AGENDA

9-9:10 a.m.	Opening remarks	Irene Barnett
9:10-9:30 a.m.	Spotlight - customer care group	Chuck Quinlan, John Romig and Jeff Redman
9:30-10 a.m.	Timeline discussion	Sandy Blunt
10-10:15 a.m.	Break	
10:15-11:30 a.m.	Team discussions Service office workload Auto adjudication/triage Central determination unit Customer care plan Existing claims	
11:30 a.m 12:15 p.m.	Lunch – on your own	
12:15-1:15 p.m.	Team Discussions Employer management workflow Employer management core services Field services application Strategy pilot	
1:15-1:30 p.m.	Leadership training	Tim Hutchings
1:30-2 p.m.	Training	Matt Gill
2-2:15 p.m.	Break	
2:15-2:30 p.m.	Communications update	Vicky Pannell/Irene Barnett
2:30-3 p.m.	Q & A	

The Definition

- CCG Customer Care Group is a group of employers and their Injured Workers.
- CCT Customer Care Team is a team of multiple disciplines collaboratively delivering service to CCG(s).

The Definition

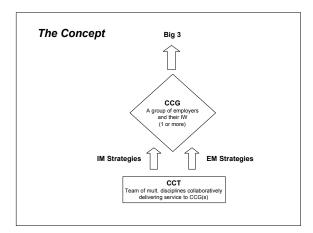
The Big 3

- 1. Severity
- 2. Frequency
- 3. Lag Time

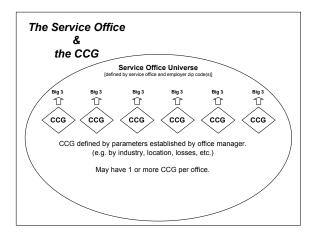
The Definition

Injury Management Strategies are strategies to positively impact the Big 3: severity, frequency and lag time.

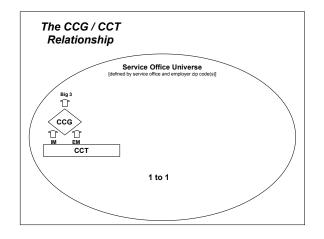
Employer Management Strategies are strategies to positively impact the Big 3: severity, frequency and lag time.



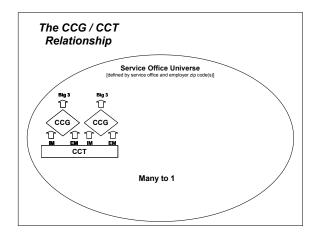




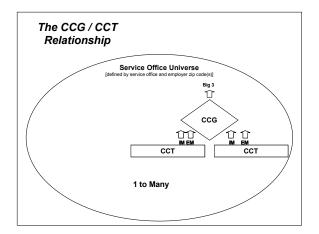




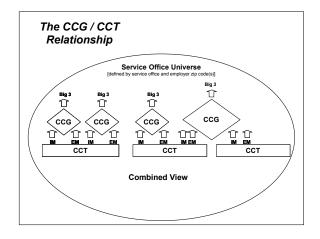




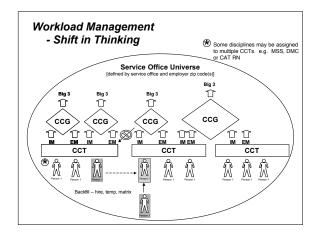














New business model timeline talking points:

Why has the New Business Model (NBM) timeline shifted?

When presented with a new set of facts, Mr. Conrad tasked the NBM executive design group to reassess the timeline for implementing the NBM. Consistent with HPP and Dolphin, the success and quality of BWC's products and services will not be compromised and driven solely by dates.

What were these new facts?

Customer service office consolidations

Allow BWC's consolidated customer service offices a transition period while minimizing interruptions as staff becomes familiar with a new work environment, co-workers and travel.

Return to the basics

The foundation for the NBM is the Book of Business (BOB). BOB is a group of employers, focused on by a customer service office, with the goals of reducing an employer's Big 3 workers' comp cost driver — lag time, frequency and severity, in a team environment.

Lag time - amount of time between the date of injury and the date the claim was filed with BWC

Frequency - number of claims filed by an employer

Severity - number of days an injured worker is absent from work

Staffing

Allow customer service office teams to remain on current teams to become more efficient in implementing their BOB strategies while simultaneously being supported with targeted technical skills training.

Budget

BWC has not been exempt from the statewide dilemma of tightening budget dollars. The timeline shift allows the agency to assure it balances the administrative budget and then examine the potential use of any excess funds for critical BWC projects and staffing NBM.

How were these new facts gathered?

Feedback was gathered from statewide employees meetings in May 2003, business development teams, additional statewide customer service office meetings held with Mr. Conrad and/or the executive design group and discussions with employers and the medical community.

How do I comment about changes to the timeline?

Opportunities continue to exist to provide feedback. During the next week your Champion will be holding an all-hands staff meeting to seek input regarding the timeline shift. Your feedback will be shared during the next Champion meeting, Wednesday, Feb. 18, in the William Green auditorium.

Timeline summary:

The foundation of the NBM is BOB; the goal of BOB is to reduce an employer's Big 3 workers' comp cost drivers – lag time, severity and frequency, in a team environment;

The best BOB strategies, now referred to as customer care strategies, are being piloted through April 2004; sometime in April, members of the executive design group will be visiting with the customer service offices to provide an overview of the pilot results;

IT has begun building the infrastructure for auto adjudication, MCO notes, customer care plan, etc., based on the business requirements provided by business subject matter experts;

Auto adjudication (AA), is a systematic process for determining a claim and assigning a triage level for new claims. The system will only allow appropriate claims; it will never disallow a claim.! Implementation target dates have been slightly extended to allow IT time to incorporate a rules based engine into the solution.!

