



Workers' Compensation Self-Insurance Program Frequently Asked Questions

FACULTY, STAFF AND WORKING STUDENTS

1. What does it mean for Ohio State to be self-insured for workers' compensation?

The privilege to self-insure provides Ohio State with the ability to provide greater oversight of the workers' compensation claims processes; whereas, prior to this privilege, the Ohio Bureau of Workers' Compensation (BWC) provided direct oversight of all claim decisions and Temporary Total Disability and other related indemnity payments.

2. Do I still have to complete an [Employee Accident Report Form](#) when I've experienced an accident, injury or illness on the job?

Yes, all accidents, injuries or illnesses that arise from or are a result of the course of the employee's employment, MUST have an Employee Accident Report Form completed by the employee within 24 hours of the said, accident, injury or illness. Refer to O.R.C. 4123.01(C) (1) or page 6 of [SI Claim Procedure Guide](#) where "injury" is defined, which also includes what "injury" does not constitute an approved BWC claim.

3. Will the Ohio BWC continue to make the decision regarding my workers' compensation claim and allowance(s)?

No, Ohio State will be fully responsible for making a claim determination, within 30 days from the filing of a claim, based on the facts of the claim, including supporting medical evidence. Ohio State's Third-Party Administrator, CareWorks Consultants Inc. (CCI) will submit a letter informing you of Ohio State's decision.

4. What is a "Medical Only" claim?

An injury or illness resulting in seven (7) or fewer calendar days of missed work is defined as a Medical Only claim. For self-insured employers, these claims do not need a BWC claim number, unless Ohio State contests your claim.

5. What is a "Lost Time" claim?

An injury or illness resulting in eight (8) or more calendar days of missed work is defined as a Lost Time claim. Lost Time claims must be filed with the Ohio Bureau of Workers' Compensation (BWC) and assigned a BWC claim number. You will be required to complete a First Report of Injury ([FROI Form](#)) and submit by mail to: CareWorks Consultants, Inc., P.O. Box 8101, Dublin, Ohio 43016 or via fax to: (614) 495-5161.

6. Will I be protected under Family and Medical Leave (FML) if I miss time away from work due to my injury or illness?

Yes, as long as you meet the eligibility criteria for FML, your time away from work will run concurrently with your workers' compensation claim.

7. Who do I contact to file a FML claim?

Please contact your designation OHR Leave Administrator with Integrated Absence Management and Vocational Services at (614) 292-3439 option 3 or your Senior Human Resource/Human Resource Professional immediately, who will determine your eligibility and provide you within five business days with a [Notice of Eligibility and Rights and Responsibility Form](#).

8. If I have a Lost Time Claim, who pays for my salary when I am unable to work?

With an approved claim, CCI will issue all compensation payments including Temporary Total Disability (TTD) benefits to you on the behalf of The Ohio State University. You must provide documentation through a [C-84 Form](#) signed by your treating physician before benefits will be initiated.



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9. How long should I expect to wait to receive TTD?

With an approved claim TTD begins on the eighth (8th) calendar day following the injury or illness. However, if you are off work for fourteen (14) consecutive days, Ohio State will pay you for the first seven (7) days of missed work. If Ohio State determines that payments are directly related to the allowed conditions in your claim, we/CCI will issue compensation on a bi-weekly basis within 21 days upon receipt of supporting medical documentation and an approved claim determination. Once you return to work or have reached Maximum Medical Improvement (MMI), TTD payments will cease.

10. Who do I contact when I have a question about my claim or my compensation payments?

You may contact the Office of Human Resources, Integrated Absence Management and Vocational Services at (614) 292-3439 or 1-800-678-6413 – or Ohio State's Third-Party Administrator, CareWorks Consultants, Inc., (CCI) at 1-888-347-3815 for questions concerning physician visits, change of physician or medical treatment requests.

11. What happens if my claim is denied?

If Ohio State denies your workers' compensation claim, your claim will be filed by CCI with Ohio Bureau of Workers' Compensation. You will be notified of the denial. The claim will then be referred to the Industrial Commission (I.C.) of Ohio for a hearing.

12. Who is the I.C.?

The I.C. is independent from BWC where a hearing officer will hear all disputed issues arising from your claim. A hearing is typically scheduled within 45 days from the date of referral or appeal to the I.C.

