

OMBUDS OFFICE

2020 Annual Report



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**Ombuds
Office**

An Independent Service of
Ohio's Workers' Comp System

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Message from the Chief Ombudsperson



April 16, 2021

Industrial Commission
Nominating Council

Dear Council Members:

I am pleased to present the Ombuds Office Annual Report for calendar year 2020 (CY2020). In accordance with Ohio Revised Code section 4121.45, this report provides a statistical summary of the activity of the Ombuds system from CY2020. Ombuds Office staff again continued to perform our mission of assisting injured workers (IW) and employers in matters dealing with the Bureau of Workers' Compensation (BWC) and the Ohio Industrial Commission (IC).

2020 was a busy and productive year; of the 5,156 customer contacts handled by our office, we categorized 323 as complaints, based on the customer expressing dissatisfaction with BWC or IC. These complaint contacts came from the following sources:

- Injured workers (or their representatives) 75 percent;
- Employers (or their representatives) 16 percent;
- Other 9 percent.

Of the remaining 4,833 customer contacts, we categorized 2,413 as Ombuds inquiries and 2,420 were categorized as other inquiries. These contacts came from the following sources:

Ombuds inquiries

- Injured workers (or their representatives) 70 percent;
- Employers (or their representatives) 21 percent;
- Other 9 percent.

Other inquiries

- Employers (or their representatives) 71 percent;
- Injured workers (or their representatives) 21 percent;
- Other 8 percent.

In 2014 we developed a new approach to collect data and describe the issues presented to the office. Information about our customer contacts is critical in order to identify patterns, trends, and opportunities for improvement of the workers' compensation system. Reports since 2014, reflect the new, more robust approach to data collection and provide new detail related to all customer contacts to the Ombuds Office.

2020 was a year of rapid change and much unpredictability everywhere and neither the Ombuds Office nor the workers' compensation system were excluded from that change and unpredictability. In March

2020, all state employees began working from home and staff needed to innovate in order to continue to meet the needs of customers. Ombuds Office staff was able to swiftly develop new processes to ensure minimal disruption to the way we serve customers. The Ombuds Office also quickly developed new codes in order to track the pandemic impact on the workers' compensation system.

Customer outreach and education remained a priority for 2020 despite the logistical challenges. I presented virtually at various workers' compensation seminars and I continued ongoing communication with BWC and IC staff in order to make sure there is a clear understanding of the service provided by the Ombuds Office.

Finally, we have maintained membership with the International Ombudsman Association (IOA) whose mission is to support and advance the ombudsman profession and ensure that practitioners work to the highest professional standards. The IOA provides a set of professional and ethical principles to which members adhere in their ombudsman practice. These principles reflect a commitment to promote ethical conduct in the performance of the ombudsman role and to maintain the integrity of the ombudsman profession – independence, neutrality, impartiality, confidentiality and informality. We also belong to the United States Ombudsman Association whose purpose is to assist existing ombudsmen and ombudsman organizations in improving the operation of ombudsman offices throughout the United States.

Once again, all Ombuds staff faithfully continued to perform their work and resolve issues for our customers. They deserve commendation for their continued dedication and hard work.

I appreciate the confidence placed in me by this nominating council and look forward to a productive 2021.

Sincerely,



Beryl Piccolantonio
Chief Ombudsperson

About the Ombuds Office

The Ohio General Assembly established a workers' compensation ombudsperson system, which has been in place since the 1970s (ORC 4121.45). The Ombuds Office is a neutral and independent resource available to employers, injured workers, and their representatives, to assist with problems navigating and questions arising out of the Ohio workers' compensation system. We answer inquiries and investigate complaints about the workers' compensation system, facilitating resolution of issues when possible. We capture, categorize and analyze inquiry and complaint data to identify areas of potential concern in the workers' compensation system. This information is published annually.

§ 4121.45 Ombudsperson system.

- A. There is hereby created a workers' compensation ombudsperson system to assist claimants and employers in matters dealing with the bureau of workers' compensation and the industrial commission. The industrial commission nominating council shall appoint a chief ombudsperson. The chief ombudsperson, with the advice and consent of the nominating council, may appoint such assistant ombudspersons as the nominating council deems necessary. The position of chief ombudsperson is for a term of six years. A person appointed to the position of chief ombudsperson shall serve at the pleasure of the nominating council. The chief ombudsperson may not be transferred, demoted, or suspended during the person's tenure and may be removed by the nominating council only upon a vote of not fewer than nine members of the nominating council. The chief ombudsperson shall devote the chief ombudsperson's full time and attention to the duties of the ombudsperson's office. The administrator of workers' compensation shall furnish the chief ombudsperson with the office space, supplies, and clerical assistance that will enable the chief ombudsperson and the ombudsperson system staff to perform their duties effectively. The ombudsperson program shall be funded out of the budget of the bureau and the chief ombudsperson and the ombudsperson system staff shall be carried on the bureau payroll. The chief ombudsperson and the ombudsperson system shall be under the direction of the nominating council. The administrator and all employees of the bureau and the commission shall give the ombudsperson system staff full and prompt cooperation in all matters relating to the duties of the chief ombudsperson.
- B. The ombudsperson system staff shall:
1. Answer inquiries or investigate complaints made by employers or claimants under this chapter and Chapter 4123. of the Revised Code as they relate to the processing of a claim for workers' compensation benefits;
 2. Provide claimants and employers with information regarding problems which arise out of the functions of the bureau, commission hearing officers, and the commission and the procedures employed in the processing of claims;
 3. Answer inquiries or investigate complaints of an employer as they relate to reserves established and premiums charged in connection with the employer's account;
 4. Comply with Chapter 102. and sections 2921.42 and 2921.43 of the Revised Code and the nominating council's human resource and ethics policies.
 5. Not express any opinions as to the merit of a claim or the correctness of a decision by the various officers or agencies as the decision relates to a claim for benefits or compensation.

For the purpose of carrying out the chief ombudsperson's duties, the chief ombudsperson or the ombudsperson system staff, notwithstanding sections 4123.27 and 4123.88 of the Revised Code, has the

right at all reasonable times to examine the contents of a claim file and discuss with parties in interest the contents of the file as long as the ombudsperson does not divulge information that would tend to prejudice the case of either party to a claim or that would tend to compromise a privileged attorney-client or doctor-patient relationship.

C. The chief ombudsperson shall:

1. Assist any service office in its duties whenever it requires assistance or information that can best be obtained from central office personnel or records;
2. Annually assemble reports from each assistant ombudsperson as to their activities for the preceding year together with their recommendations as to changes or improvements in the operations of the workers' compensation system. The chief ombudsperson shall prepare a written report summarizing the activities of the ombudsperson system together with a digest of recommendations. The chief ombudsperson shall transmit the report to the nominating council.
3. Comply with Chapter 102. and sections 2921.42 and 2921.43 of the Revised Code and the nominating council's human resource and ethics policies.

