting for the peak vs. hitting plateaus**

Notes:

Injury Management

- **Reassessing touch levels**
 - **Done throughout a claim's life cycle**
- **EM, IM and MCO partnerships**

Notes:

Transitions

Tim Hutchings

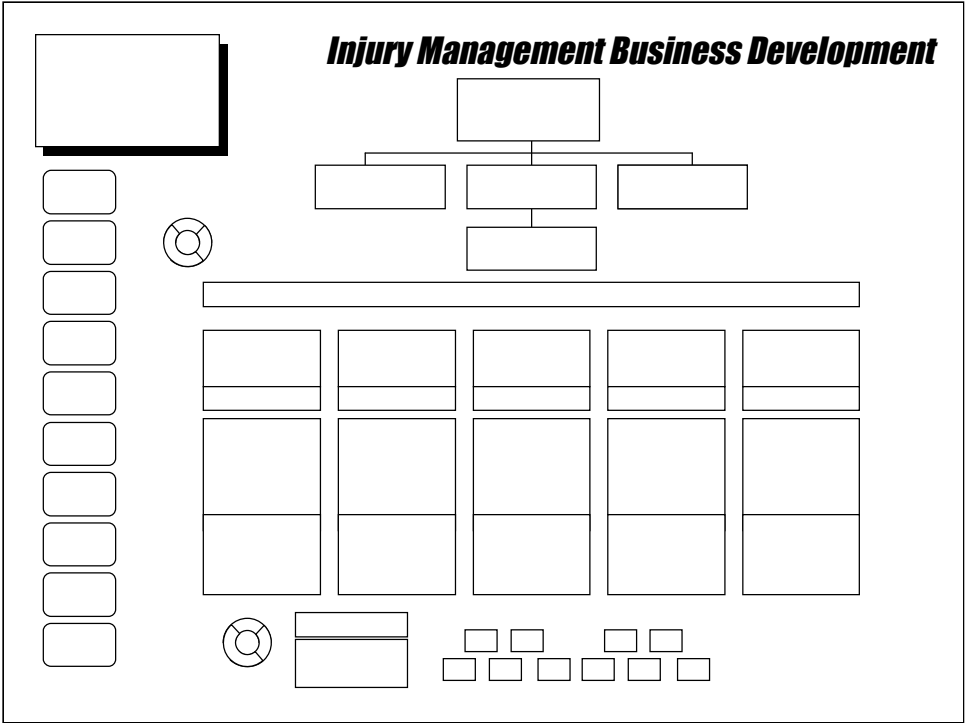
Chief of customer service



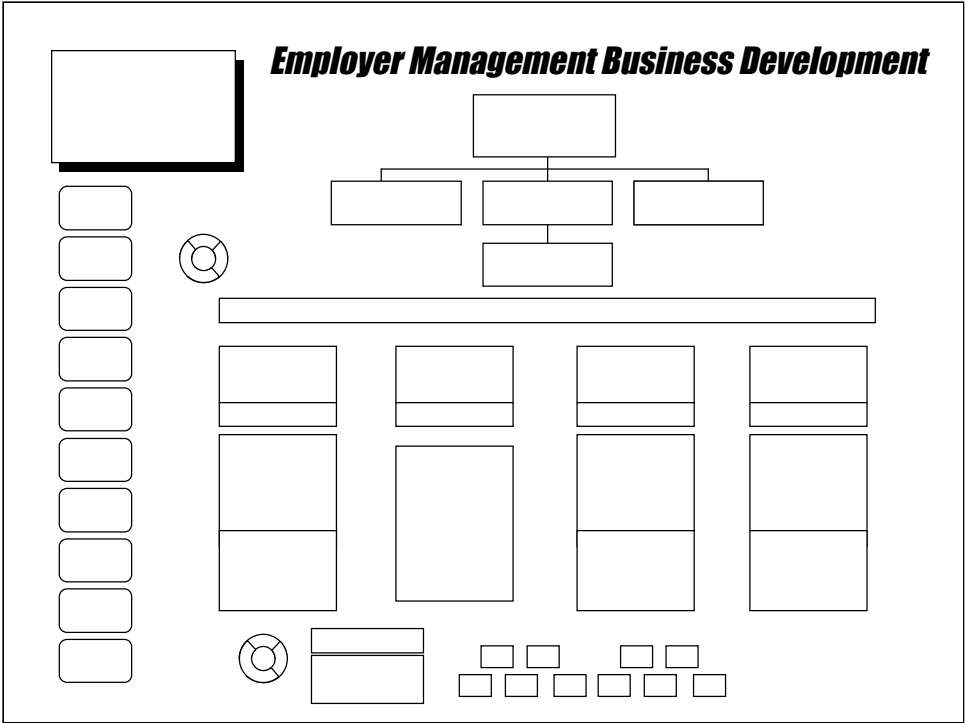
***Business development
team updates***

Jim Fograscher
Steven Meese
Kim Robinson
Chief architects
New business model

Notes:



Notes:



Notes:

Delivering an effective message

Matt Gill
Training director

Greg Bolyard
Training officer

Notes:

- **New business model = Lots and lots of training**
- **Champions will be delivery resource**
- **Tools to help you do this effectively:**
 - **Education**
 - **Materials**

Notes:

Matt's first class

Notes:

Principles of adult learning

- **Bring expertise and want it acknowledged**
- **Want to know what's in it for me**
- **Learn from discussing with others**
- **Diverse backgrounds and viewpoints**
- **Have different learning styles**
- **Need to ask questions**
- **Want to spend their time wisely**

Notes:

Relating the message

Notes:

Goals

- **Inform**
- **Persuade**
- **Inspire**
- **Know your audience**

Notes:

Audience assessment

- **Specific need**
- **Knowledge**
- **Motivation**
- **Size**
- **Location**

Notes:

Outlining your presentation

- **Opening**
- **Main ideas**
- **Information**
- **Transitions**
- **Closing**

Notes:

Types of information

- **Facts and figures**
- **Statistics**
- **Credible statements**
- **Testimony**
- **Narratives**

Notes:

Information impact

- **Auditory**