13. What happens when I need to have a prescription filled for my injury or illness?

If you received initial treatment from the University's preferred medical provider, you will receive an injury packet at the time of service, or from your department human resource professional or by contacting Integrated Absence Management and Vocational Services at (614) 292-3439 or 1-800-678-6413. The injury packet will contain a "First Prescription Fill" card. This card will allow you to have a 7-10 day supply of your prescription filled at a local network retail pharmacy, at no out-of-pocket costs to you. Prescriptions will be filled, even if Ohio State has not yet certified your claim. If your claim is denied, you will not be responsible for that initial fill.

14. Who pays for my medical bills?

Ohio State will pay for health-care services directly related to your workplace injury or illness through our contracted arrangement with CCI. Below further illustrates the bill payment guidelines for a self-insured employer:

- Prior authorization is usually required for medical services, such as hospital stays, consultations, surgery and physical therapy, except for emergency situations.
- The provider or you must submit all medical bills within two years of the date of service to be considered for payment.
- Ohio State must pay medical bills within 30 days of receipt, unless additional information is needed or the bill is being denied.
- If Ohio State denies a medical bill, you may file a [C-86 Form](#) to request a hearing before the I.C.
- If the health-care provider treats you for a condition not recognized in your claim, neither BWC nor Ohio State is responsible for payment. If you believe the condition is related to your claim, you may file a request with Ohio State to have to condition recognized. If Ohio State denies the request, you will need to submit the [C-86 Form](#) to the I.C. Attach copies of Ohio State's decision.



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15. What should I do if medical bills are sent to me?

If you receive bills from your physician or the hospital, please send them to: CareWorks Consultants, Inc., P.O. Box 8101, Dublin, Ohio 43016.

16. Is Vocational Rehabilitation an option that will be available to me?

Yes, if you are interested in vocational rehabilitation services, please contact the Office of Human Resources, Integrated Absence Management and Vocational Services. Our office has a team of professional licensed vocational rehabilitation counselors that can provide services to you, such as Job Development/Seeking Skills training, Job Placement, Resume Writing, On-site physical therapy, Functional Capacity Examinations, Transitional Work, and Remain at Work services.

17. What if I have a complaint about my claim or the self-insured process - who do I contact?

Integrated Absence Management and Vocational Services is available to answer any questions or address complaints. However, if your complaint is directly with Ohio State, you may also contact the BWC's self-insured department who can process complaints filed against Ohio State. To file a complaint against your self-insured employer, Ohio State, submit a [Filing of Allegation Against a Self-Insured Employer \(SI-28\)](#) using the [self-insured complaint process](#).

DEPARTMENT SUPERVISOR/MANAGER

18. When my employee is injured on the job, what are my responsibilities?

As you do today, you are to ensure that your employee(s) complete the OSU [Employee Accident Report Form](#) within 24 hours of the accident, injury or illness. You must complete the Supervisor Accident Analysis Report, sign this form, and ensure that it is filed immediately with the Office of Human Resources, Integrated Absence Management and Vocational Services.

19. When my employee needs medical treatment, where do we instruct them to go to seek appropriate treatment?

To determine whether your employee should seek medical treatment and where to go, you may also instruct them to call the 24/7 Nurseline anytime at 800-678-6269. However, we encourage all supervisors and managers to instruct employees to first seek treatment at:

Ohio State's University Health Services
McC Campbell Hall, 2nd floor, 1581 Dodd Drive
(614)293-8146
Hours: M-F, 7:30 a.m. – 4:00 p.m.;

or

University Health Services
OSU Occupational Medicine – CarePoint East
543 Taylor Ave., 2nd floor
(614) 688-6492
Hours: M-F, 7:30 a.m. – 4:00 p.m. (walk-ins welcome)



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After normal business hours or on weekends, for non-emergencies, instruct your employee to seek treatment at:

After Hours Care, Martha Morehouse Medical Plaza
2nd floor, Suite 2400, Pavilion, 2050 Kenny Rd
(614)685-3357
Hours: M-F, 4:00 p.m. – 9:30 p.m., SAT-SUN, 10:00 a.m. – 5:30 p.m.

If emergent, please instruct employees to seek treatment at Ohio State's Wexner Medical Center Emergency Department or University Hospital East Emergency Department. (Medical Center employees should report to University Health Services the following day).

Regional campus employees should seek treatment at the designated local health care provider.