Step 1 - back-office statistical gathering is scheduled during March – June 2004;

- Step 2 this data gather and analysis step will allow us to better understand the claim flows and types before running a parallel, fully simulated system from July – November 2004;
- Step 3 AA will run in live production starting between November and December 2004; the live production will still leave the MO and LT support structure and processes exactly as they are today, the only change will be the computer allowing a portion of the claims;
- Step 4 the final step; in January 2006, AA will fully launch into the new NBM and teams.

Customer service office teams will remain in their current structure to become more efficient in implementing their current BOB strategies and working in a team environment, while simultaneously receiving changing management training;

Change management training is being rolled out to support customer service office transitions, establish team building skills and develop effective communication skills;

After the customer care strategy pilot has been completed in April 2004, there will be a statewide rollout of finalized customer care strategies to customer service offices (May – September 2004);

The business development teams will reconvene in October 2004 and, using information/experiences gathered from statewide rollout of the customer care strategies (May – September 2004), will provide IT with specific business requirements for a customer care plan, field service application, employer action plan, customer care group and customer care team formations, and MCO notes. MCO notes will be implemented sometime this summer or fall;

After the statewide rollout of the customer care strategies, baseline assessments of technical skills will be conducted as preparation for targeted skills training that begins January 2005;

Continuous technical skills training on customer care strategies and IT tools will begin January – September 2005;

Customer care team members and their assigned employers will be announced in May 2005; staff will <u>not</u> physically move onto teams or begin servicing reassigned employers at this time;

Additional team building skills training will immediately follow customer care team announcements as preparation for NBM launch window;

NBM launch window (October – December 2005); Customer care teams physically move onto new teams and begin servicing reassigned employers using new IT tools;

NBM fully functional and CDU live (January 2006);

Advanced IT modifications and tools development (January - December 2006).



Jan 2004 Feb 2004 Mar 2004 Apr 2004 May 2004 June 2004 July 2004 Aug 2004 Sept 2004 Oct 2004 Nov 2004 Dec 2004

*	**	***	
	AA – Back office data mining and analysis only	AA – Simulated allowance only of claims using current workflow	

Pilot customer care strategies (BOB)	Hone and roll out new customer care strategies (BOB)
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Jan 2005	Feb 2005	Mar 2005	Apr 2005	May 2005	June 2005	July 2005	Aug 2005	Sept 2005	Oct 2005	Nov 2005	Dec 2005

	AA – Begin live automated allowance of claims using current medical-only lost-time assignment										

Continue IM/EM customer care skills development	New tools training
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Jan 2006 Feb 2006 Mar 2006 Apr 2006 May 2006 June 2006 July 2006 Aug 2006 Sept 2006 Oct 2006 Nov 2006 Dec 2006

AA – CDU live

Jan 2004 Feb 2004 Mar 2004 Apr 2004 May 2004 June 2004 July 2004 Aug 2004 Sept 2004 Oct 2004 Nov 2004 Dec 2004

**	***
AA – Back office data mining and analysis only	AA – Simulated allowance only of claims using current workflow

IT infrastructure development, AA development, MCO notes, system-to-system

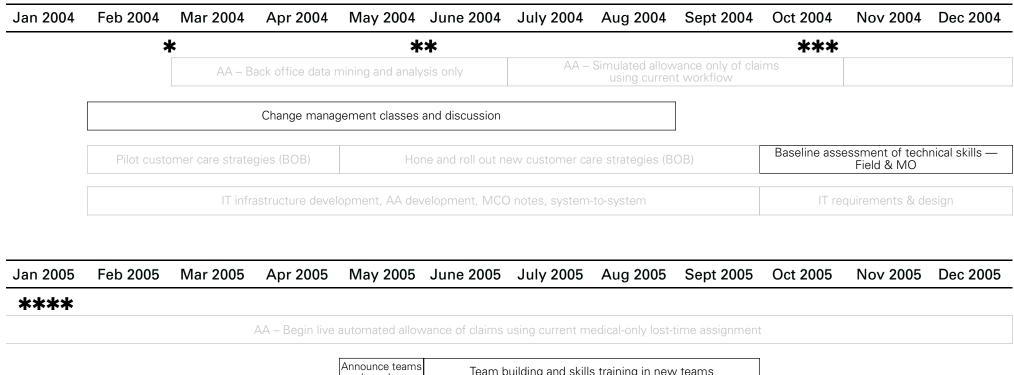
IT requirements & design

		Feb 2005 Mar 2005 Ap	pr 2005 May 2005 June 2005	July 2005 Aug 2005	Sept 2005	Oct 2005	Nov 2005	Dec 2005
	k							
AA – Begin live automated allowance of claims using current medical-only lost-time assignment		AA –	- Begin live automated allowance of claims	using current medical-only lost-	ime assignment			

Continue IM/EM customer care skills development	New tools training	
IT solutions development	Continued IT developm of CCT/CCG formati	

Jan 2006 Feb 2006 Mar 2006 Apr 2006 May 2006 June 2006 July 2006 Aug 2006 Sept 2006 Oct 2006 Nov 2006 Dec 2006