- **Visual**
- **Touch**

Notes:

Information impact review

- **Auditory**
- **Visual**
- **Touch**

Notes:

Maintaining interest

- **Be enthusiastic**
- **Create a change**
- **Use humor**
- **Engage thought**
- **Tell a story**

Notes:

Vocal techniques

- **Volume**
- **Pitch**
- **Rate**
- **Pause**

Notes:

Body language

- **Posture**
- **Eye contact**
- **Gesture**
- **Movement**
- **Use of space**

Notes:

Behaviors to avoid

- **Reading**
- **Verbal fillers**
- **Swaying and rocking**
- **Hands in pockets**
- **Fidgeting**

Notes:

Powerful visuals

- **Enhance understanding**
- **Add variety**
- **Illustrate information**
- **Reinforce your ideas**

Notes:



Powerful visuals



- ❖ **Powerful visuals are used to enhance understanding and help the audience's comprehension.**
- 2. **Visuals add variety to the presentation and help maintain the audience's interest.**
- c) **Appropriate visual aids can help illustrate information and concepts on more meaningful levels.**
- **Visuals may be used to reinforce your ideas and build enthusiasm of those viewing your presentation!**

Notes:

Illustrate information

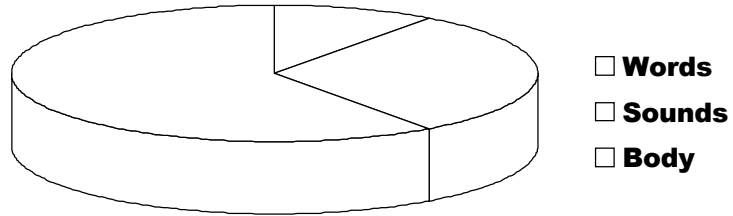
Communication capsule:

- **Words = 10%**
- **Sounds = 30%**
- **Body = 60%**

Notes:

Illustrate information

Communication capsule



Notes:

Handling audience interactions

Notes:

Handling audience interactions

- **The Talker**



Notes:

Handling audience interactions

- The Rambler



Notes:

Handling audience interactions

- The Heckler



Notes:

Handling audience interactions

- Wrong Track



Notes:

