

Rule Summary and Fiscal Analysis (Part A)**Bureau of Workers' Compensation**

Agency Name

Division

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4123-3-36

Rule Number

AMENDMENT

TYPE of rule filing

Rule Title/Tag Line

Immediate allowance and payment of medical bills in claims.**RULE SUMMARY**

1. Is the rule being filed for five year review (FYR)? **No**
2. Are you proposing this rule as a result of recent legislation? **No**
3. Statute prescribing the procedure in accordance with the agency is required to adopt the rule: **119.03**
4. Statute(s) authorizing agency to adopt the rule: **4121.12 , 4121.121 , 4121.30 , 4121.31 , 4123.05**
5. Statute(s) the rule, as filed, amplifies or implements: **4121.12 , 4121.121 , 4123.511**
6. State the reason(s) for proposing (i.e., why are you filing,) this rule:

As part of the Bureau's upcoming implementation of the International Classification of Diseases, tenth revision (ICD-10) code set effective October 1, 2015, the Bureau is proposing to rescind the current appendix to the Fast Response rule and replace it with an appendix identifying the eligible Fast Response conditions by their corresponding ICD-10 codes. BWC is not proposing any changes to the body of rule itself.

7. If the rule is an AMENDMENT, then summarize the changes and the content of the proposed rule; If the rule type is RESCISSION, NEW or NO CHANGE, then summarize the content of the rule:

As stated above, the Bureau is not proposing to make any changes to the body of rule 4123-3-36 of the Administrative Code, Immediate Allowance and Payment of Medical Bills in Claims. However, the Bureau is proposing to rescind the current Appendix A to the rule, which contains the ICD-9 codes and descriptions for the eligible Fast Response conditions identified by the Bureau, and replace it with a new Appendix A containing the corresponding ICD-10 codes and descriptions for those conditions.

Due to ICD-10's increased capacity to capture additional detail and complexity regarding medical conditions, the replacement Appendix A contains 201 ICD-10 codes, as opposed to the 49 ICD-9 codes in the current Appendix A identifying the same conditions.

8. If the rule incorporates a text or other material by reference and the agency claims the incorporation by reference is exempt from compliance with sections 121.71 to 121.74 of the Revised Code because the text or other material is **generally available** to persons who reasonably can be expected to be affected by the rule, provide an explanation of how the text or other material is generally available to those persons:

This response left blank because filer specified online that the rule does not incorporate a text or other material by reference.

9. If the rule incorporates a text or other material by reference, and it was **infeasible** for the agency to file the text or other material electronically, provide an explanation of why filing the text or other material electronically was infeasible:

This response left blank because filer specified online that the rule does not incorporate a text or other material by reference.

10. If the rule is being **rescinded** and incorporates a text or other material by reference, and it was **infeasible** for the agency to file the text or other material, provide an explanation of why filing the text or other material was infeasible:

Not Applicable.

11. If **revising** or **refiling** this rule, identify changes made from the previously

filed version of this rule; if none, please state so. If applicable, indicate each specific paragraph of the rule that has been modified:

This rule is being revise filed to correct the public hearing date scheduled for August 21, 2015 instead of August 14, 2015.

12. Five Year Review (FYR) Date: **4/1/2019**

(If the rule is not exempt and you answered NO to question No. 1, provide the scheduled review date. If you answered YES to No. 1, the review date for this rule is the filing date.)

NOTE: If the rule is not exempt at the time of final filing, two dates are required: the current review date plus a date not to exceed 5 years from the effective date for Amended rules or a date not to exceed 5 years from the review date for No Change rules.

FISCAL ANALYSIS

13. Estimate the total amount by which *this proposed rule* would **increase / decrease** either **revenues / expenditures** for the agency during the current biennium (in dollars): Explain the net impact of the proposed changes to the budget of your agency/department.

This will have no impact on revenues or expenditures.

0.00

n/a

14. Identify the appropriation (by line item etc.) that authorizes each expenditure necessitated by the proposed rule:

n/a

15. Provide a summary of the estimated cost of compliance with the rule to all directly affected persons. When appropriate, please include the source for your information/estimated costs, e.g. industry, CFR, internal/agency:

Directly affected persons are medical providers submitting supporting diagnosis (ICD) data to support the allowance and processing of injured workers claims. We assert that the impact will be negligible for the medical provider community on the whole. The transition to begin using ICD-10 codes is an action that the entire medical community as a whole is undergoing; and is not a separate and distinct requirement of the Bureau. The Bureau's action to adopt ICD-10 codes is not

required and is being done to avoid the potential negative impact of the Agency's staying with the current ICD-9 codes. Thus, medical providers should in general be well position to comply with the recommended changes to the appendix of the rule.

16. Does this rule have a fiscal effect on school districts, counties, townships, or municipal corporations? **No**

17. Does this rule deal with environmental protection or contain a component dealing with environmental protection as defined in R. C. 121.39? **No**

S.B. 2 (129th General Assembly) Questions

18. Has this rule been filed with the Common Sense Initiative Office pursuant to R.C. 121.82? **Yes**

19. Specific to this rule, answer the following:

A.) Does this rule require a license, permit, or any other prior authorization to engage in or operate a line of business? **No**

B.) Does this rule impose a criminal penalty, a civil penalty, or another sanction, or create a cause of action, for failure to comply with its terms? **No**

C.) Does this rule require specific expenditures or the report of information as a condition of compliance? **Yes**

The purpose of Fast Response is to immediately allow and begin payment for medical treatment in claims involving these specified conditions. If an employer contests the allowance of a claim involving any medical condition identified in the Fast Response program and the claim is ultimately disallowed, payment for the medical condition is charged to and paid from the surplus fund.