AA – CDU live

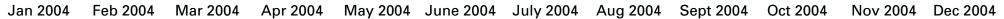


nd employers			
New tools training			
	Continued IT development of CCT/CCG formation		
	nd employers		

CDU training and skills development

Jan 2006 Feb 2006 Mar 2006 Apr 2006 May 2006 June 2006 July 2006 Aug 2006 Sept 2006 Oct 2006 Nov 2006 Dec 2006

AA – CDU live



*	**	***					
AA – Back office data	mining and analysis only	AA – Simulated allowance only of c using current workflow	laims				
Change mar	agement classes and discussion						
Pilot customer care strategies (BOB)	Hone and roll out ne	ew customer care strategies (BOB)	Baseline assessment of technical skills — Field & MO				
IT infrastructure dev	elopment, AA development, MCO	notes, system-to-system	IT requirements & design				

		•	Way 2005	June 2005	July 2005	Aug 2005	Sept 2005	Oct 2005	Nov 2005	Dec 2005
		AA – Begin live	automated allov	vance of claims	using current m	edical-only lost-	time assignment			
			Announce teams and employers	Team k	ouilding and skill	s training in nev	v teams	New busir	ness model laun	ch window
Continue IM/EM customer care skills development					New tools training					
IT solutions development				Continued IT development of CCT/CCG formation					n employers by	CCT/CCG
		CDU train	ing and skills de	velopment						
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Jan 2006	Feb 2006	Mar 2006	Apr 2006	May 2006	June 2006	July 2006	Aug 2006	Sept 2006	Oct 2006	Nov 2006	Dec 2006
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AA – CDU live

New business model fully functional

Advanced modifications & tool development



Jan 2004	Feb 2004	Mar 2004	Apr 2004	Way 2004	June 2004	July 2004	Aug 2004	Sept 2004	001 2004	100 2004	Dec 2004
	* **								***		
		AA – B	ack office data ı	mining and analy	ysis only	AA –	Simulated allow using currer	vance only of clai it workflow	ims		
	Change management classes and discussion										
	Pilot customer care strategies (BOB) Hone and roll out ne				ew customer care strategies (BOB) Base			Baseline ass	seline assessment of technical skills – Field & MO		
		IT infr	astructure deve	opment, AA development, MCO notes, system-to-system					IT requirements & design		
Jan 2005	Feb 2005	Mar 2005	Apr 2005	May 2005	June 2005	July 2005	Aug 2005	Sept 2005	Oct 2005	Nov 2005	Dec 2005

			AA – Begin live	automated allow	wance of claims	using current m	edical-only lost-	time assignment	t		
				Announce teams and employers	Team b	ouilding and skills	s training in new	v teams	New busir	ness model laun	ch window
Continue IM/EM customer care skills development				New tools training					Roll out customer care collaborative process		
		IT solutions	development			Contin of C	nued IT develop CCT/CCG format	ion	Reassigr	n employers by (CCT/CCG
			CDU train	ing and skills de	velopment						
Jan 2006	Feb 2006	Mar 2006	Apr 2006	May 2006	June 2006	July 2006	Aug 2006	Sept 2006	Oct 2006	Nov 2006	Dec 2006

AA – CDU live

New business model fully functional

Advanced modifications & tool development

S. O. Workload Assignment

Team Lead: Steve Dyer

Team members: Victoria Doyle, Brenda Corum, Gerald Laymon, Dee Seidenschmidt, Dave Spencer, Janice Viau, Jan Tucker, Kimberly Perkins, Cristal Foreman

IT Support: Carm Simpson, Priya Anand

Facilitator: Gidget Jennings

Team Profiles

- 1. Itemize the human resources, by discipline and name, available to each Service Office Manger for Customer Care Team placement
 - Waiting for the selection of staff on the following issues:
 - Cincinnati/Governor's Hill Service Offices (Currently in process)
 - Customer Focus Center's
 Safety & Hygiene field staff
 - Employer Management Supervisor and other technical positions
- 2. Recommend guidelines for Customer Care Team member assignments Will address this issue in future meetings

- 3. Recommend guidelines for Customer Care Group (CCG) assignments
 - ۶ All employers assigned to the Field Service Offices are to be a part of a CCG CCG's are to be serviced by only one Customer Care Team (CCT) (i.e. maintain a one-to-one relationship between the CCG and a given CCT) ۶
 - ۶
 - Customer Care Team's are able to service more than one Customer Care Group Changes in CCG assignments are to be communicated to the following units 2 weeks prior to the adjustments taking place: Field Operations, Information Technology, Central Determination Unit ۶ ۶
 - The communication of CCG changes should include the following: Specific zip codes and/or policies being change, The CCT/CSS that the policies are being changed from and to,
 - ~
 - The specific date the changes will become effective
 - In especific date the changes will become effective For Customer Care Group's that become too large for one Customer Care Team to service, it is recommended that the CCG be split into two or more CCG's based on an additional characteristics (Example: CCG based on "construction" (i.e. industry), could be further defined and split into multiple CCG's by zip code or a more detailed construction manual codes) ۶

Team Profiles

- 3. Recommend guidelines for CCG assignments (continued) Customer Care Group examples with corresponding pros and cons (*This list is not exhaustive*)
 - 1. Zip Code CCG based on the employer's zip code
 - Less system impacts (current V3 design supports employer zip code process) Easily atom impacts (entrue vo design supports entropics any code process) Smaller territories for EM staff to cover (lower administrative costs for travel and increased face-to-face time with more employer customers) Able to leverage Chambers of Commerce, Saffety Councils, providers, Occupational Health Centers, etc in the zip code areas designated for the CCG . •
 - Increased familiarity with cross industries
 - Diversification of industries within zip codes provides more interesting/less monotonous work for employees
 - Policy reassignment/movement can occur without loss of industry familiarization Minimal movement of employers between CCG's - Less impacts to CDU
 - Fewer seasonal industry impacts
 - Cons b.