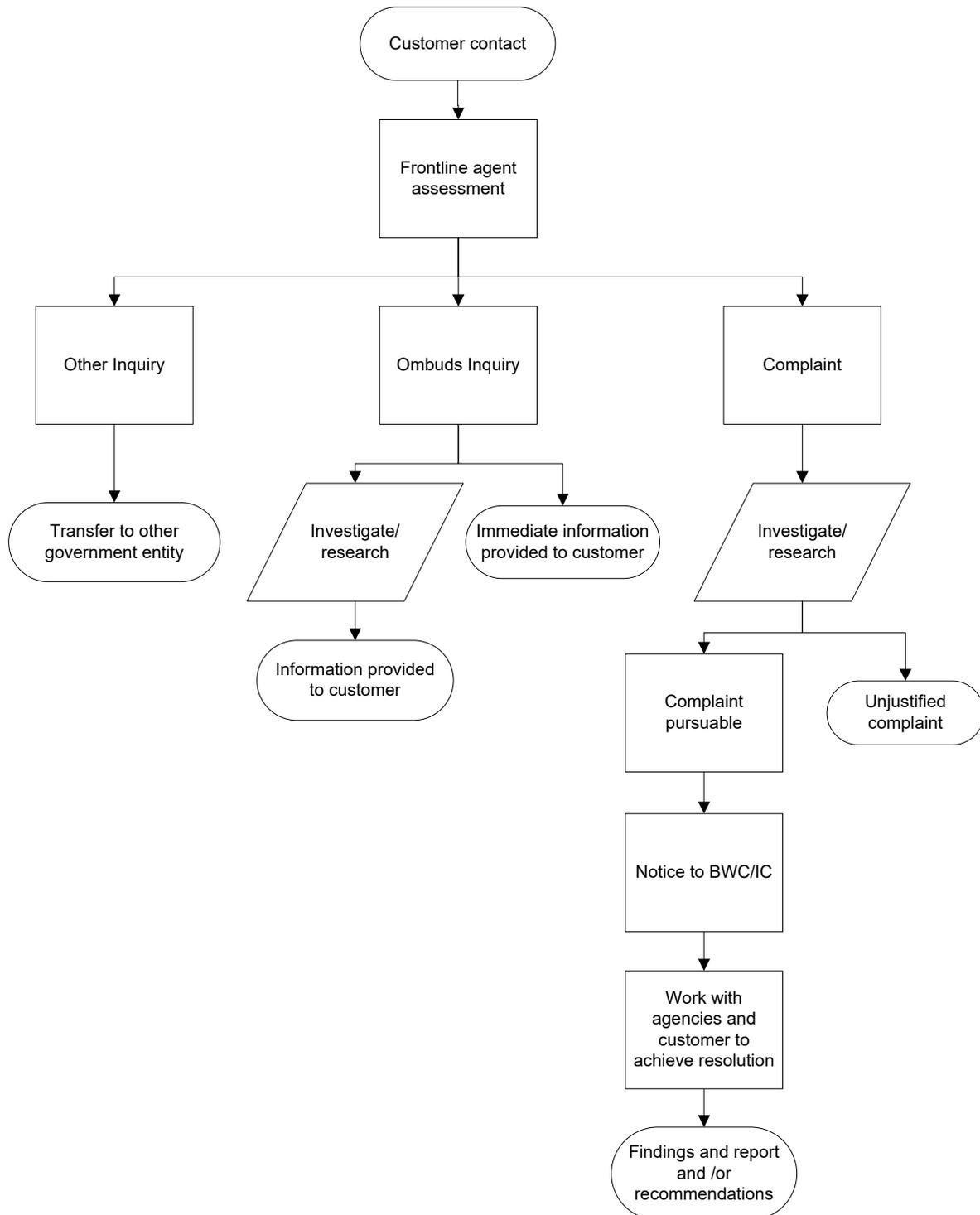
D. No ombudsperson or assistant ombudsperson shall:

1. Represent a claimant or employer in claims pending before or to be filed with the administrator, a district of staff hearing officer, the commission, or the courts of the state, nor shall an ombudsperson or assistant ombudsperson undertake any such representation for a period of one year after the ombudsperson's or assistant ombudsperson's employment terminates or be eligible for employment by the bureau or the commission or as a district or staff hearing officer for one year;
2. Express any opinions as to the merit of a claim or the correctness of a decision by the various officers or agencies as the decision relates to a claim for benefits or compensation.

E. The chief ombudsperson and assistant ombudspersons shall receive compensation at a level established by the nominating council commensurate with the individual's background, education, and experience in workers' compensation or related fields. The chief ombudsperson and assistant ombudspersons are full-time permanent employees in the unclassified service of the state and are entitled to all benefits that accrue to such employees, including, without limitation, sick, vacation, and personal leaves. Assistant ombudspersons serve at the pleasure of the chief ombudsperson.

F. In the event of a vacancy in the position of chief ombudsperson, the nominating council may appoint a person to serve as acting chief ombudsperson until a chief ombudsperson is appointed. The acting chief ombudsperson shall be under the direction and control of the nominating council and may be removed by the nominating council with or without just cause.

Ombuds Office Workflow



Ombuds Office Case Stories

The sampling of case stories below represents the variety of complaints and issues our customers brought to us in 2020.

Where are my benefits?

The Ombuds Office was contacted by an IW who did not receive a temporary total disability compensation (TT) payment that should have been received approximately two weeks prior. The IW was distraught because she needed the money and she could not reach anyone at BWC. Ombuds staff investigated and determined that the BWC had made a mistake so Ombuds staff inquired whether the payment could be sent to the IW in an expedited way. BWC staff agreed and began the process of sending the funds to the IW via overnight mail delivery. Unfortunately, the post office was experiencing delays and BWC learned that mail would take at least one week to reach the IW. BWC then agreed to make an expedited direct deposit to the IW's bank account.

What did I do wrong?

An employer reached out to the Ombuds Office because he was confused and frustrated after being told by BWC staff that he would not qualify for a rebate because his true-up report was filed too late. Ombuds staff investigated and learned that the employer filed his true-up report on 10/02/2020 (the deadline), but it was not posted in BWC's system until 10/05/2020. Ombuds staff reached out to BWC and was told that in order to determine eligibility for the rebate, BWC used the date the report posted rather than the date the report was filed. BWC further explained that the October date was an extension from the original due date in August as a grace period to account for the negative impact of the pandemic, and therefore, they were not making any exceptions. Ombuds staff questioned why the written policy defined eligibility by the true-up report filing date rather than the true-up postdate and was told the employer could request an adjudication hearing if they disagreed with the decision. The employer filed a request for an adjudication hearing in January 2021 and ultimately, the Employer's appeal was granted, and he received a rebate.

I don't understand what's happening.

An IW reached out to the Ombuds Office asking for help figuring out what was going on with his claim. The IW said he is a police officer and he was sent to the ER by his supervisor after performing CPR on an individual. The IW said he had a hearing, but that the hearing officer told him the claim had been filed against the wrong employer and the IW was unsure what the current status was. Ombuds staff investigated the issue and discovered that although the district hearing officer (DHO) denied the claim against the incorrect employer, she did not refer the claim back to BWC for processing against the correct employer. Ombuds staff reached out to BWC who said they would discuss the issue with someone from BWC legal. The BWC attorney who reviewed the situation decided to file a motion requesting that the IC exercise continuing jurisdiction based on a mistake of law and requested the IC vacate the DHO order and remand the claim application back to BWC to process against the correct employer. The DHO did vacate the prior DHO order, but instead of remanding it back to BWC, this DHO also denied the claim against the correct employer. There was no appeal filed to the denial order.

We are desperate!

An IW's husband reached out to the Ombuds Office after receiving a letter notifying him that he had 30 days to find a new caretaker for the IW, his wife. The husband had been his wife's primary caretaker after she sustained a critical injury over 19 years ago and he was very concerned about bringing someone new into their home, especially during the pandemic. Ombuds staff investigated and learned that BWC recently reviewed the administrative rule regulating caretakers and realized there were some claims where an improper arrangement was in place due to a misunderstanding of the rule. BWC staff explained that they were working with the managed care organizations (MCOs) to identify these claims and develop transition plans for them. In discussing this situation with the IW's husband, he was so distraught that he expressed a willingness to divorce his wife so he could continue serving as her primary caregiver. Ultimately, BWC staff decided to wait to transition caretakers of IW's in this situation until concerns related to the pandemic were resolved.

It doesn't seem fair.

In May, a provider contacted the Ombuds Office and described that she is a nurse working at an office that provides epidural injections to workers' compensation patients. Currently, in order to receive BWC approved procedures, IW's are required to have COVID-19 testing that is not approved or paid for by BWC. The nurse worried that the cost was prohibitive to some IW's receiving needed treatment and wondered if BWC had considered covering the cost. Ombuds staff reached out to BWC staff with this concern. Ultimately, BWC issued a temporary policy change effective May 1, 2020, to cover one pre-surgical COVID-19 screening test for an in/outpatient procedure at an ambulatory surgical center. BWC determined that since COVID-19 could lead to complications for any of these procedures, it made sense to cover the cost of the COVID-19 test.

You have to do something!

