

The *INNOVATOR*

Significant FY18 Results To Date

Happy New Year from the MCI team! It is hard to believe that we are now halfway through the 2018 fiscal year.

Below I have highlighted some of the key program results through December 2017.

Key Program Successes

Provider Network Verification – CareWorks, our medical bill adjudication partner, verified 3,137 network providers during this calendar year. Verification will continue on an ongoing basis.

Direct Deposit- Enrollment for direct deposit continues to grow. At the end of FY15 we had enrolled 30.9% of eligible injured workers. Enrollment is currently at 51.3%.

Subrogation Recoveries – Subrogation recoveries through two quarters of FY18 total \$ 797,051; last year the total recovered was just over \$1,063,000.

Agency Visits/Training – MCI/WCS continues to focus considerable time on visiting and training agencies. We do this primarily through snapshot surveys, FOCUS training, workers' compensation training, claim team visits and Return-to-Work Unit visits. Workers' Compensation Services provided two Workers' Compensation 101 classes in July. Additionally, they provided live training in Richmond, Tidewater and Staunton on advanced topics. FY18 ushered in the return of Safety Officer Network meetings. 74 agency representatives participated in these meetings in Richmond, Blacksburg and Portsmouth. For help with agency-specific training, please contact Kristie McClaren by email at Kristie.mcclaren@dhrm.virginia.gov or by telephone at 804-786-0362.

Key Metrics

Compensability decision turnaround time— so far this year we made compensability decisions on 2,080 claims with an average compensability turnaround time of 18 days.

Medical bill payment turnaround time— average payment lag time of 8 days. Less than 1% of medical checks issued were more than 30 days from the date of receiving a complete and proper bill.

24,566 bills were allowed for payment by our medical bill adjudication partner with recommended payments totaling \$15,989,000. This was a savings of 28.99% or \$6,527,000. Since medical bill payments account for 66% of our overall workers' compensation costs, it is important to have effective medical cost containment strategies in place.

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Special points of interest:

- > Subrogation recoveries trending positively!
- > Keys to reporting work status.
- > Direct Deposit reaches all-time high!
- > Tailored training AVAILABLE!

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General Storage Safety

Do you have work areas that are filled with excess storage? How about areas with hazardous chemicals? Maybe you can identify with a workspace with just a bit more clutter or a few more items than are necessary for your regular day-to-day activities. Are you certain current storage practices would not cause or contribute to a workplace fire or employee injuries?

The Occupational Safety and Health Administration and the Virginia Occupational Safety and Health (OSHA/VOSH) have specific requirements and recommendations that address this very subject. Providing a workplace free from recognized hazards that are causing or are likely to cause death or serious physical harm is the primary responsibility of the employer. Understanding this and how to develop, implement, and manage methods to make the workplace safer are important considerations.



3,137 Network Providers Verified

If your agency needs training around this topic, contact Monica Vannoy, Loss Control Consultant, to schedule a FOCUS presentation. She can tailor the presentation to fit your agency’s needs for content and will fit the training into your schedule. Monica can be reached at 804-308-3993 or monica.vannoy@dhrm.virginia.gov.

Employee Spotlight- Althea Burnett

24,566 medical bills recommended for payment

Althea has been with MCI for 15 years and has served in the capacity of VSDP Disability Coordinator for 14 years. A typical day for Althea involves reviewing all VSDP reports for accuracy, noting updates to disability status and working with agency contacts, benefit coordinators, supervisors, injured workers, VRS and the REED Group.



Quick Facts about Althea:

What 3 words best describe you?

1) dedication, 2) compassion and 3) unbiased

What is the favorite part about working for MCI?

My favorite part of my job is being able to help the Agencies and Injured Workers, knowing that ultimately my efficiency and timeliness is going to benefit everyone.

List five hashtags that describe your personality.

#Trustworthy #Reliable #Happy #Personable #Confident

When you are not at work, how do you enjoy your time?

When I am not at work I enjoy spending quality time with my two sons Andre and Ryan. I love going to Ryan’s college basketball games and watching him play. I also work with charitable organizations on various occasions and I truly enjoy riding my motorcycle as often as possible. Last but not least, I love to travel a lot and have been to 48 of the 50 states.