 - s V3/WCIS do not communicate when an employer moves Less single industry familiarity due to industry diversification Less effective leverage of trade associations and other industry groups

Team Profiles

- 3. Recommend guidelines for CCG assignments (continued) Customer Care Group examples co Industry - CCG based on the employer's industry (retail, construction, schools, etc) 2. a Pros
 - s Familiarity of industry/operations (injury types, jargon, safety issues, etc.) Able to leverage Industry groups & union support Better manual code integrity Improved subrogation identification Cons b.
 - s Higher EM admin cost due to travel distance & area to cover CCG customers Inefficiencies in the use of EM personnel (i.e. One EM person would be assigned to customers in the same geographic areas as other EM employees) Unable to leverage local Chambers of Commerce, Safety Councils, etc. Impact to performance measures in certain industries (Prisons No gradual RTW)
 - RTW) Specialization of processing certain industry claims reduces team members flexibility to fill in or assume work from other teams Initial identification and assignment of policies will be manually intensive Lower workload diversification increases monotony of assigned work Seasonal industry fluctuations will impact workloads for both IM & EM Multiple industries within a policy may exist E.g. OSU (hospital/education) •

- 3. Recommend guidelines for CCG assignments (continued)
 - Customer Care Group examples continued
 - 3. Book of Business CCG based on employer customer's performance in the Big 3 (Frequency, Severity, Lag time) a.
 - Pros Personnel resources focused on customers that need the most help •
 - Personnel resources focused on those customers during the majority of claims costs/higher base rates Leverage industry groups when they are heavily represented in the Book of Business •
 - Leverage customer participation in BWC programs Offices have the authority to limit the number of employers that are transferred out of this CCG, therefore limiting impacts to other processes (i.e. CDU & IT) :

 - CDU & IT)
 b. Cons
 Fluency of Book of Business Book of Business customers may change
 annually or bi-annually depending on guidelines set by Field Operations
 Changes in CCG could cause negative impacts to CDU staff/workload
 No common link between employers other than poor performance in Big 3
 Initial identification and assignment of policies will be manually intensive
 Inefficiencies and higher EM admin costs are possible due to travel distance
 between customers and overlapping geographic areas

Team Profiles

- 3. Recommend guidelines for CCG assignments (continued) Customer Care Group examples continued
 - BWC Programs CCG based on the employer's participation 4. in one or more BWC program (i.e. PDP, DFWP, etc.)
 - A. Pros
 EM resources focused on marketing programs to needed customers
 COTE I considered of individual programs Increases CCT knowledge of individual programs
 - b. Cons
 Fluency of programs negative impacts to service office/CDU staff/workload
 - assignments
 Difficult to maintain even workloads due to number of employer in programs

 - Dinicut to inatinate veri worktoase due to inatinee to emproyer in programs No common link between employers other than program participation
 Initial identification and assignment of policies will be manually intensive
 Inefficiencies and higher Eva damin costs are possible due to travel distance between customers and overlapping geographic areas

Team Profiles

b.

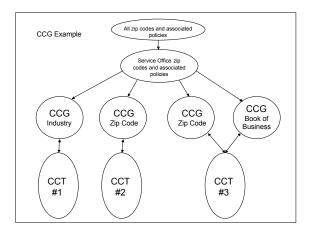
3. Recommend guidelines for CCG assignments (continued) Customer Care Group examples continued

- 5. MCO Assignment CCG based on the employer's MCO assignment a. Pros
 - Increased level of partnering between BWC and MCO Familiarity of MCO personnel and workflows
 - •
 - Increased ease of staffing and action plan coordination
 - TPA & Providers are often associated with MCO Assist MCO's in meeting their contractual obligations
 - Cons
 - Fluency of MCO assignment (Open enrollment)

 - Fluency of MCU assignment (upen enronnen) Combining/Merging of MCO's policy/claim reassignment impacts Significant impacts to CDU staff/workload assignments Turnover of MCO staff Inefficiencies and higher EM admin costs are possible due to travel distance between customers and overlapping geographic areas

- 3. Recommend guidelines for CCG assignments (continued)
 - > Customer Care Group risks and recommendations to minimize those risks
 - a. Size of Customer Care Group
 More personnel resources may need to be allocated to one team versus another
 due to the size of a CCG, which may raise management span of control issues
 Management of Customer Care Team vacancies (or missing team members)
 - Management of Customer Care Team vacancies (or missing team members) Recommend that personnel resources be reallocated in whole or in part from one CCT to another (inter-office and intra-office) when vacancies occur, so that the CCT to CCT relationship is not compromised Recommend using temporary work levels (TWL) Example: CA to CSS Recommend developing a rotation schedule for those individuals volunteering for special projects in the Central Office to limit special project involvement by any one individual resulting in a higher level of external customer service Recommend increased use of effective return-to-work strategies such as modified duty and transitional work for BWC employees Eucerv of certain bross of CCG's and resulting needing in more to workload

 - Fluency of certain types of CCG's and resulting negative impacts to workload assignments in service offices and CDU
 Recommend that CCG's be created using grouping criteria that is NOT fluid and only changes on a rare occasion (i.e. CCG's by Zip Code, Industry, etc.)