Handling audience interactions

- **The Mule**



Notes:

Fight stage fright

- **Be prepared**
- **Physically warm up**
- **Psych up – not out**
- **Play the role of helper**
- **Chat with a friendly face**

Notes:

Conclusion

- **Goals**
- **Outlining**
- **Information impact**
- **Handling audience interaction**
- **Fight stage fright**

Notes:

Employer management

A*2	Either account examiner 2 (AE2, Risk) or administrative assistant 2 (AA2, S&H)
Big 3	Three key claim factors that influence an employer's workers' compensation premium: frequency, severity and lag time.
CCG	Customer care group
CCT	Customer care team
CFC	Customer focus center
CFI	Consulting for impact
Consulting for impact	Sales training given to Safety & Hygiene and risk field staff. The field consulting process includes building relationships with the customer, helping him or her discover his or her workers' compensation needs, advocating BWC's products and services to meet those needs and delivering service to impact the Big 3.
Customer care group	A group of employers identified by industry or other similar characteristics that is defined by a customer service office for assignment and management purposes.
Customer care team	A combination of employer management and injury management services staff who is dedicated to providing service to its assigned employers and injured workers.
Customer focus center	Smaller than a regular customer service office, CFCs will provide customers with another avenue to access BWC services. BWC will pilot the CFC concept in Ashtabula, Bridgeport and Cincinnati.
EAP	Employer action plan
EM	Employer management
EM core services	Specific loss-prevention and loss-control services that most directly result in a reduction of the Big 3.
EM gatekeeper	Request handler. Staff who take initial requests or referrals (i.e., AE2, AA2 and other administrative staff) for the customer care team and employer management services. This will eventually be called the customer care coordinator.
EM high touch	The employer management activities are intense and may require many BWC experts. It also requires adequate customer commitment to follow BWC advice.
EM lead consultant	Each policy being worked by a customer care team will have a lead person responsible for coordinating the team's action plan for that customer.
EM low touch	The employer management activities are minimal. To some extent, the customer requires very little attention and interaction with a BWC field expert.

Employer management

EM medium touch	The employer management activities are less intensive but require attention by at least one BWC expert. Adequate customer commitment is required.
EM priority scale	Recommended approach for customer service offices to prioritize their employer customers by criteria that includes the Big 3, frequency, severity and lag time.
Employer action plan	A plan that outlines the action steps, goals and strategies that the customer care team and employer have agreed help the employer reduce the Big 3.
Employer management services	Customer care team members dedicated to working with employers to help them better prevent and control workers' compensation losses. Their responsibilities include developing workplace safety programs, injury prevention strategies, risk strategies, and transitional and return-to-work plans.
FSA	Field services application
Field services application	This will replace the current employer tracking application. The FSA will be the central housing location for recording all employer customer interactions, action plans and internal staff notes.
Frequency	Number of claims filed by an employer.
Lag time	Amount of time between the date of injury and the date the claim was filed with BWC.
Loss control	Once an injury occurs, BWC and the injured worker's employer work together to help the injured worker return to work as safely and quickly as possible to control the number of work days the injured worker loses. These strategies include a transitional work plan.
Loss prevention	BWC and employers work together to implement safe work practices to help prevent workplace injuries and lost work time.
Severity	Number of days an injured worker is away from work.