What are your 3 top life highlights?

1. A single mother of two wonderful sons who are college graduates. 2. My college degree and paralegal certification. 3. Single-handedly maintaining my family in every way for over 28 years.

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Checks for medical services issued, on average, 8 days from bill receipt

Medical bill adjudication savings just over \$6.5M

(Employee Spotlight-continued from page 2)

What did you want to be when growing up?

When growing up I wanted to be an immigration or family law attorney.

What is the first thing you would buy if you won the lottery?

I would buy my Mom a new home in the Caribbean.

What music is most played on your iPhone/Android phone?

My favorite music is modern country. I enjoy music by Tim McGraw, Kenny Chesney, Carrie Underwood, Blake Shelton, Darius Rucker, Brett Young, Rascal Flatts, Georgia Florida Line, Eric Church and Brad Paisley.

OSHA Recordkeeping Rule Update

The Occupational Safety and Health Administration/Virginia Occupational Safety and Health (OSHA/VOSH) recently updated the recordkeeping and recording rule. The standard, 29CFR 1910.1904, requires employers with 10 or more employees to record and report incidents meeting specific criteria and to record and maintain records of serious injuries and illnesses that are treated beyond first aid. The list of procedures and conditions that meet the definition of first aid can be found in the standard under [29CFR 1904.7\(b\)\(5\)\(ii\)](#). These items as well as medically related visits for counseling, observation, or to receive diagnostic testing procedures (i.e. X-rays, blood tests, etc.) do **NOT** have to be recorded on the OSHA/VOSH 300 log. Anything falling **OUTSIDE** of this list is considered to be medical treatment and is to be recorded.

Many agencies/industries are considered to be “partially exempt” from the record-keeping and reporting requirements. A list of these can be found at 29CFR [1904 Sub-part B Appendix A](#) or the [OSHA/VOSH Fact Sheet](#). If you are a partially exempt organization but have received notice (in writing) from OSHA/VOSH, the Bureau of Labor Statistics (BLS), or an entity operating under the authority of OSHA/VOSH or BLS, you are required to comply with the recordkeeping and recording rule.

This information is to be logged on the OSHA/VOSH 300 log for the agency’s records and posted for employees using the OSHA/VOSH 300A form (the summary) every February through April for the preceding year. All OSHA/VOSH recordkeeping documents are to be kept on-site for five years.

Currently, agencies are required to post the recordkeeping information at the agency location and for agency employees to view. Employers can now begin to electronically report their Calendar Year (CY) 2017 Form 300A data to OSHA/VOSH via the federal OSHA webpage (<https://www.osha.gov/injuryreporting/index.html>). All covered establishments must submit the information electronically by July 1, 2018. Beginning in 2019, the report will be due **March 2** for the preceding year. **Remember, not all establishments are covered by this requirement.** Only a small fraction of establishments are required to electronically submit their Form 300A data to OSHA. Establishments that meet any of the following criteria DO NOT have to send their OSHA 300A data to federal OSHA electronically. Remember, these criteria apply at the establishment level (facility location), not to the firm (agency) as a whole.

- ◆ The establishment's peak employment during the previous calendar year was 19 or fewer, regardless of the establishment's industry.
- ◆ The establishment's industry is **on this list**, regardless of the size of the establishment.
- ◆ The establishment had a peak employment between 20 and 249 employees during the previous calendar year AND the establishment's industry is **not on this list**.

SAVE THE DATES - Safety Officer Network Meetings

March 28 - Tidewater
Community College
(Portsmouth)

April 18- Science Museum
of VA (Richmond)

Stay tuned for a western
VA location



(OSHA Recordkeeping Rule Update-continued from page 3)

Covered establishments with 250 or more employees are only required to provide their 2017 Form 300A summary data.

This new rule was developed in an effort to encourage employers and employees to put more focus on safety in the workplace. This information, once submitted will be publicly available to view. OSHA/VOSH believes that this information will be valuable to the public, job seekers, customers, and the like and will improve the organization overall. This information will also help OSHA/VOSH use their resources in a more effective and efficient manner.