An IW's attorney contacted the Ombuds Office in May because BWC issued an order terminating medication following a 30-day weaning period. The IW's attorney described a complicated convergence of issues for the IW including that he takes both pain and psychotropic medication, doesn't have private health insurance and that he cannot afford to pay for medication out of pocket. However, the primary concerning factor for the IW and his attorney is that due to pandemic protocols, the IC was not adjudicating issues related to medication. Ombuds staff reached out to the IC to discuss whether they would make an exception and set the appeal for hearing. Ombuds staff also reached out to BWC to explain the situation and ask BWC's policy related to a decision to terminate ongoing medications at a time when the IC is not adjudicating these issues. BWC staff looked at the situation and decided to modify the effective date of the medication block in order to allow the IW to first have a DHO hearing. BWC also decided to ask the MCOs to stop doing drug utilization reviews (DURs) until the IC begins hearing medication issues. On May 19, BWC communicated to MCO that they should immediately stop DURs until the IC resumes hearings for treatment issues. DURs resumed once the IC began adjudicating all issues again.

Please help us!

An IW's wife contacted us in January requesting that we help them through the process of requesting travel reimbursement for the IW to come from Florida to the Cleveland Clinic for a medical procedure because he is very unhappy with his medical provider in Florida. The provider has performed six procedures on the IW, and all have resulted in additional complications. The IW and his wife have worked with the MCO for a long time to find a new provider, but the IW needed a procedure performed immediately. IW was initially injured in 1982 and was found PTD in 1991. He has had over 40 surgeries over the past 30 years. Ombuds staff reviewed the claim and saw notes from the BWC CSS indicating that they recommended the IW file a motion to request travel authorization and approval to have the procedure performed at the Cleveland Clinic, but when the motion was received, BWC determined they were going to dismiss the motion because it did not contain a specific request. The CSS said that the IW filled out the motion by indicating "see attached" and that the attached document requested a reconsideration of travel denial. The BWC suggested that the IW instead file an *Injured Worker Statement for Reimbursement of Travel Expense* form (C60). For about two months BWC, the MCO, and the Ombuds Office had several conversations with each other and with the IW and his wife. The primary concern that the MCO and BWC had is that the IW would not be able to safely travel anywhere without risk of a new injury. The IW and his wife both acknowledged they shared that concern, but that the IW was having repeated urinary tract infections and complications related to those. Near the end of February, staff from BWC legal determined that the issue of travel should be referred to the IC for hearing. Unfortunately, the timing meant that when a hearing was finally scheduled, it was continued because of the pandemic. In April, Ombuds staff reached out again to the MCO to find out if they were still working to find the IW a provider because the possibility of travel to Cleveland Clinic was on hold indefinitely. The IW eventually had a hearing and DHO denied the request for travel reimbursement finding that the IW was approved for the treatment with a local provider. In the meantime, the MCO continues to look for a local provider for the IW.

Why did this happen?

An IW was referred to the Ombuds Office following a hearing that did not go forward because his claim was suspended. The IW explained that he asked the third-party administrator (TPA) to re-send corrected medical release forms because his date of birth was incorrect on the original forms. He also said he was confused because he filed an appeal to the suspension several months ago, but nothing ever happened with the appeal. Ombuds Office staff reached out to the TPA to re-send a corrected medical release form and reached out to the IC to inquire about the appeal. The TPA indicated that the IW's information contained on the medical release form came from BWC so Ombuds staff reached out to BWC staff to correct the IW's date of birth. Staff at the IC explained that despite the appeal language on the compliance letter, the IW's appeal would not be processed while it was suspended. Ombuds Office staff agreed with the IC that the issue was moot given the completion of the revised medical release but suggested that the appeal language may be confusing.

I am afraid.

In July, an IW contacted us because he was very uncomfortable going to an in-person appointment for an extent of disability IME. He said he was willing to participate in a virtual appointment but has underlying health conditions so was very uncomfortable risking exposure to COVID-19 by going to an in-person exam. Ombuds staff reached out to BWC staff who explained that the appointment had already been rescheduled based on early COVID-19 policies from BWC, that BWC is not considering telehealth for physical EOD exams, and that examining physicians are following all protocol set by the state and the CDC related to COVID-19.

I need a doctor!

An IW contacted the Ombuds Office because he wanted an update on the status of a request for a wheelchair replacement. This IW has been PTD for approximately 25 years and is paraplegic. He was frustrated about several issues when he called including feeling like there was a lack of communication about his wheelchair replacement and about billing issues. He was also confused about why he was required to be seen every six months in order to refill his supply of catheters, pads, and other medical supplies especially when it required the physician of record (POR) to complete a significant amount of paperwork. The IW lives outside of Ohio and has struggled to maintain a local POR who is willing to complete the paperwork for these appointments. Ombuds staff researched the claim and spoke with the BWC catastrophic (CAT) nurse who has been helping to manage the claim. The CAT nurse agreed to reach out to the MCO about the billing issues, but in the meantime, the IW learned that his current POR would not see him again until the billing issues were resolved. BWC staff reached out to the provider to work through the billing issues and eventually, the POR's office decided the paperwork was too much work, and they did not want to see the IW again. When the IW learned about the POR decision, he was very upset because he knew he needed supply refills and because he liked this POR. The Ombuds Office had several conversations with BWC staff and then reached out directly to the provider's office to ask if they would be willing to fill out paperwork for one last round of supplies before they stopped treating the IW. Ombuds staff helped the provider through the process of completing the paperwork and they were able to make sure the IW did not run out of needed supplies while the MCO continued to work through the billing issues and worked to find a new POR. Eventually, the MCO found a new POR for the IW.

What do we need to do?

A provider contacted us in May wanting to know the correct CPT code to use for video physical therapy because they submitted for several dates of service that were all denied. Ombuds staff reached out to BWC staff and learned that BWC rules did not allow for reimbursement of video physical therapy. BWC did make temporary policy changes that allow for some flexibility in care to bill for virtual check-in services and telephone services to check in with established patients for the following providers: physical therapists, occupational therapists, athletic trainers, and speech and language pathologists. The list of providers who can bill these codes already included: medical doctors, doctors of osteopathy, chiropractors, dentists, physicians assistants, nurse practitioners, clinical nurse specialists, podiatrists, clinical psychologists, and licensed social workers.

I don't understand.

An IW was referred to the Ombuds Office by a hearing officer after a hearing on allowance of the claim. The IW was upset because she did not feel like she was prepared for the hearing based on the information her self-insured (SI) employer told her. She also did not feel like she was given the opportunity to seek qualified medical care because her SI employer told her she had to see their provider. The IW believes that her duties in a pharmacy over the course of seven years caused her injury. She said that when she reported the incident, she was told where to go and who to see for treatment. She has only ever seen a nurse practitioner and has never had any diagnostic testing done. She was working light duty and doing physical therapy and improving but last week, her knee swelled and became painful again. She wanted help finding a medical provider near her home, information about how to file a SI complaint, and how to file an appeal if the IC does not allow her claim. Ombuds Office staff researched and followed up with the IW to provide her with a list of providers, an SI complaint form, and to let her know that the IC issued an order that denied the allowance of her claim. The IW asked some questions about how to file a claim and about how the appeal process would work. Ultimately, the IW filed an appeal, but later withdrew it and sought treatment under her private health insurance.

This is not worth it!

In May, we were contacted by a provider who owns a small (two provider) office with a large portion of their practice devoted to treating workers' compensation injuries. This provider was extremely frustrated because they continued to provide telemedicine treatment to IWs but, despite a policy alert telling them they would be reimbursed at a rate equivalent to face-to-face visits, they were actually reimbursed at around 70% of what they had previously been paid. Ombuds staff reached out to BWC staff who explained that the adjustment to reimbursement policy was an equivalent to "facility rate" which is not necessarily the same as an equivalent to what the provider had been receiving rate. BWC staff further explained that the facility rate is the rate that's used when the provider is not providing services from an office because they do not have the same overhead costs to provide the services.