Team Profiles

- 3. Recommend guidelines for CCG assignments (continued) Recommended process and timeline for defining CCG's by October 2004
 - a. May 2004 Educate SOM's on the following issues
 - Statewide zip code assignment
 CCG definition
 Examples of CCG's
 - CCG aerminion
 Examples of CCG's
 Pros and Cons of different types of CCG's
 Risks involved with CCG's
 Risks involved with CCG's
 b. August 2004 Submission of CCG recommendations to Field Operations
 - c. October 2004 Submission of CCG recommendations to Executive Staff

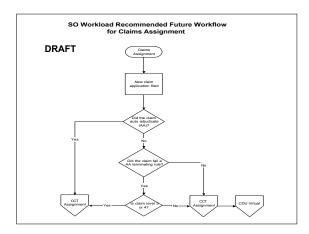
- 4. Identify issues relating to Risk Supervisors and Loss Prevention Managers becoming Employer Management Supervisors. Suggest actions for a smooth transition.
 - Team is waiting for final position description approval for the Employer Management Supervisor and other technical positions ۶ • Position descriptions have been drafted and are being sent to DAS for final approval
 - Selection method for Employer Management Supervisor position ۶ Will follow the same process as the new Regional Audi Supervisors
 Risk Supervisors and Loss Prevention Managers will be selected based on
 the skills they possess
 Validate the number of Employer Management Supervisors per
 - ≻ Service Office
 - Will address in future meetings •

Realignment and Reassignment of Policies and Claims

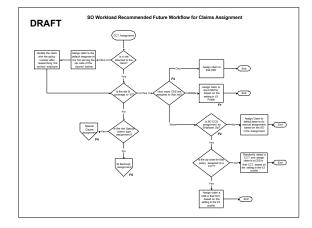
- Recommend guidelines for reassigning policies to CCT's

 Service offices to provide IT with the list of policies within each CCG along with the CCT assignment
 If service offices chose to create CCG's by zip code, they will only need to provide IT with the zip code groupings assigned to each CCT (Service offices to provide IT with a list of policies they will only need to assign specific CSS's)
 Service Offices to provide IT with a list of policies they wish to have assigned to specific CSS's
 IT to write a program that would systematically assign all policies to their new office/CST/CSS location

 Recommend a process for transferring claims to CSS's
- Recommend a process for transferring claims to CSS's The Existing Claims team is currently developing a workflow for which claims are transferred and when. Our team will validate this workflow and develop timelines for implementation
- Recommend a systems assignment logic for new claims under the New Business Model 3.









Realignment and Reassignment of Policies and Claims

- 2. Recommend how to continuously care for claims and employer relationships during transition from one BWC staff to another. What will we tell the customer? How will we inform them? .
 - This objective will be addressed in future meetings
- 3. Recommend how services will be coordinated when employers have multiple locations around the state The Core Service team developed recommendations on this objective from an EM perspective. We will validate their recommendations as well as develop recommendations for the Injury Management portion of the CCT .

Shutdown of Offices

- Recommend how (OPRS) performance goals will be transferred to new supervisors
 The team has created an Employee Transfer Guide which will include OPRS goals and supporting documents (Will be available under Leadership tools)
 Data Warehouse changes have already been made to support the transfer of performance measures within the New Business Model
 Recommend communication needs to external and internal customers protifying them of the changes
- Recommend communication needs to external and internal customers notifying them of the changes
 Have requested BWC's overall communications plan
 Team will review this overall communications plan and make any suggestions we believe are necessary
 Identify related issues
 The team is currently developing muidelines for the service offices to follow when
- The team is currently developing guidelines for the service offices to follow when making changes to V3 Profiles, transferring "special handling claims", and when shutting down or eliminating an office in V3 Team recommends the development of a SWAT team approach with specific point person identified .

Auto Adjudication and Triage

A claim enters the system by any method (V3 Indexed, Dolphin, EDI, system to system FROI)

- Claims will be evaluated by AA when they enter the system.
- ✓ Under some circumstances claims will also be evaluated real time and during batch (looping).
- BWC is working on a project which may allow claims to be sent directly from a provider's system into V3 called system to system FROI.

Every claim is evaluated by AA rules. One of three outcomes: allowed by AA, fails terminating, or fails non-terminating

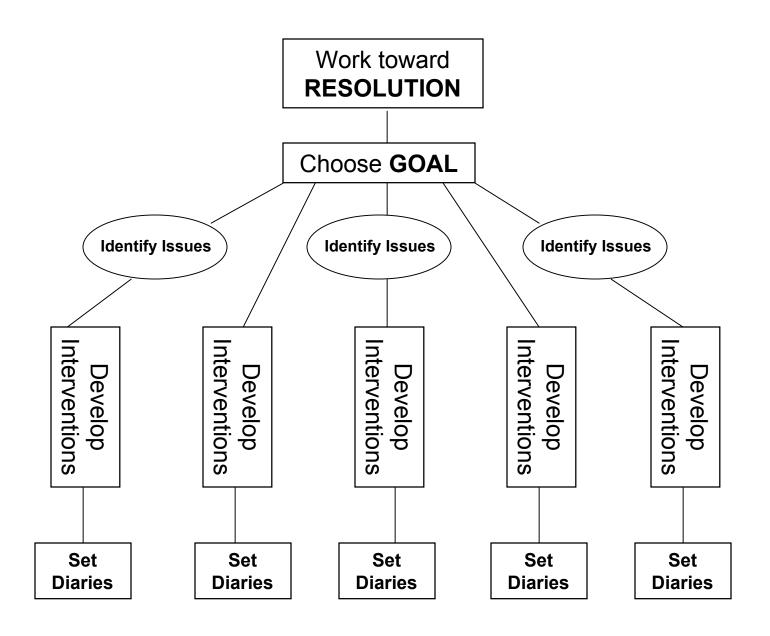
- Z Data about which rules are passed or failed will be kept.
- Rules can be turned on or off and variable data will be changeable by the IM division.
- \measuredangle A BWC Order will be issued for claims that pass the AA rules.
- Claims that fail terminating rules will be determined by the CDU or the CCT.
- Claims that fail non-terminating rules will be reevaluated for AA until they are determined or fail a terminating rule.