Injury management

AA	Auto adjudication
Auto adjudication	A systematic process for determining new low-touch claims.
CCG	Customer care group
CCP	Customer care plan
CCT	Customer care team
CDS	Claims determination specialists
CDU	Central determination unit
CFC	Customer focus center
Central determination unit	The CDU team members – currently the medical-only department – will be located in the William Green Building. Claims determination specialists (CDSs) research claims and identify low-touch claims that could not be auto adjudicated. The CDU also determines medium-touch claims that have no lost time, do not allege mental health conditions and do not contain a medium-touch ICD-9 code (i.e., lumbar sprains/strains).
Core support services	BWC Administration, Communications, Government and Media Affairs, Finance, Human Resources, Information Technology and Office Services.
Customer care group	A group of employers identified by industry or other similar characteristics that is defined by a customer service office for assignment and management purposes.
Customer care plan	A plan that outlines the action steps, goals and strategies the customer care team will employ to bring a claim to an appropriate resolution.
Customer care team	A combination of employer management and injury management services staff who is dedicated to providing service to its assigned employers and injured workers.
Customer focus center	Smaller than a regular customer service office, CFCs will provide customers with another avenue to access BWC services. BWC will pilot the CFC concept in Ashtabula, Bridgeport and Cincinnati.
IM	Injury management
Injury management services	Coordinated set of strategies to advance injury and illness claims efficiently from notification to successful resolution. Injury management is comprised of claims, medical and vocational rehabilitation services that promote proactive interventions rather than traditional claims handling and processing. Injury management services employ continuous assessment, triage and categorization of claims into touch levels to better identify strategies and specific interventions.
Lost-time claims	A claim filed when an employee loses eight or more calendar days from his or her job due to an industrial injury or occupational disease.
Medical-only claims	A claim filed when an employee loses seven or fewer calendar days from his or her job due to an industrial injury or occupational disease.

Injury management

Reassessment Lost-time claims previously referred to as manual triage, reassessment is the ongoing process of evaluating a claim's touch level during its life cycle.

System-to-system claim entry BWC is partnering with providers – particularly emergency rooms and urgent care centers – to build system integration for immediate FROI submission directly to BWC.

Triage A triage level initially is assigned to a claim at notification and is reassessed based on changes in data through the claim determination. The triage level is based on information gathered from the *First Report of Injury, Occupational Disease or Death*. It is assigned systematically.

Triage levels range from 0 to 4 and are based on an evaluation of the claim's complexity. Initially, the triage level is determined by ICD-9 codes and claim characteristics (e.g., medical only, lost time, death, catastrophic injuries and occupational diseases).

Triage levels are used to direct claims to either auto adjudication, the central determination unit or the claim services specialist for determination. (Determination refers to making the decision to allow or deny the claim)

It is possible for a triage level to change. For example, upon investigation, if the central determination unit discovers that, rather than a hand laceration, the injured worker has suffered an amputation, the medical claim specialist will update the claim data and the system will change the triage level to a 4 (most severe), resulting in the claim determination being the responsibility of the claim services specialist.

Note: At the time of initial determination, triage levels populate case management levels. However, triage levels do not drive ongoing assessment and claim management activities. Instead, it is the case management level that drives ongoing assessments and claim management activities.

Triage level 0 A claim will receive triage level 0 if information is missing (e.g., the claim wasn't assigned an ICD-9 code or the claim type cannot be established). Claims with triage level 0 are sent to the central determination unit with the goal of providing the missing information. Claims with triage level 0 will be reconsidered for allowance by auto adjudication after the missing information is updated.

Triage level 1 Claims assigned triage level 1 are low-severity, medical-only claims that been allowed by auto adjudication. Triage level 1 claims are minor injuries such as lacerations, abrasions or contusions.

Triage level 2 Triage level 2 claims are medical-only claims that cannot be processed through auto adjudication. These claims will be investigated and determined by the central determination unit. Triage level 2 claims are minor to moderate injuries that do not usually result in seven or more days lost from work.

Triage level 3 Triage level 3 claims are lost-time claims, which the claim services specialists will investigate, determine and manage. These claims refer to injuries/illnesses that result in lost days from work. Triage level 3 is also assigned to new claims which include a request for allowance of a psychological condition.