20. Will my employee(s) be able to continue to participate in the University's Transitional Work Program?

Yes. This practice will not change as a result of Ohio State's new funding model. Eligible employees will not see a change in the [Transitional Work Policy](#) or Integrated Absence Management and Vocational Services' organizational practices as it relates to return to work, remain at work, job search assistance, on-site therapy services, Family and Medical Leave administration and ADA accommodations.

21. Will sick time used by my employee(s) still be an off-set to TTD or any additional work-related payments?

Yes, any sick time used or paid during the period in which TTD is paid will be off-set. In this case, the employee is required to reimburse the university for any TTD paid during the period in which sick time was paid. It is critical that open lines of communication continue between Integrated Absence Management and Vocational Services, and you and your SHRP/HRP to ensure that overpayments do not occur. Additionally, some employees may be eligible for working or non-working wage loss; whereas, supplemental payments occur when employees are not able to return to their regularly performed jobs or perform the essential functions of their job(s) on a full-time basis. This generally occurs when the employee is working reduced hours or off work working with the Integrated Absence Management and Vocational Services' job developer or disability program managers to assist them in finding gainful employment aligned with permanent restrictions. Again, any supplemental sick time paid during these payments will be off-set.

PROVIDERS

22. Where do I submit FROIs, C-84s, C9s and any related treatment plans/progress for my patients?

You are instructed to submit all forms and medical documents related to the injury to CareWorks Consultants Inc., P.O. Box 8101, Dublin, Ohio 43016 or fax (614) 495-5161.



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23. Who do I call if I have questions regarding family medical leave, return to work, transitional work, remain at work, job development, vocational rehabilitation and/or physical therapy services?

Contact [Integrated Absence Management and Vocational Services](#) in the Office of Human Resources at Ohio State at 1-800-678-6413 or (614) 292-3439 for answers related to any of these services.

24. What is the timeframe for approval of a new claim?

Self-insured employers have up to 30 days from the date of First Report of Injury (FROI) receipt to approve, deny or take other action on the claim request.

25. What is the timeframe for approval of C-9 requests for treatment?

Self-insured employers have 10 days from the receipt of the C-9 request to approve, deny or take other action on the C-9. (If the 10th day falls on a state holiday, the response is due the next business day).

26. If the C-9 is denied, what are the next steps?

If the request has been denied, the self-insured employer must document the reason for denial, and notify the provider, the injured worker and their authorized representative the decision. The injured worker has a right to file a C-86 Motion with the IC to resolve the disputed matter.

27. How are requests for additional allowances submitted?

A request for additional allowance must be supported by medical evidence and requested in writing. The self-insured employer can accept the additional condition or deny the condition. The self-insured employer will notify the injured worker in writing if the condition is not supported. The injured worker has the right to file a C-86 motion with the Industrial Commission if the employer does not agree with the additional condition.

28. Who can the provider's office contact regarding pharmacy issues such as medication authorization?

You may contact CareWorks Consultants Inc. at 1-888-647-3815 for pharmacy related issues.

29. Are there changes to reimbursement with a self-insured employer?

Reimbursement rates for providers are set by the Bureau of Worker's Compensation. There are no differences between provider reimbursements for patients covered by state fund and self-insured policies.

30. What unique services are available through Ohio State University for injured workers?

There are a number of unique services available to help injured workers and providers. Each injured worker has a case manager who is available to coordinate return to work and provide one-on-one consultations to evaluate alternative work arrangements to allow an employee to remain productive at work. The Integrated Absence Management and Vocational Services team can assist injured workers with applying for other benefits such as Family and Medical Leave, Short or Long-Term Disability and disability benefits through Ohio Public Employees Retirement system. Support of the employee's transition to full duty can be provided by a licensed physical therapist that can provide services including: onsite therapy, job analysis, ergonomic assessments and functional capacity exams. There are vocational rehabilitation counselors available within Integrated Absence Management and Vocational Services who can provide assistance with vocational rehabilitation as well as a job developer who can assist with job search skills including resume preparation and interview skills.



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31. Where Can I Obtain Additional Information?

Your questions can be answered by:

- Visiting hr.osu.edu
- Contacting the Office of Human Resources Customer Service Center, hr@osu.edu, (614) 292-1050, 1-800-678-6010, Fax: (614) 292-6235