2020 Statistical Information Summary

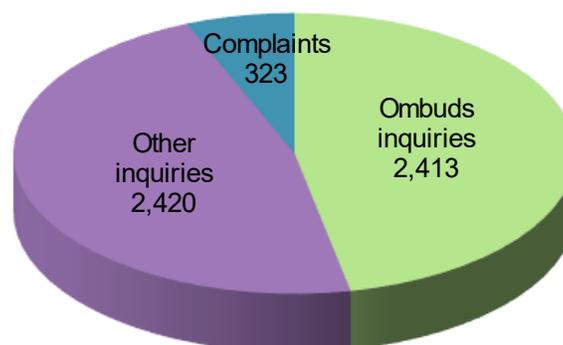
We processed 5,156 customer contacts in 2020. Our staff investigates and researches customer contacts to determine whether a case should be opened. The office classifies contacts as either a complaint (323), an Ombuds inquiry (2,413) or as an other inquiry (2,420). We classify a case as a complaint when a customer expresses dissatisfaction with the Ohio workers' compensation system. The most frequent complaints brought to our office for resolution include:

- BWC processing delays;
- Employer concerns related to their policy accounts receivable balance;
- Non-payment of treatment bills;
- Payment of indemnity benefits to injured workers.

In 2014, we began capturing information related to general inquiry contacts and added several new categories of issues to have a more complete picture of the type of issues that are presented. This additional information allows us to identify trends in order to make recommendations.

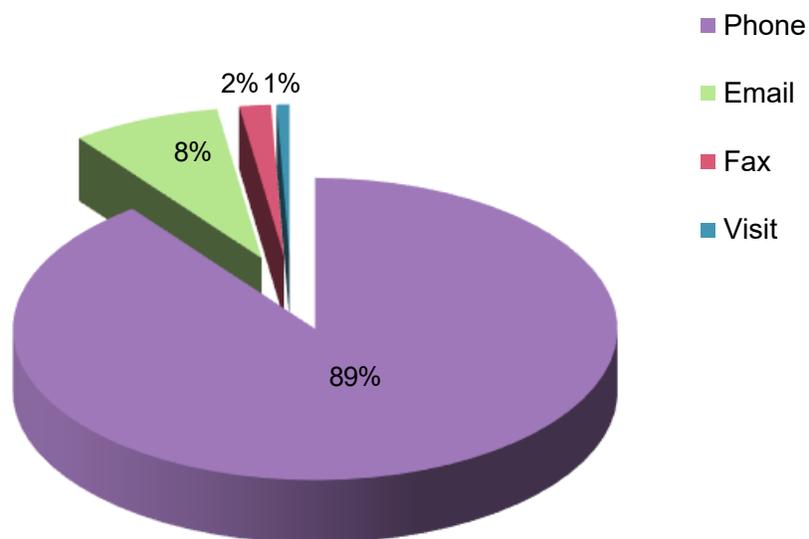
We deem a case to be an Ombuds inquiry when one of our staff directly provides the information requested by the customer and a complaint was not involved. The issues we receive the most inquiries about include employer policy coverage, accounts receivable balance and questions about canceling policy coverage. Additional frequent Ombuds inquiry issues include questions about the claim process and party rights, questions about forms required for various requests, questions about the IC hearing process, and questions about requirements for various types of compensation.

Finally, we receive a number of contacts that we do not open as Ombuds cases because the information requested is more properly obtained elsewhere. We determine quickly if another state agency can more appropriately assist a customer and we provide the proper contact information.



Method of Customer Contact

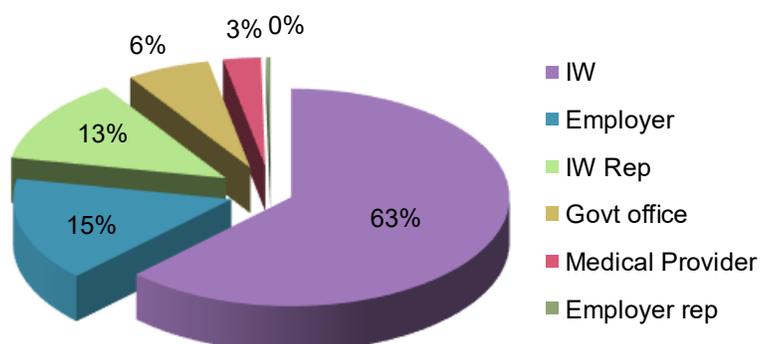
We processed 5,476 customer contacts during 2020, which we received by the methods below.



Contact Method	
Phone	4,623
Email	411
Fax	87
Visit	35
Total	5,156

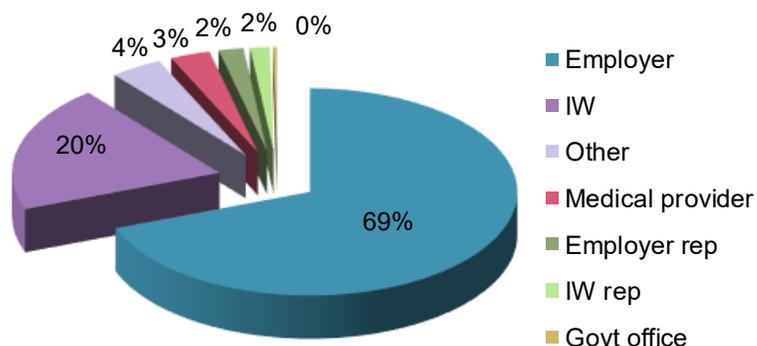
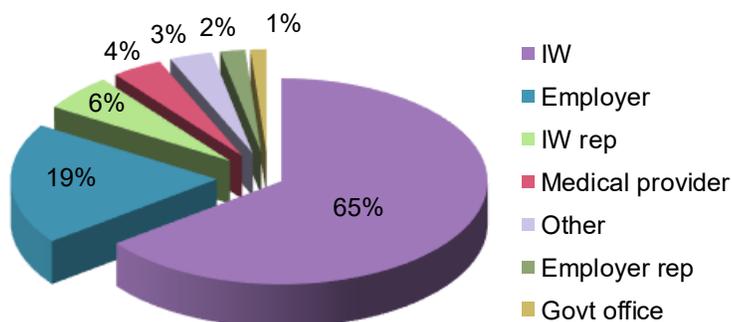
Cases by Customer Type

The charts below identify the customer type for each of the types of cases received: complaints, Ombuds inquiries and other inquiries.



Customer Type	Count
Injured worker	202
Employer	50
Injured worker representative	41
Government office	20
Medical provider	9
Employer representative	1
Total	323

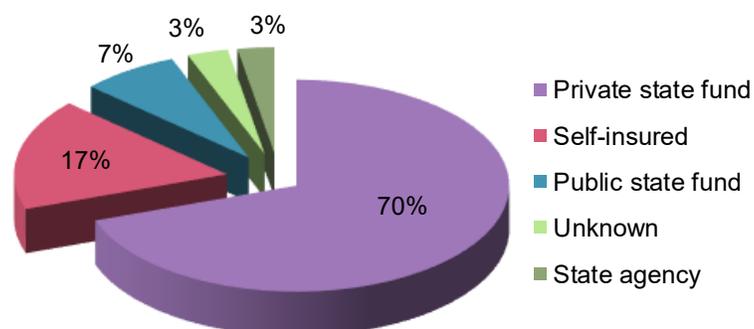
Customer Type	Count
Injured worker	1,562
Employer	459
Injured worker representative	138
Medical provider	96
Other	81
Employer representative	47
Government office	30
Total	2,413



Customer Type	Count
Employer	1,677
Injured worker	479
Other	98
Medical provider	75
Employer representative	47
Injured worker representative	37
Government office	7
Total	2,420

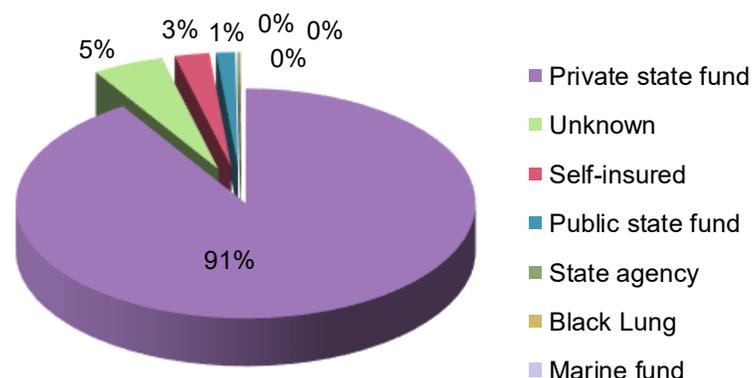
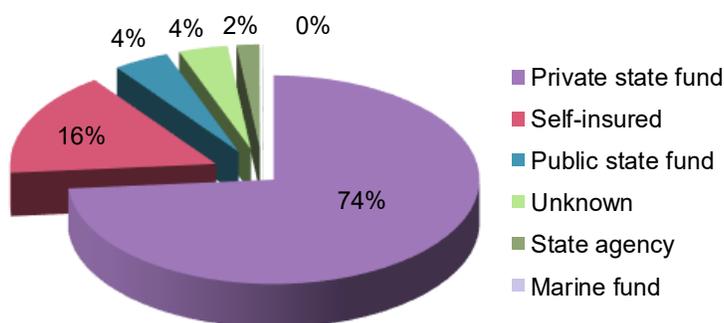
Cases by Type of Employer

The charts below identify the employer type for each of the types of cases received: complaints, Ombuds inquiries and other inquiries.