How do you submit information to OSHA/VOSH electronically? There are three ways to securely submit the information. The information may be manually entered into a web-based form, a CSV file may be uploaded, or the information may be transmitted electronically from the Injury Tracking Application (ITA) launch page ([Click Here](#)).

In addition to the electronic reporting information, the new rule requires employers to notify employees of their rights to report injuries and illnesses without fear of retaliation. This notice can be satisfied by continuing to post the [OSHA workplace poster](#) which is already an OSHA/VOSH required practice. The anti-retaliation and employee notification updates became effective **December 1, 2016**.

Contact the LCI team (Monica Vannoy, 804-308-3993 or monica.vannoy@dhrm.virginia.gov or Curtis Stacy, 757-653-2476 or curtis.stacy@dhrm.virginia.gov) for questions or assistance and monitor the VOSH website for any recordkeeping updates at http://www.doli.virginia.gov/vosh_enforcement/electronic_record_submission.html.

Reporting Work Status Changes

In our January 2017 Newsletter we reported that MCI no longer requires the utilization of the Supplementary Report to report changes in an employee's work status. While the Supplementary Report is not required, we still need the same information that was communicated using that form. Some agencies are sending in time sheets or leave reports that don't clearly define time missed as a result of the workers' compensation injury. In these instances the benefit coordinator will need to obtain the necessary information from you. To avoid unnecessary delays and extra work for all, please make sure the information you are supplying duplicates the information that is found when using the Supplementary Report.

When emailing work status via form or document other than the Supplementary Report, we ask that you include the following in the subject line of the email—Supplementary Report Alternative for (injured worker name). This subject line will ensure that the communication is captured in our electronic claim file consistently.

Remember you are also welcome to keep reporting lost time and return to work via the Supplementary Report. The choice is all yours! For those of you electing to continue using the Supplementary Report, you can find the form on www.covwc.com in our Forms Library.



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Got ideas
for the
newsletter?

Contact

Penny
Gough

Claim Red Flags

While the benefit coordinators at MC Innovations are responsible for investigating new workers' compensation claims and addressing continuing eligibility for benefits, those decisions are best made when collaborating with agency contacts. The presence of anything that you deem to be questionable, suspicious or having an impact on the claim in any way, should be shared with the benefit coordinator. Below are examples of possible red flags that should be shared for all new workers' compensation claims:

- ◆ The injured worker has known history of self-employment or side jobs.
- ◆ The injured worker has only been working for the agency for a short period of time prior to the injury.
- ◆ The injured worker has a history of being on performance improvement plans.
- ◆ The injured worker has reason to believe her job is in jeopardy.
- ◆ The injured worker is disgruntled about something at work.
- ◆ Accident occurs near the end of a probationary period.
- ◆ There were no witnesses to the accident.
- ◆ The accident was not immediately reported by the injured worker.
- ◆ Details of the accident and/or date, time and location of the accident seem vague or sketchy.
- ◆ The injured worker changes the description of accident.
- ◆ The nature of the injury seems unusual considering the employee's normal job and duties.
- ◆ Information about any related pre-existing pain, injuries or conditions that could impact this injury.
- ◆ Monday morning accidents or accidents immediately following a vacation or other out-of-work period of time.
- ◆ Tips from co-workers that suggest anything different than what the injured worker reported.
- ◆ Tips from co-workers about the injured worker's level of activity while not at work.
- ◆ Residential moves, especially out of state, following an accident.
- ◆ Excessive demands or pressure for compensation.

Additionally the following possible red flags should be shared for ongoing claims:

- ◆ The injured worker is never at home when you try to make contact.
- ◆ The injured worker is never available by phone.
- ◆ The injured worker does not supply you with a physical address, uses a P.O. box, or gives a relative's address and/or phone number.
- ◆ Tips from co-workers who have seen the injured worker, while being disabled from working.
- ◆ Residential moves, especially out of state, during a period of disability.
- ◆ Excessive demands or pressure for compensation.
- ◆ Information about any related pre-existing pain, injuries or conditions that could impact this injury.

Please keep in mind that the presence of any or several of these red flags does not necessarily mean there is anything fraudulent going on or that a claim payment will be impacted. However, the presence of some of these red flags should cause our benefit coordinator to investigate further.