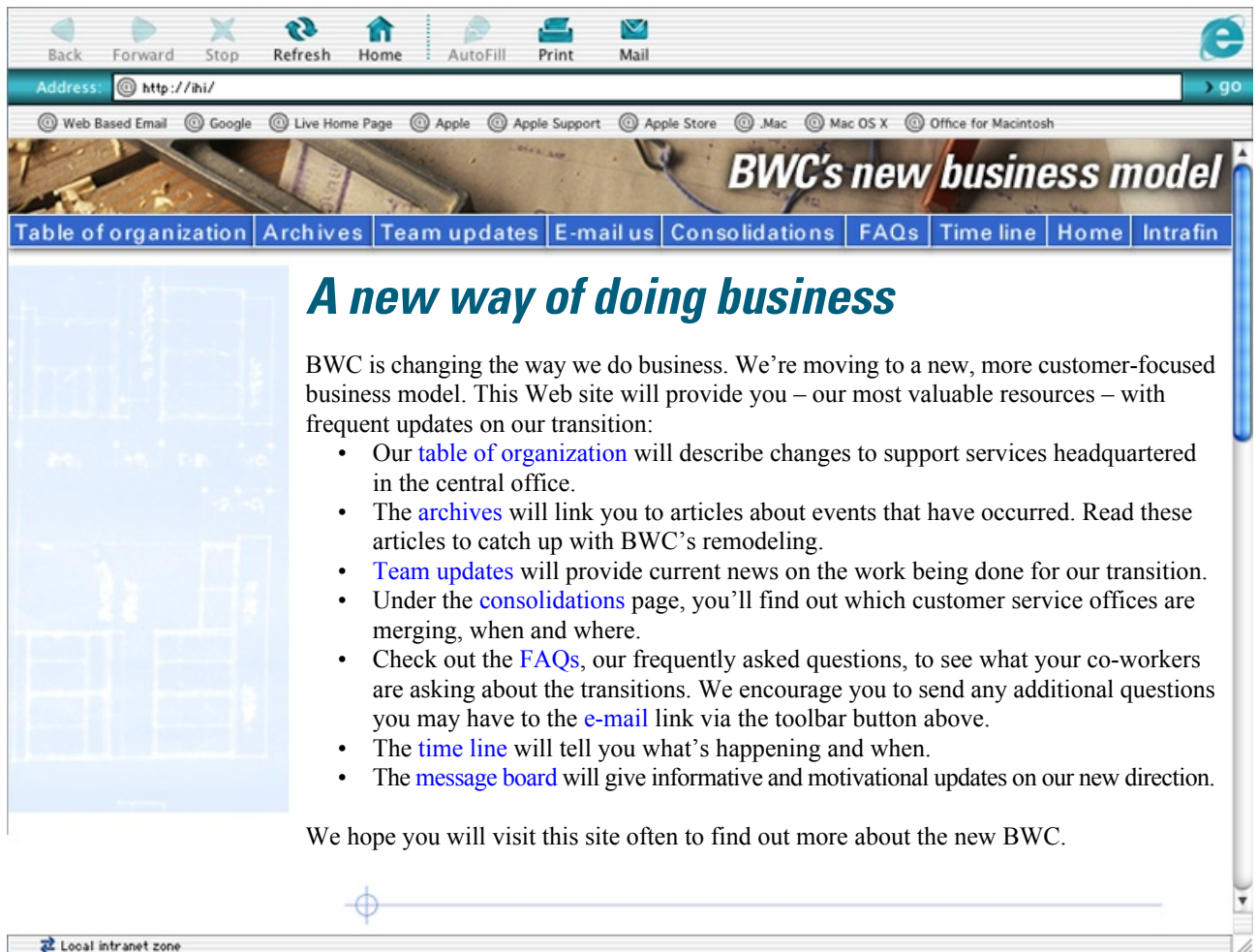
Triage level 4 Triage level 4 claims are claims with a high degree of severity, including catastrophic, occupational disease, amputations or death claims.

Injury management

Case management levels: Case management level assignments are ongoing. They're based on many factors that the claims services specialist, in conjunction with the other CST members, reviews upon assignment of the claim. These levels consider the complexity of the claim, case management strategies, and resources needed to achieve the desired outcomes, including the commitment of people, time and finances.

Case management levels range from 1 (least severe) to 4 (most severe) and are adjusted throughout the duration of the claim. Ideally, a claim will reach case management level 1. This means BWC has resolved the claim successfully and will require minimal ongoing resources throughout the life of the case. However, even resolved claims may require limited commitment of people, time and/or finances, unless the claim has been settled or the statute of limitations has expired.

