March 6, 2012

R.C. 2294

To the Members of the Board

Re: New York State Workers’ Compensation Board Announcements
   a. Mandatory Electronic Claims Filing Process
   b. Revised Inpatient Hospital Rates

The New York State Workers’ Compensation Board (WCB) has just released Subject Number 046-477, which sets forth a national standard for claim administrators to electronically submit employer claims data. The standard is the International Association of Industrial Accident Boards and Commissions’ (IAIABC) Claims Electronic Data Interchange (EDI) Release 3.0. The electronic filing of claims data will be implemented in phases, beginning in the spring of 2013.

The WCB has also released Subject Number 046-478 that sets forth revised inpatient hospital reimbursement rates together with guidance with respect to the applicability of these rates to inpatient hospital cases.

Copies of Subject Number 046-477 and Subject Number 046-478 are attached for your information and reference.

Questions regarding these subject numbers, or any other questions pertaining to the mandatory electronic reporting requirement or the applicability of the inpatient hospital reimbursement rates, should be directed to the Workers’ Compensation Board.

Please distribute this information to the appropriate personnel within your organization.

Very truly yours,

Monte Almer

President

MH/ab
Encl.
Workers' Compensation Board Mandates Electronic Claims Filing Process (eClaims)

Date: March 5, 2012

Introduction

The Board is adopting a national standard for claim administrators to electronically submit employer claims data. The standard is the International Association of Industrial Accident Boards and Commissions' (IAIABC) Claims Electronic Data Interchange (EDI) Release 3.0. This electronic filing of claims data will be implemented in phases, beginning in spring 2013, and will provide timely, accurate, and credible electronic reporting.

More than 30 states currently use or are actively planning to use the IAIABC EDI standard for claim submissions. Most national carriers already utilize the standard in those jurisdictions. The technology is recognized as the national best practice for First Report of Injury/Subsequent Report of Injury (FROI/SROI), and has a proven track record.

The Board intends to collaborate with claim administrators in the workers' compensation industry to ensure that this transition to electronic filing is as seamless as possible. Electronic claims filing supports the Board's continuing effort to improve services to injured workers of New York and their employers. In fact, based on the experience of other states that have implemented the IAIABC standard, the Board anticipates that its adoption in New York will yield significant benefits, including:

- Improving the timely delivery of benefits to injured workers
- Providing seamless processing of information from the initial claims reporting source to the jurisdiction
- Providing a single, consistent data format
- Reducing paper handling costs to system participants outside the Board, i.e., handling, completing, and shipping
- Reducing high costs to the Board for handling, processing, and scanning paper documents as well as certain data entry costs
- Simplifying the Board's case assembly process
- Reducing duplicative claim form filings
- Decreasing the time it takes for claims information to be available to system stakeholders. Claim administrators filings would be available via eCase within 24 hours of receipt.
- Increasing the quality and timeliness of information received by the Board. Over time, this benefit will increase efficiencies and drive performance in the processing of claims for all participants, with a direct benefit to injured workers.
- Increasing the availability of data for policy decisions

Implementation Plan

Collaboration and communication between stakeholders and the Board will be essential to a successful transition from a paper to an electronic claims reporting environment. As a first step in stakeholder communication, the Board has developed a presentation that provides an overview of electronic claims filing, including the benefits that result from the adoption of an electronic reporting standard.

This presentation includes:

- Results of best practices outreach and research -- including the feedback received from other states on training, implementation and timelines
- Brief overview of the IAIABC
- eClaims benefits
- Mapping WCB forms to eClaims
- Options for submissions
- Project milestones
- Communication and training plan encouraging stakeholder involvement

The Board invites all stakeholders to review the presentation. To achieve a seamless transition to electronic claims filing, the Board would like more information from the claim administrator community. At the end of the presentation, there is a link to a questionnaire. It is an opportunity for claim administrators to give input about their familiarity with electronic claim filing and adopting the IAIABC standard in other jurisdictions. The Board will use this information to develop a communication strategy that addresses the various needs of stakeholders in this ongoing process.

The Board will establish and support transparent and continuous two-way communications with all stakeholders impacted by this transition. As a first step, the Board's Office of Stakeholder Outreach and Education has recently requested that insurance carriers, self-insurers and third party
administrators provide their departmental contact information. This contact information will enhance the Board's capacity to directly interact with appropriate individuals from these stakeholders. Please e-mail the Board's Office of Stakeholder Outreach and Education if you need another copy of the contact information form.

For more information on the IAIABC Claims Release 3.0, please visit the EDI Implementation Guide section of the IAIABC website at: www.iaiabc.org.

Questions related to this announcement can be directed to: eClaims@wcb.ny.gov. As the Board publishes more information on this initiative it will be posted on our eClaims web page.

The Board looks forward to working with stakeholders during the transition to this electronic claims submission process.

Robert E. Beloten
Chair

¹ eCase is a web application that allows parties to view the progress of claims for which they are listed as "Parties of Interest" (POIs). The eCase application allows you to view case information, party of interest contact information, and documents related to the case. Registration is required for this application.
Revised Inpatient Hospital Rates

Date: March 5, 2012

Pursuant to New York Public Health Law § 2807-c(b-1), the workers’ compensation fee schedule for inpatient hospital care tracks New York Medicaid rates, with limited statutory modifications. These rates also apply to treatment provided under the Comprehensive Motor Vehicle Reparations Act, Volunteer Firefighters Benefit Law, and Volunteer Ambulance Workers' Law. The New York State Department of Health (DOH) is required by statute to promulgate the workers’ compensation inpatient rates. The DOH recently provided the Workers’ Compensation Board (Board) with the following revised reimbursement rates for inpatient hospital care:

- Medically managed detoxification (MMD) and medically supervised inpatient withdrawal (MSIW) reimbursement rates with discharge dates of January 1, 2011 through March 31, 2011, refer to Subject Number 046-468, have been extended to apply through December 31, 2011. These rates, which reflect the detox rate reform provisions of Section 2807-c(4)(1) enacted under Chapter 58 of the Laws of 2008, and as subsequently revised under the Laws of 2009. These rates are posted on the Health Care Information section of the Board's website. (From the Board's home page, click on these links: Health Care Information>Medical Care Fee Schedules>Medical Fee Schedules>2011.)

- Inpatient hospital care reimbursement rates with discharge dates of January 1, 2011 through December 31, 2011 (prior rates issued in Subject Number 046-466 are superseded by these rates). These rates are determined using the Medicaid inpatient methodology, All Patients Refined – Diagnostic Related Groups (APR-DRG). The new rates are posted on the Health Care Information section of the Board's website. (From the Board's home page, click on these links: Health Care Information>Medical Care Fee Schedules>Medical Fee Schedules>2011.)

- Inpatient hospital care reimbursement rates with discharge dates of October 1, 2010 through December 31, 2010 (prior rates issued in Subject Number 046-455 are superseded by these rates). These rates are determined using the Medicaid inpatient methodology, All Patients Refined – Diagnostic Related Groups (APR-DRG). The new rates are posted on the Health Care Information section of the Board's website. (From the Board's home page, click on these links: Health Care Information>Medical Care Fee Schedules>Medical Fee Schedules>2010.)

Robert E. Beloten
Chair