Every claim is evaluated for triage level of 0, 1, 2, 3, or 4

- \measuredangle Triage Level 0 = Still a candidate for AA
- Triage Level 1 = Allowed by AA, SI covered, marine fund and black lung
- ✓ Triage Level 2 = Assigned to CDU to determine
- Solution of the second second

IMPORTANT NOTE: Triage level is not the same as case management level! It is just a place to get started. $\$

	NEW BUSINESS MODEL									
CENTRAL DETERMINATION UNIT										
Task	Responsible Party to Complete Task	Customer	Steps	Business Requirements	Process Measurement	Communication Strategies	Training Objectives	Policy		



Existing Claims Transition Team

Medical Only Claims

- 1. Active Claims with Outstanding Applications or Diaries
- 2. Active Claims without Outstanding Applications or Diaries
- 3. Inactive Claims
- 4. Exemption Period

Existing Claims Transition Team

Lost Time Claims

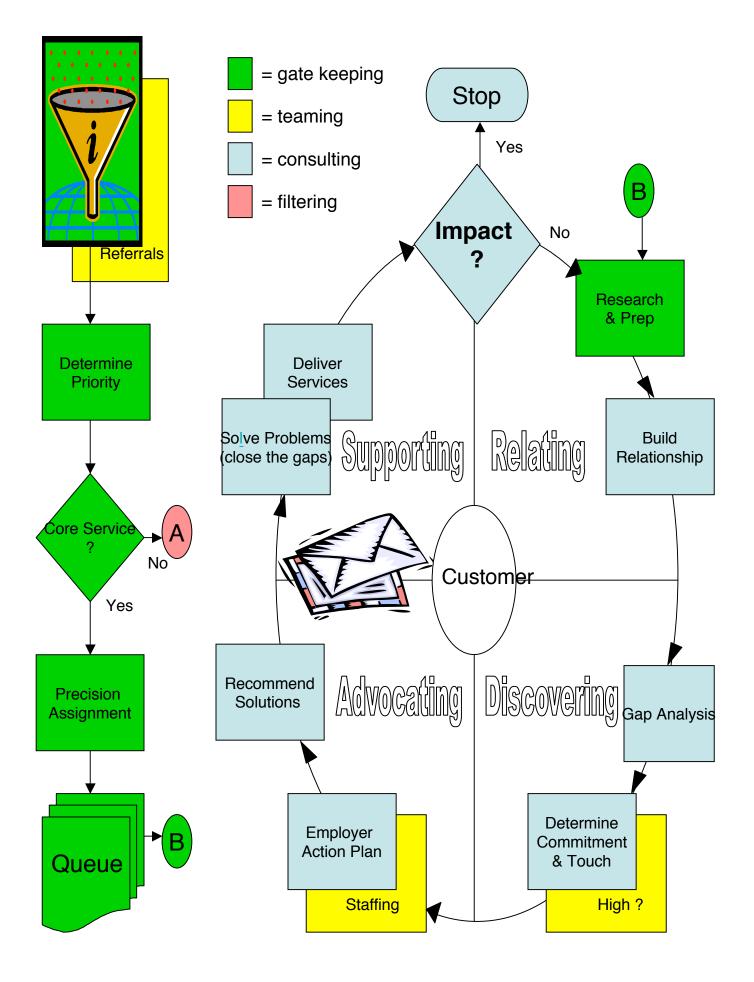
- 1. Zip Code Realignment Claims that remain in the currently assigned Office
- 2. Zip Code Realignment Claims that will be reassigned to another service office