New business model Web site



The screenshot shows a web browser window with a toolbar containing icons for Back, Forward, Stop, Refresh, Home, AutoFill, Print, and Mail. The address bar shows "http://hi/". Below the address bar is a search bar with "go" and a list of bookmarks including "Web Based Email", "Google", "Live Home Page", "Apple", "Apple Support", "Apple Store", ".Mac", "Mac OS X", and "Office for Macintosh". The main content area features a banner image of a construction site with the text "BWC's new business model". Below the banner is a navigation menu with links: "Table of organization", "Archives", "Team updates", "E-mail us", "Consolidations", "FAQs", "Time line", "Home", and "Intrafin". The main heading is "A new way of doing business". The text below reads: "BWC is changing the way we do business. We're moving to a new, more customer-focused business model. This Web site will provide you – our most valuable resources – with frequent updates on our transition:". This is followed by a bulleted list of seven items, each starting with a blue dot and a link: "Our [table of organization](#) will describe changes to support services headquartered in the central office.", "The [archives](#) will link you to articles about events that have occurred. Read these articles to catch up with BWC's remodeling.", "[Team updates](#) will provide current news on the work being done for our transition.", "Under the [consolidations](#) page, you'll find out which customer service offices are merging, when and where.", "Check out the [FAQs](#), our frequently asked questions, to see what your co-workers are asking about the transitions. We encourage you to send any additional questions you may have to the [e-mail](#) link via the toolbar button above.", "The [time line](#) will tell you what's happening and when.", "The [message board](#) will give informative and motivational updates on our new direction." Below the list is the sentence "We hope you will visit this site often to find out more about the new BWC." At the bottom of the browser window, there is a "Local intranet zone" indicator.

BWC's new business model

[Table of organization](#) [Archives](#) [Team updates](#) [E-mail us](#) [Consolidations](#) [FAQs](#) [Time line](#) [Home](#) [Intrafin](#)

A new way of doing business

BWC is changing the way we do business. We're moving to a new, more customer-focused business model. This Web site will provide you – our most valuable resources – with frequent updates on our transition:

- Our [table of organization](#) will describe changes to support services headquartered in the central office.
- The [archives](#) will link you to articles about events that have occurred. Read these articles to catch up with BWC's remodeling.
- [Team updates](#) will provide current news on the work being done for our transition.
- Under the [consolidations](#) page, you'll find out which customer service offices are merging, when and where.
- Check out the [FAQs](#), our frequently asked questions, to see what your co-workers are asking about the transitions. We encourage you to send any additional questions you may have to the [e-mail](#) link via the toolbar button above.
- The [time line](#) will tell you what's happening and when.
- The [message board](#) will give informative and motivational updates on our new direction.

We hope you will visit this site often to find out more about the new BWC.

Local intranet zone

BWC's new business model fact sheet

What is the new business model?

In simplest terms, BWC's new business model is a team-based approach to serving the needs of Ohio's injured workers and employers. The new business model focuses on two lines of business: injury management services and employer management services.

- **Injury management services:** A coordinated set of strategies that advances a workers' compensation claim efficiently from notification to successful resolution. The new business model also promotes proactive interventions instead of traditional claims handling and processing. Continuous assessment and categorization (low, medium and high touch) of claims helps better identify strategies and effective interventions.
- **Employer management services:** Customer care teams work in a coordinated approach to help employers better manage their workers' compensation programs. Key functions include developing workplace safety programs, tailoring injury prevention and risk strategies to employers' needs, and designing return-to work plans.

Who is impacted by the new business model?

The new business model is a cultural change that impacts all of BWC and our customers. Physical changes such as the customer service office consolidations will provide more efficient and cost-effective services to injured workers and employers. Managed care organizations also will be more accountable for medically managing claims, returning injured workers to work safely and efficiently, and helping to reduce health-care costs. The new business model brings change throughout Ohio's entire workers' compensation system.

Why implement a new business model?

By implementing a new business model, BWC is providing better and more efficient service to both external and internal customers. The new business model is an evolutionary process that incorporates innovative changes into Ohio's workers' compensation system, and it ensures BWC will continue to provide the highest-quality customer service possible for years to come.

Important dates for new business model

May 2004: Auto adjudication of claims begins within current workflows.

July 2004: Information on new customer care teams announced.

Fall 2004: Customer care teams given information on new employer assignments.

May 2005: New business model is fully functional.