Employer Type	Count
Private state fund	225
Self-insured	55
Public state fund	24
Unknown	10
State agency	9
Total	323

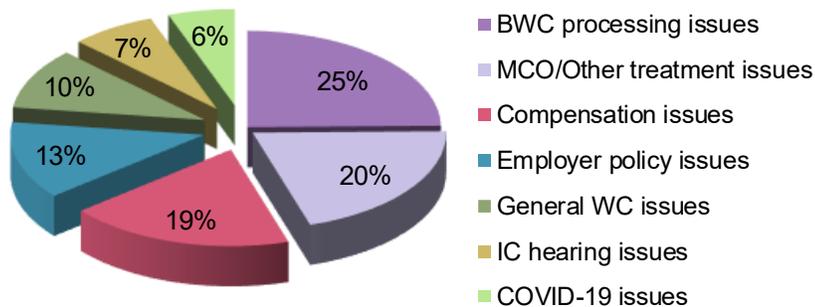
Employer Type	Count
Private state fund	1,777
Self-insured	393
Public state fund	106
Unknown	93
State agency	43
Marine fund	1
Total	2,413



Employer Type	Count
Private state fund	2,203
Unknown	121
Self-insured	59
Public state fund	32
State agency	3
Black Lung	1
Marine fund	1
Total	2,420

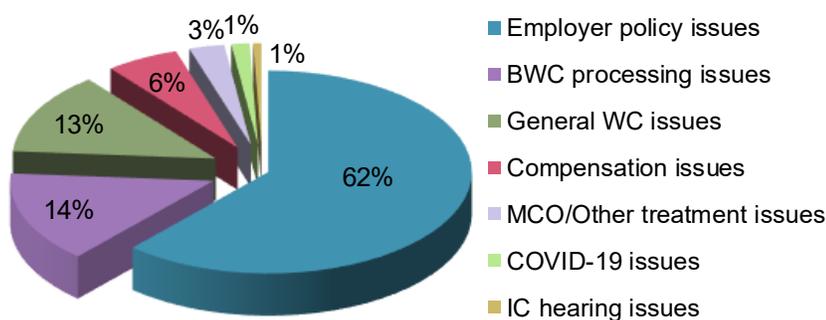
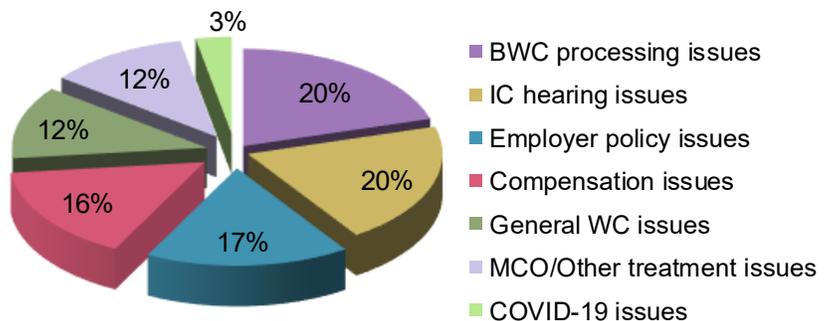
Cases by Issue Type

The charts below identify the issue type for each of the types of cases received: complaints, Ombuds inquiries and other inquiries.



Issue Type	Count
BWC processing issues	80
MCO/Other treatment issues	66
Compensation issues	61
Employer policy issues	42
General WC issues	33
IC hearing issues	23
COVID-19 issues	18
Total	323

Issue Type	Count
BWC processing issues	494
IC hearing issues	486
Employer policy issues	409
Compensation issues	379
General WC issues	291
MCO/Other treatment issues	282
COVID-19 issues	72
Total	2,413



Issue Type	Count
Employer policy issues	1,491
BWC processing issues	352
General WC issues	317
Compensation issues	141
MCO/Other treatment issues	68
COVID-19 issues	35
IC hearing issues	16
Total	2,420

Issue Report - Complaints

The codes below describe what issue our staff determined best described the complaint.

MCO & Other Treatment Issues	
Authorization of medical treatment	25
Bills non-payment	14
MCO staff	5
Self-insured medical bill	4
Medical provider	3
Prescription - general	3
Find physician	2
Reactivation	2
Prescription - prior authorization	2
MCO form	2
Vocational rehabilitation	2
Provider enrollment	1
ADR	1
Total	66

IC Hearing Issues	
Hearing process/Hearing letter	9
Hearing decision	6
Hearing officer	3
Hearing delay	3
IC exam	1
IC form	1
Total	23

BWC Processing Issues	
Claim process	22
Processing delay	22
CSS/MCS	12
BWC E account	12
Independent medical exam	8
BWC form	3
IC hearing referral	1
Total	80

General Workers' Compensation Issues	
Self-insured complaint	18
Attorney/Representative	4
Claim allowance	4
Fraud allegation	2
Additional allowance	1
Employer delay of claim	1
Labor issue	1
Statute of limitations	1
Fee dispute	1
Total	33

Issue Report - Complaints - continued

The codes below describe what issue our staff determined best described the complaint.

Compensation Issues	
Temporary total disability	32
Permanent total disability/DWRF	7
Wage loss	7
Banking issue	5
Lump sum settlement	3
Permanent partial disability	3
Travel reimbursement	2
AWW/FWW amount	1
Salary continuation	1
Total	61

COVID-19 Issues	
POR scheduling	5
Appeals	2
Claim process	2
Independent medical exam	2
MCO form	2
Hearing decision	1
Installment payment	1
MCO staff	1
Prescription - general	1
Temporary total disability	1
Total	18

Employer Policy Issues	
Cancel/Sold company	9
Rebate/Refund	7
Accounts receivable balance	5
Coverage	3
Employer invoice	3
Collections	3
Billion Back	3
Employer true up	2
Wrong policy number	2
Certificate	1
Policy combined/Transferred/Cancelled	1
Audit	1
MCO	1
Elective coverage	1
Total	42

Causation and Accountability Reports - Complaints

These charts denote in further detail what we found to be the problem after investigating the complaint and identifying the responsible entity. Comparison data from prior years is included.

Causation	2018	2019	2020
Unjustified complaint	221	209	170
CSS/MCS	120	48	27
Employer	44	24	26
Medical provider	20	18	17
MCO	13	17	13
Unresponsiveness CSS/MCS	4	2	13
Injured worker	12	8	9
Medical exam/Review required	8	4	9
IC	6	8	7
Needs forms or information	15	8	6
Attorney/Representative	10	10	5
Policy services	25	21	4
Billing issue	5	8	4
Claim status	0	2	4
Wanted claim expedited	0	2	4
Prescription issue	8	3	3
Appeal	0	1	1
Warrant returned or reissued	1	0	1
Website	2	1	0
Overpaid	0	1	0
Total	514	395	323

Accountability	2018	2019	2020
Injured worker	167	155	138
Employer - state fund	78	70	52
BWC	156	85	46
Medical provider	34	26	25
MCO	16	19	20
Attorney/Representative	32	27	16
Employer - Self-insured	19	11	14
IC	5	0	8
Pharmacy benefits manager	5	2	2
Financial institution	2	0	2
Total	514	395	323

Year-to-year comparison - Complaints

The tables below provide a comparison of complaint data for years 2018, 2019, and 2020.