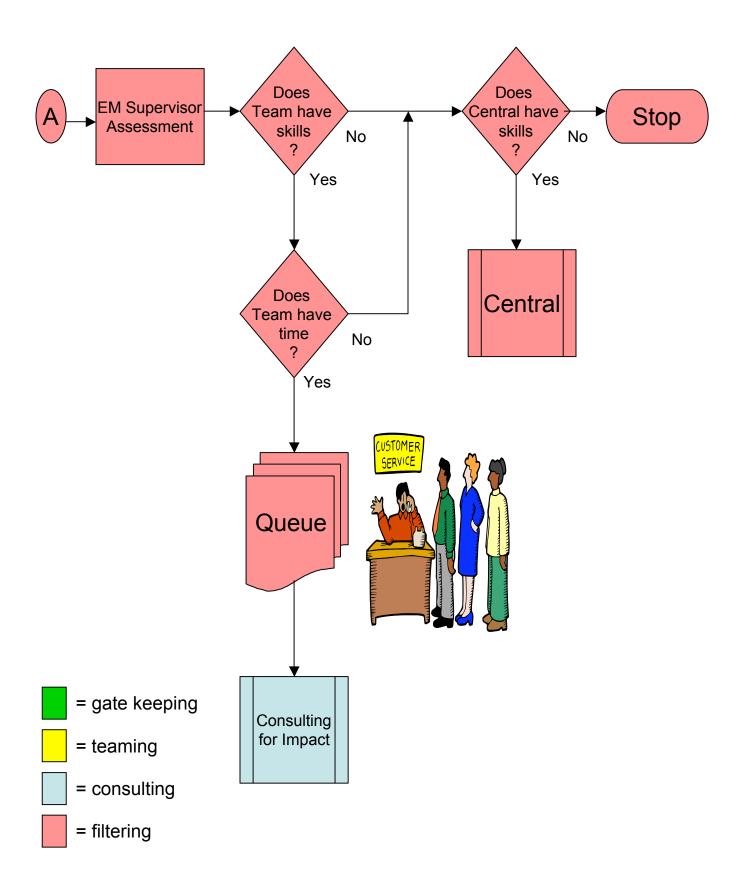
Existing Claims Transition Team

Claims Strategies

- 1. Legal Industrial Commission Referrals
- 2.
- Medical a. Preparing for Exams/Reviews b. Partnering with the Provider c. Drug Utilization Review

- 3. Settlement a. Centrally Directed Team b. MCO / EM





Employer Management Referral

Employer Name		Policy #					
Address	City/State	J	Zip Code				
Contact Person	Title		Phone #				
Comments:							
Referred By:	Office:	Phone #	Date				
	Employer Mana	ERNAL USE					
Employer Representative	Reason for Service	Emplo	oyer Management Co	ore Services			
Employer Management Supervisor Employer Services Specialist	Claims_Catastrophic Claims_Trend Complaint	Education and Skills ESS Con Program Evaluation	st Safe Ergo Ind Sa	afe 🗌 H 🔄 REA			
Safety Consultant Specialist	Employer Request Multiple Employer Work Sites	ESS Con	st Safe 🗌 Ergo 🗌 Ind Sa	afe 🗌 H 🔤 REA			
Re-Employment Advisor	 Non-group rating renewal Speaking Engagement BoB DFWP PDP Plus Speaking Engagement 	Risk Assesssment a	st Safe Ergo Ind Sa and Control st Safe Ergo Ind Sa	_			
	Other	Team Evaluation an	t Safe 🗌 Ergo 🗌 Ind Sa	afe ☐ H ☐ REA			
Assigned To:	Assigned By:		Date				

E	EM Core S	Services Ch	arter
1. D	efine EM Core S	Services	
	ESS	Safety	REA
Program Evaluation and Design	Risk Management ProcessE valuation Defaulton – Will a safe employers in on-ale evaluation and object of MC programs and loss control Uni- 2 - SPAP – DFEZ – DFEZ – 15 Stap Duartess Pein – Vieble achies serior management beford in teatment and recognition – Molical treatment and recognition	Safety Management Process Evaluation Debtors - VM asid emposes in adverg commer grants, hardware, adverges commer grants, hardware, adverges grant - Belander and Safety program evaluation - grant - Safety other evaluation - Drive - Drive - Drive - Safety other evaluation - Safety other evaluation - Drive - Drive - Safety other evaluation - Safety other e	REA Management Process Evaluation Definition - Will a solid employees in casability of the solid employees in casability of the solid employment Meter Bille of Will Weekspers on Dopbin' - TWG 4 - TWG 4 - RWW (Remain at work) - RWW (Remain at work)

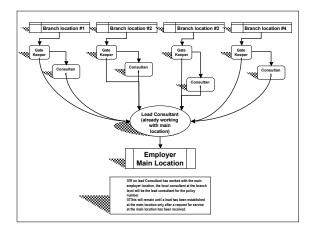


EM Core Services Charter

- 2. Performance Metrics
- 3. Internal Partnerships
- 4. Finance and budgets

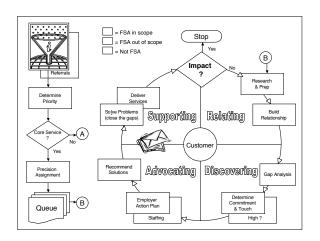
EM Core Services Charter

- 5. Customer satisfaction survey
- 6. Basic (on-site) risk assessment
- 7. Non-core services
- 8. Employers with multiple locations