Complaints by Customer Type	2018	2019	2020
Injured worker	262	220	202
Employer	88	72	50
Injured worker representative	125	62	41
Government office	3	8	20
Medical provider	23	14	9
Employer representative	11	16	1
Other	2	3	0
Total	514	395	323

Complaints by Employer Type	2018	2019	2020
Private state fund	382	277	225
Self-insured	78	70	55
Public state fund	35	30	24
Unknown	12	9	10
State agency	7	9	9
Total	514	395	323

Complaints by Issue Type	2018	2019	2020
BWC processing issues	205	127	80
MCO/Other treatment issues	91	80	66
Compensation issues	52	53	61
Employer policy issues	87	83	42
General WC issues	49	32	33
IC hearing issues	30	20	23
COVID-19 issues	NA	NA	18
Total	514	395	323

Issue Report - Ombuds Inquiries

Ombuds staff directly provides information to the customer and there was not a complaint.

Employer Policy Issues	
Coverage	70
Cancel/Sold company	67
Employer true up	62
Accounts receivable balance	44
Certificate	26
Change of address	20
Employer invoice	15
Rebate/Refund	12
Lien	11
Payment issue	11
Safety & Hygiene	11
Policy combined/Transferred/Cancelled	9
Employer program	8
Installment payment	6
Audit	5
Billion Back	5
Elective coverage	5
ESS/AE2	3
Manual code classification	3
MCO	3
Other state coverage	3
Rate	3
Collections	2
Estimated annual premium	2
Wrong policy number	2
Amended payroll	1
Total	409

Compensation Issues	
Temporary total disability	195
Permanent total disability/DWRF	44
Lump sum settlement	29
Permanent partial disability	25
Wage loss	24
Death benefits	16
Travel reimbursement	16
Banking issue	14
AWW/FWW amount	8
Lump sum advancement	6
Scheduled loss	2
Total	379

General Workers' Compensation Issues	
Claim allowance	89
Nonspecific	64
Additional allowance	27
Self-insured complaint	24
Attorney/Representative	21
Statute of limitations	18
Employer form	15
Medicare	14
Fraud allegation	9
Fee dispute	3
Light duty	3
Labor issue	2
Employer delay of claim	1
Interstate jurisdiction	1
Total	291

Issue Report - Ombuds Inquiries - continued

Ombuds staff directly provides information to the customer and there was not a complaint.

MCO & Other Treatment Issues	
Authorization of medical treatment	82
Bills non-payment	79
Medical provider	25
Find physician	21
Self-insured medical bill	18
MCO staff	13
Prescription - prior authorization	12
MCO form	11
Reactivation	6
Vocational rehabilitation	4
ADR	3
Provider policy and fee schedule	3
Prescription - opioids	2
Provider enrollment	2
Prescription - general	1
Total	282

BWC Processing Issues	
Claim process	194
BWC form	138
CSS/MCS	58
BWC E account	37
Processing delay	25
Independent medical exam	19
Website	18
Status of form/Application	5
Total	494

IC Hearing Issues	
Hearing process/Hearing letter	402
Hearing decision	62
IC form	12
Hearing delay	6
Hearing officer	4
Total	486

COVID-19 Issues	
General issue	21
Unemployment	12
Claim process	5
Safety & Hygiene	5
Hearing decision	4
IC hearing	4
Temporary total disability	4
Medical appointment	3
ESS/AE2	2
Independent medical exam	2
Additional allowance	1
Audit	1
CSS/MCS	1
Employer form	1
Installment payment	1
MCO form	1
Prescription - general	1
Permanent partial disability	1
Vocational rehabilitation	1
Wage loss	1
Total	72

Issue Report - Other Inquiries

Ombuds staff determines that the information being requested is more properly obtained elsewhere.

Employer Policy Issues	
Employer true up	436
Payment issue	218
Coverage	210
Certificate	138
Accounts receivable balance	132
Cancel/Sold company	68
Rebate/Refund	53
Change of address	36
Safety & Hygiene	33
Employer invoice	25
Manual code classification	23
Employer program	20
Lien	18
Collections	14
Policy combined/Transferred/Cancelled	12
Installment payment	11
Other state coverage	11
Rate	9
Billion Back	9
ESS/AE2	3
Elective coverage	3
Wrong policy number	3
MCO	2
Estimated annual premium	1
Audit	1
Prospective billing	1
Amended payroll	1
Total	1,491

IC Hearing Issues	
Hearing process/Hearing letter	7
IC form	6
Hearing decision	3
Total	16

Compensation Issues	
Banking issue	73
Temporary total disability	21
Permanent total disability/DWRF	16
Death benefits	14
Wage loss	6
Lump sum settlement	3
Travel reimbursement	3
Scheduled loss	2
AWW/FWW amount	1
Permanent partial disability	1
Lump sum advancement	1
Total	141

Issue Report - Other Inquiries - continued

Ombuds staff determines that the information being requested is more properly obtained elsewhere.

MCO & Other Treatment Issues	
Medical provider	13
Provider enrollment	10
Provider policy and fee schedule	8
Authorization of medical treatment	7
Prescription - prior authorization	6
Bills non-payment	6
Prescription - general	5
MCO form	5
Find physician	3
MCO staff	3
Vocational rehabilitation	1
Prescription - opioids	1
Total	68

General Workers' Compensation Issues	
Nonspecific	229
Employer form	25
Self-insured complaint	15
Fraud allegation	12
Claim allowance	12
Attorney/Representative	11
Medicare	7
Additional allowance	2
Light duty	1
Statute of limitations	1
Fee dispute	1
Labor issue	1
Total	317

BWC Processing Issues	
BWC E account	125
Claim process	105
BWC form	55
CSS/MCS	51
Website	12
Status of form/Application	3
Independent medical exam	1
Total	352

COVID-19 Issues	
Safety & Hygiene	14
General issue	13
Installment payment	2
Unemployment	2
FMLA	1
Hearing decision	1
Prescription - general	1
Temporary total disability	1
Total	35

2020 Administrative Update

Budget

Expenditures to operate the Ombuds Office in CY2020 totaled \$755,354. This total includes payroll costs for staff of \$732,137 and operating expenses of \$23,217. Total expenditures for CY2020 rose 4 percent as compared to CY2019. A spreadsheet providing budget details is on page 29 of this annual report.

Total payroll costs for 2020 vs. 2019 increased 4 percent. Payroll costs include employee salary and employer paid benefits, including health insurance and retirement. Additionally, this portion of the budget includes a mass allocation (cost divided between BWC departments) for William Green Building security guards (personal service). There is some fluctuation in the payroll cost over CY2019 based on the 26 pay period cycle resulting in two months with three pay periods, and individual employees' selections related to their benefits.

In CY2020, staff included the chief ombudsperson, two exempt employees (in Columbus) and five bargaining unit employees (four in Columbus and one in Cleveland). In CY2020, no overtime was paid.

Non-payroll operating costs for the Ombuds Office for 2020 were \$23,217. This total is a decrease of 5 percent from \$24,403 in 2019. The two largest operating expenses for us are utilities and building maintenance (these are mass allocations calculated based on the square footage of each department). Also included in this section of the budget, is the cost for office supplies, printing, telephone and travel.

Database

In December 2020 we concluded our twelfth full year of the ePowerCenter tracking software. Benefits of this industry standard software include:

- Improved tracking of individual complaints and inquiries;
- Improved consistency of information provided to Ombuds Office customers;
- Quicker recall history of prior discussions with customers;
- Quicker access to injured worker claims data;
- Quicker access to employer risk data;
- Improved report generating capabilities;
- Improved data trend analysis capabilities.

We began collecting data in January 2009, and this data continues to be useful in conducting year over year comparisons and identifying customer trends. In addition, several BWC divisions now use ePowerCenter. The ePowerCenter data on the Ombuds system remains 100 percent segregated from BWC data, and we continue to retain statutory independence and neutrality. This sharing of the same software allows for better data trend analysis of current and future problems.

In 2014, we began tracking general inquiry information in addition to complaint information we previously tracked. This additional data provides a more robust picture of the type and source of issues presented to us for resolution. Additionally, we continuously review database parameters to ensure we are capturing as much information as possible from each customer contact.

The advantage to making these changes is that we can get a much clearer and more detailed picture of the type of issues brought to us.

Promoting Ombuds Office services

In 2014, we resumed the practice of collecting information about how our customers learned of our office and/or the source of their referral. This information allows the office to conduct analysis to promote our services more effectively. Ensuring that potential customers and sources of referrals have an awareness of the office and the services provided continues to be a priority in 2019. I continue to accept speaking engagements to explain Ombuds Office services whenever they are offered.

Printed material

We produce and print our capabilities brochure in-house at minimal cost by BWC communications and DAS state printing. We mail this brochure upon request; distribute it at speaking engagements; and provide it to BWC, IC, employer and labor groups and other government entities for distribution to potential customers.

Promoting services to IC

We increased awareness of services to the IC in several ways including:

- Presenting an overview of the office and services provided to all IC hearing officers as part of their regional training;
- Meeting with IC support staff in IC offices statewide to discuss available services;
- Providing capabilities brochures to IC hearing officers and staff for distribution to employers, injured workers and their representatives;
- Maintaining placement of link to Ombuds Office information on the IC's website.

Promoting Services to BWC

We increased awareness of services to the BWC in several ways, including:

- Meeting with BWC customer service office managers and claims staff to discuss available Ombuds Office services;
- Meeting with BWC risk staff and employer services specialists to raise awareness of our services available to Ohio employers;
- Meeting with Division of Safety & Hygiene staff, both at headquarters in Pickerington, and in locations across Ohio, to increase awareness of our services available to Ohio employers;
- Meeting with BWC business consultants to increase their awareness of our services;
- Working with BWC's 1-800-OHIOBWC call center staff to increase awareness of our services and to increase appropriate referrals;
- Maintaining placement of link to Ombuds Office information on BWC's website;
- Working with BWC to determine placement of an option to reach the Ombuds Office on the 1-800-OHIOBWC phone line.

Promoting services to employers

We increased awareness of services to employers in several ways, including:

- Mailing letters to unrepresented employers prior to their first IC hearing;
- Distributing our capabilities brochure to business trade groups for distribution to their members;
- Providing information business trade groups can share on their websites;
- Speaking at special events and/or seminars with target audiences present;
- Providing information on our services to local and regional chambers of commerce and safety councils.

Promoting services to injured workers

We will increase awareness of services to injured workers in several ways, including:

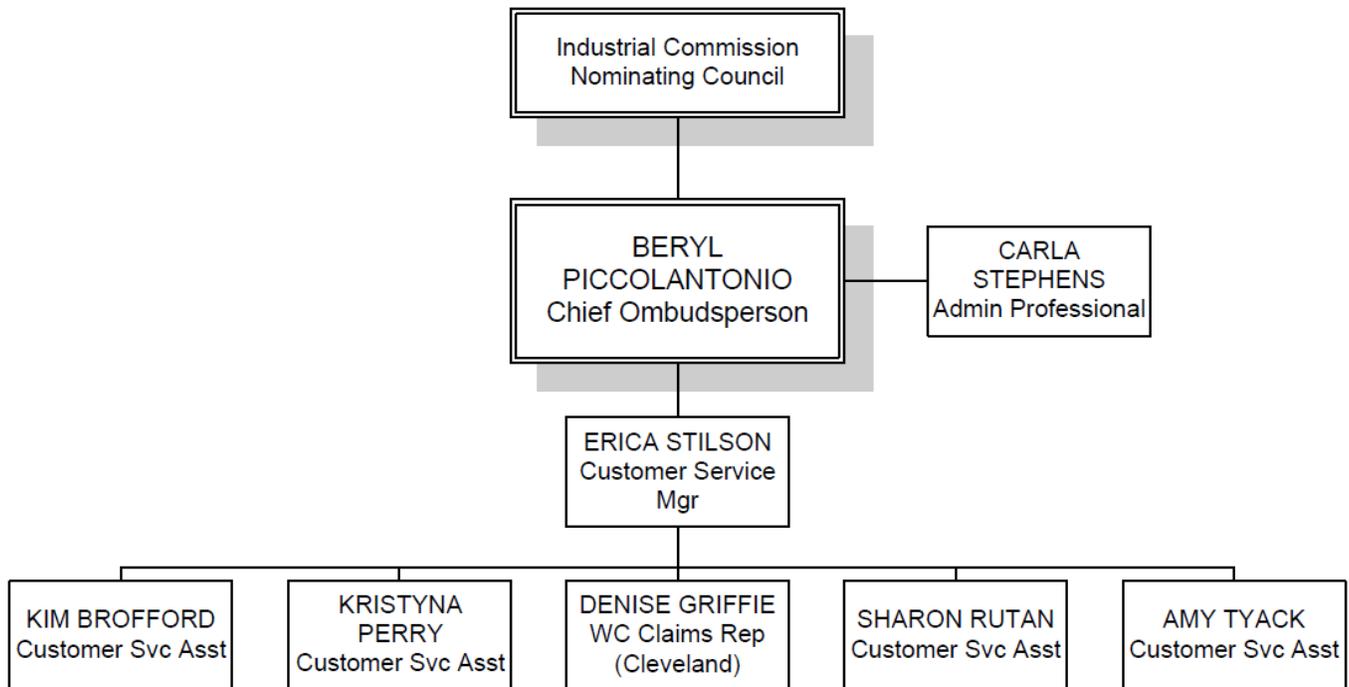
- Mailing letters to unrepresented injured workers prior to their first IC hearing;
- Distributing our capabilities brochure to local unions, across Ohio;
- Speaking at labor seminars, including AFL-CIO, UAW and Teamsters;
- Providing information local unions can share on their websites;
- Conducting meetings with local union stewards to increase their awareness of our services.

Promoting services to government officials

The Ombuds Office has increased awareness of services to other government agencies in several ways, including:

- Providing information about services available to members of the Ohio General Assembly and their staff to use as a resource when handling complaints and inquiries from constituents;
- Providing information on our services to call centers and action lines of local government entities, including Ohio cities, counties, and townships;
- Providing updated information about us to court personnel across Ohio.

Ombuds Office Table of Organization



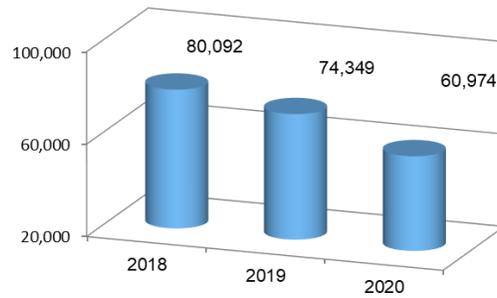
Ombuds Office Expenditure Report - Calendar Year 2020