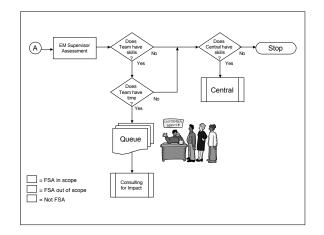














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			Provide overhead air lines		Harris, Rick	04/30/02	04/23/02	T		+
			Provide evewash in Mixing room		Harris, Rick	04/30/02				-
			Provide vehicular protection for electrics	al equipment	Harris, Rick	04/30/02				-
			Provide ground fault ciruit protection		Harris, Rick	04/30/02				
			Physical hazards follow-up	Gillian, Brett		04/30/02			bo30.042.doc	-
16	327140-0	84/18/02	Claims review	Parsons, Dana		04/18/02	04/18/02	S		
			Noise survey	Coates, Mike		05/27/02	06/27/02	s	mac37.072.doc	Т
			Provide welding screens		Harris, Rick	04/30/02		T		
			Provide & enforce eye protection		Harris, Rick	04/30/02		T		
			Create a food, drink and smoking policy		Harris, Rick	04/30/02		T		
			Abate 4 mixing room hazards		Harris, Rick	04/30/02		Т		
			Physical hazards follow-up	Gillian, Brett		05/23/02		T		
23	327140-0		Noise survey walk through	Costes, Mike		05/23/02	05/23/02	T		_
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			Perform an emergency evacuation drill Ventilation system evaluation	Coates, Mike	Meyer, Cliff	08.07.02	08/07/02	T	mac40.082.doc: Ber	_
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			Provide exhaust ventilation to mixing are		Meyer, Cliff	001502		7		-
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			Attend OCOSH Fundamentals course	in every billing in etc.	Jordan, Rita	02/11/04	10/31/03	T	by with side	-
			Attend OCOSH Accident Anelysis		Jordan, Rita	02/11/03		T		-
			Complete the written safety manual		Jordan, Rita	02/11/04		Ť		-
			Improve accident reporting and analysis		Jordan, Rita	11/28/03		ŕ		-
			Discuss recon hazards with manageme		Jordan, Rita	11/28/03		Ť		-
37	327140-0	11/05/03	Physical hazards audit follow-up	Gillian, Brett		01.02/04		T		



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Field Service Application Objectives

- Request for service tracking
 Prioritization engine
 Track assignments
 Look up & modify assignments
 Track addresses & contacts
 Capture Action Plan
 Display Action Plan
 Report Action Plan
 Research and preparation functionality
- Remote performance (RAS)
 Track time for assignments

WHALE DONE

The Power of Positive Relationships

FIRST RULE

BUILD TRUST

SECOND RULE

ACCCENTUATE

THE

POSITIVE

THIRD RULE

REDIRECT

FOURTH RULE

BUILD POSITIVE RELATIONSHIPS

New Business Model Training

Matt Gill - BWC Training Director

What is Training?

The Knowledge and Skills required to do your current Job

– Technical skills – Human skills

Apollo Training History

- Training Team
- · Looked at Anticipated Requirements
- Summarized in Training Matrix

Project Training Timeline
Change Management Training
Customer Care Strategies (BOB)
Baseline Assessment
EM/IM Skill Development
Team Building Skills
New Tools Training
CDU Training

Change Management Training

- February August 2004
- Focus on Human Skills
- Led by Pam Burton-Leadership and Professional Development Department

Change Management Training

Four Components

- 1. Whale Done
- 2. Communications Tune Up
- 3. Team Building
- 4. Motivating for Extraordinary Service

Change Mgt. – Whale Done

- Positive Working Relationships
- Transitional Cycle
- Whale Done Strategies

Change Mgt. – Communications

- Effective communication skills
- Identify customer expectations
- Four levels of communication
- · Listening strategies
- Conflict resolution

Change Mgt. – Team Building

- Successful Teams
- Stages of Team Growth
- Stakeholder and CCT needs

Change Mgt. – Motivating

- Motivating for extraordinary customer service
- Create the right environment
- Motivating in New Business Model

Change Management

- Champion role in change management
- MCO champions

Customer Care Strategies (BOB)

- May thru September 2004
- Who is BOB anyway?
 - Current case management strategy
 - Action plans in claims
 - Partnering with employers on action plans
 - Identifying integration points
 - E.G. CSS contacts ESS to look into frequency trend with a particular employer
 - Focus on big three

Customer Care Strategies (BOB)

- Why New Business Model?
 - BOB has been so successful
 - $-\operatorname{\mathsf{Take}}$ the best of BOB and standardize
 - Institutionalize these strategies

Customer Care Strategies (BOB)

- Cost Containment Team Project
 - Three teams integrated into Toledo pilot
 Focus on best practices around cost containment
 - Results will drive training

Customer Care Strategies (BOB)

- BOB Overview
- Staffing
- Pursuit of Settlement

Baseline Assessment

- October thru December 2004
- A training tool
- Pinpoints areas of additional training needs
- Vary by job description
- Baseline skill sets required to move forward

EM/IM Skill Development

- January thru May 2005
- Follow Up from Baseline Assessment
- CCT Cross Training
- Advanced Skill Training

CDU Training

- January thru January 2005
- Training for the new CDU
- Both Human and Skills Training
- · Parts will Include Field Staff

New Tools Training

- May thru September 2005
- Training IT Solutions
 Auto adjudication
 - MCO Notes
 - Customer Care Plan
- Just In Time Training

Team Building Skills

- June thru September 2005
- Will follow new team announcements

Advanced Training

- 2006 and beyond
- To be determined once needs are assessed

Champion Role

- Share with your co-workers
- Prepare them for what to expect
- Answer their questions
- Assure them we know training is important

Apollo Training Matrix

E = Education S = Skill Training											Cue	tom	or C	are Te	om													
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Glossary of terms

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 and Bridgeport.

- **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.

Glossary of terms

Injury management

injury manage	GIIIGIIL
AA	Auto adjudication
Auto adjudication	A systematic process for determining a claim and assigning a triage level for new claims.
CCG	Customer care group
ССР	Customer care plan
ССТ	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 claims that could not be auto adjudicated. The CDU also determines claims that have no lost time, do not allege mental health conditions and do not contain a 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 and Bridgeport.
IM	Injury management
Injury management	Coordinated set of strategies to advance injury and illness claims efficiently from
services	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 triage 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.

Glossary of terms

Injury management

Reassessment	Lost-time claims previously referred to as manual triage, reassessment is the ongoing process of evaluating a claim's case management 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 <i>First Report of Injury, Occupational Disease or Death</i> . 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 I 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 customer service team 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.