OBJECT CLASS	JAN.	FEB.	MAR.	APR.	MAY	JUN.	JUL.	AUG.	SEP.	OCT.	NOV.	DEC.	TOTAL EXPENSES
10 Payroll	55,501	55,578	55,695	55,705	83,101	55,656	56,011	56,202	56,032	83,679	56,300	56,263	725,723
10 Overtime Paid	0	0	0	0	0	0	0	0	0	0	0	0	0
13 Personal Service	0	0	1,421	0	0	745	0	0	467	0	0	675	3,308
15 Other P.S.	150	0	0	0	435	1,740	435	0	0	0	0	345	3,106
Total 100	55,651	55,578	57,116	55,705	83,536	58,142	56,446	56,202	56,499	83,679	56,300	57,283	732,137
20 Edible Products	0	0	0	0	0	0	0	0	0	0	0	0	0
21 Supplies	89	26	0	32	0	0	0	0	0	0	0	0	147
211 INTRNL SUPPLIES	0	0	0	0	0	0	0	0	0	0	0	0	0
22 Vehicle Maintenance	0	0	0	0	0	0	0	0	0	0	0	0	0
221 INTRNL VEHICLE	0	0	0	0	0	0	0	0	0	0	0	0	0
23 Travel Fees	0	0	0	0	0	0	0	0	0	0	0	0	0
24 Communications	8	4	0	0	0	0	0	0	0	0	0	0	12
241 INTRNL COMM	335	465	431	340	314	146	237	454	461	382	0	701	4,265
24 IT Lic Commun	140	0	278	139	139	409	233	130	389	221	220	139	2,437
25 Fuel/Utilities	0	0	699	0	0	794	0	0	699	0	0	458	2,650
26 Maintenance	0	0	3,939	0	0	4,071	0	0	348	0	0	1,393	9,751
27 Rentals	0	0	0	0	0	0	0	0	0	0	0	0	0
27 ISTV/Goods & Svcs	391	0	1,299	103	440	0	196	0	0	0	581	947	3,956
28 Printing/Advertising	0	0	0	0	0	0	0	0	0	0	0	0	0
29 General/Other	0	0	0	0	0	0	0	0	0	0	0	0	0
Total 200	963	494	6,646	614	892	5,420	665	584	1,897	603	801	3,637	23,217
30 Food Equip	0	0	0	0	0	0	0	0	0	0	0	0	0
31 Office Equip	0	0	0	0	0	0	0	0	0	0	0	0	0
32 Motor Vehicles	0	0	0	0	0	0	0	0	0	0	0	0	0
34 Communications Equip	0	0	0	0	0	0	0	0	0	0	0	0	0
35 Medical/Lab Equip	0	0	0	0	0	0	0	0	0	0	0	0	0
36 Educational/Rec Equip	0	0	0	0	0	0	0	0	0	0	0	0	0
37 Data Processing Equip	0	0	0	0	0	0	0	0	0	0	0	0	0
371 INTRNL DP EQP	0	0	0	0	0	0	0	0	0	0	0	0	0
38 Copy/Print Equip	0	0	0	0	0	0	0	0	0	0	0	0	0
39 Other Equip	0	0	0	0	0	0	0	0	0	0	0	0	0
Total 300	0												
Grand Total	56,615	56,072	63,762	56,318	84,428	63,562	57,111	56,787	58,396	84,282	57,101	60,920	755,354

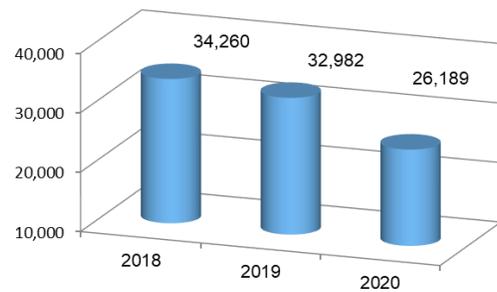
Source: Monthly reports from January through December 2020.
 Note: Mass Allocations included in March, June, September, and December.

Industrial Commission 2020 Year-End Statistics

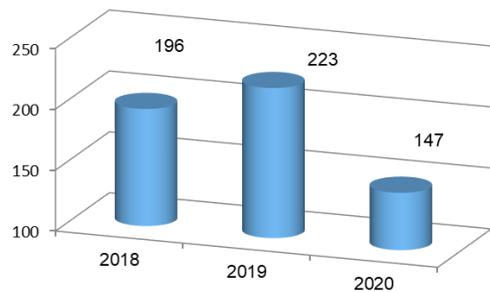
DHO level hearings



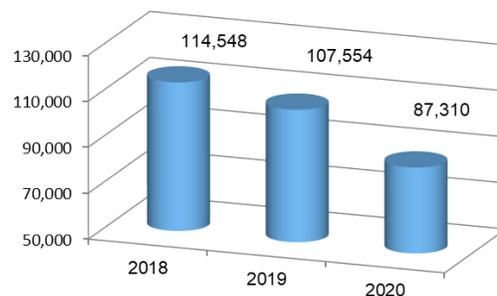
SHO level hearings



Commission level hearings



Total IC hearings



Source: IC Management Planning

Ohio Bureau of Workers' Compensation

2020 Year-End Statistics

	FY 2020	FY 2019	FY 2018
State Fund Claims Filed			
Lost Time	9,850	11,009	10,662
Medical Only	61,101	72,932	73,967
Occupational Disease	401	255	280
Death	167	168	227
Disallowed or Dismissed	<u>10,344</u>	<u>12,240</u>	<u>12,049</u>
Total	<u>81,863</u>	<u>96,604</u>	<u>97,185</u>
Net Allowed Injuries	71,519	84,364	85,136

NOTE: Every claim is evaluated at 60 days after filing for purposes of claim type, State Fund versus Self-Insured, combine status, and allowance status. Values exclude combined and Self-Insured claims.

Open Claims (Per statute)

Lost Time	192,664	207,594	223,318
Medical Only	<u>417,301</u>	<u>438,785</u>	<u>448,870</u>
Total	<u>609,965</u>	<u>646,379</u>	<u>672,188</u>

Benefits Paid

Medical Benefits Paid	\$ 430,417,629	\$ 490,034,666	\$ 526,379,567
Compensation Paid			
Wage Loss	\$ 6,481,308	\$ 6,753,726	\$ 7,525,535
Temporary Total	189,744,611	194,770,873	197,894,421
Temporary Partial	2,693	4,189	3,511
Permanent Partial	19,974,366	22,692,662	23,021,440
% Permanent Partial	52,068,618	57,590,270	57,430,490
Lump Sum Settlement	159,717,230	140,426,459	145,946,543
Lump Sum Advancement	17,990,947	16,648,612	17,456,267
Permanent Total & DWRF	367,284,999	369,525,968	376,041,549
Death	79,249,198	80,666,730	81,210,663
Rehabilitation	23,536,162	24,544,006	26,417,263
Other	<u>3,616,901</u>	<u>3,111,525</u>	<u>4,054,993</u>
Total Compensation Paid	\$ 919,667,034	\$ 916,735,020	\$ 937,002,675
Total Benefits Paid	<u>\$ 1,350,084,663</u>	<u>\$ 1,406,769,686</u>	<u>\$ 1,463,382,242</u>
MCO Fees Paid	\$ 168,764,352	\$ 170,882,589	\$ 170,755,316

NOTE: Due to improvements in BWC data capture and reporting systems, prior year data may not agree with amounts previously reported.

Source: BWC Fiscal Year 2020 Annual Report

2020 Year-End statistics

	FY 2020	FY 2019	FY 2018
Fraud Statistics			
Fraud Dollars Identified	\$ 77,754,230	\$ 65,144,322	\$ 60,098,139
\$\$\$ Saved to \$\$\$ Spent Ratio	5.79 to 1	4.93to 1	4.81 to 1
Prosecution Referrals	150	189	166
Active Employers By Type			
Private	245,040	244,247	236,591
Public (Local)	3,802	3,796	3,784
Public (State)	114	115	115
Self-Insured	1,139	1,160	1,173
Black Lung	26	26	28
Marine Fund	129	128	121
Total	<u>250,250</u>	<u>249,472</u>	<u>241,812</u>
Starting in FY 2019, policies that lapsed within the fiscal year are treated as active.			
BWC personnel	1753	1774	1760
IC personnel	320	342	345

Industrial Commission Nominating Council

Current as of December 2020

Employer Representatives

Eric Burkland

Ohio Manufacturers Association

Kevin Shimp

Ohio Chamber of Commerce

Roger Geiger

National Federation of
Independent Business / Ohio

Gordon M. Gough**

Ohio Council of Retail Merchants

Debbie Lantman

Ohio Self-Insurers Association

Public Members

Daniel Massey

Robert Schmitz

Labor Representatives

Tim Burga*

Ohio AFL-CIO

Frank Gallucci

Plevin & Gallucci

John Lyall

AFSCME Ohio Council 8

David Prentice

United Steelworkers

Ohio Association of Justice Representative

Philip Fulton***

* Chairperson

** Vice Chairperson

*** Secretary