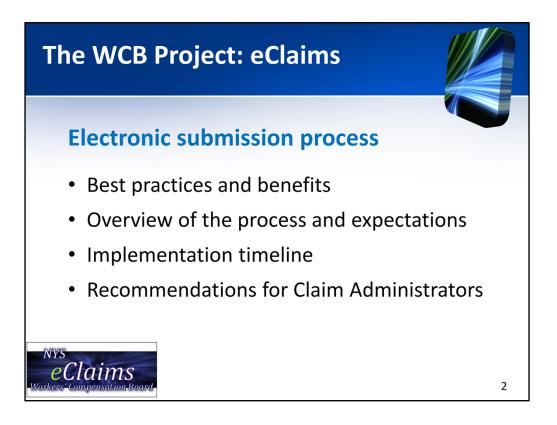


New York State eClaims Electronic Claims Filing Process

Welcome to an overview of the New York State Workers' Compensation Board's eClaims project. eClaims is designed to implement an electronic claim reporting standard for reports of injury filings. The intended audience for this presentation is claim administrators which includes insurance carriers, self-insured employers, group self-insurers, and third party administrators.

eClaims is the result of extensive research to determine cost effective methods of transmitting data. It is part of the Workers' Compensation Board's efforts to provide quality service to injured workers and their employers.



The WCB Project: eClaims Electronic submission process

The goal of the eClaims project is to replace the current paper-based claim administrator reporting with an electronic submission process. This will result in timely, accurate and credible reporting.

In this presentation we will describe the eClaims project, including the background, an overview of changes, a timeline for implementation, and recommendations for claim administrators to get started in meeting the new mandate.

We recognize that eClaims will bring significant change to the claim administrator community, so there will be additional programs throughout this project to inform and assist in the transition.

Please note, this project will not change our current medical reporting requirements.



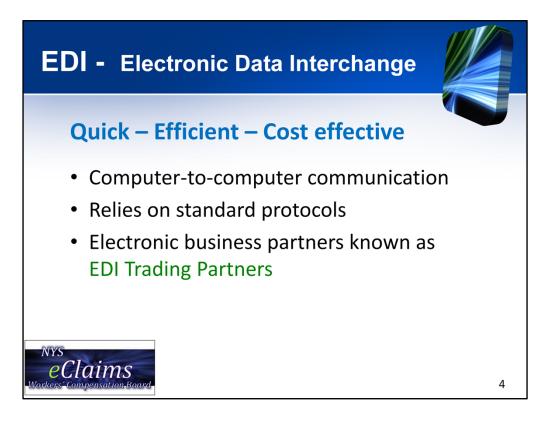
Best Practices

In developing the eClaims business case and project plan, the Workers' Compensation Board researched how other states receive claims information and the best practices for implementation.

We learned that the electronic filing of claims information by claim administrators is very efficient and effective and reduces costs for all stakeholders.

Another best practice was the use of a proven national standard.

We also heard that successful implementations depend on a 12 month lead time between the announcement and implementation, plus a robust communication and training plan.



EDI – Electronic Data Interchange

The standard we are adopting uses Electronic Data Interchange, commonly known as EDI. This is computer-to-computer communication so that data can be passed quickly, efficiently, and cost-effectively.

To achieve this communication, the computer systems involved must "speak" the same standard language or protocols.

In the EDI environment, the parties contract with one another as electronic business partners through a trading partner agreement. The agreement defines the participant roles, communication, and security requirements to exchange information electronically.



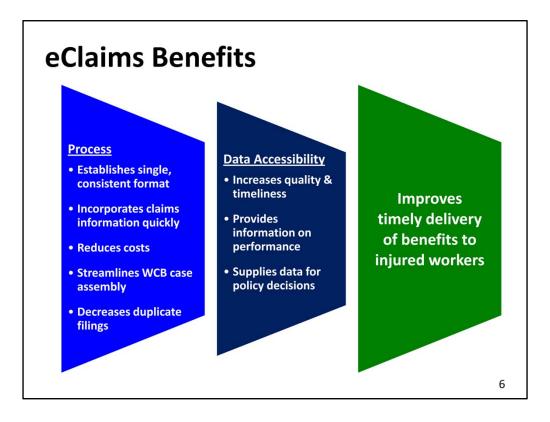
IAIABC: a proven standard

After deciding that electronic claims filing was the best avenue to pursue, the next step was to review existing methods. The most widely used process is from the International Association of Industrial Accident Boards and Commissions, known as IAIABC or IA for short. The Internet address is www.iaiabc.org

The IA is a non-profit trade association of government agencies in the US, Canada and other territories that administer and regulate their jurisdictions' workers' compensation acts. Various private organizations involved in the delivery of workers' compensation coverage and benefits also participate. The organization, which was established in 1914, develops standards for workers' compensation processes through consensus based committee work comprised largely of state jurisdictions.

In the early 1990s, the IA began to develop the standards for the insurance community to electronically report workers' compensation information to jurisdictions. Currently IA's Electronic Data Interchange standard is used by more than 30 states to file first and subsequent reports of injury information. This single standard makes it easier for claim administrators licensed in multiple jurisdictions to file claims in those jurisdictions.

The Workers' Compensation Board is a member of IA and actively participates in its committees. New York's experience in applying the IA standards has been positive. The Workers' Compensation Board currently utilizes the IA Proof of Coverage standard, known as P.O.C. or "POC" with excellent results.



eClaims Benefits

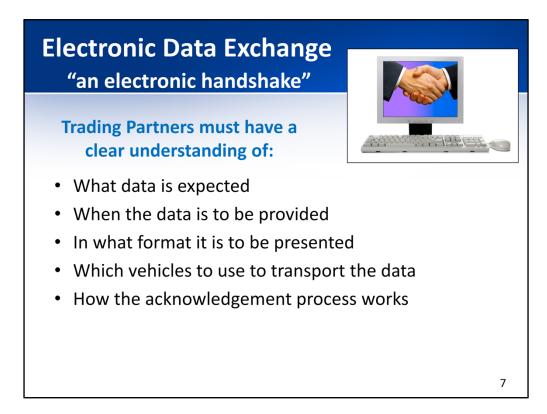
By adopting a standardized electronic claims filing process, we expect significant improvements for all stakeholders.

Process improvements include a single, consistent format for data submission which will enable an automated communication between trading partners. Senders will know if a filing has been accepted or needs correction. Claims information will be quickly incorporated into the Workers' Compensation Board case folder, generally within 24 hours.

This process will cut costs for both the Workers' Compensation Board and claim administrators. We recognize that you must pay to handle, complete, maintain copies or records of, and ship paper forms. The new practice will streamline the Workers' Compensation Board's case assembly procedures and decrease duplicate filings.

By increasing the amount and quality of the data that comes with electronic filing, you will have accurate information about your performance. Better data means that any analysis the Board undertakes will provide more meaningful results and ultimately better policy decisions.

These components work together to improve timely delivery of benefits to injured workers.



Electronic Data Exchange "an electronic handshake"

For this electronic data exchange to be successful, trading partners must have a clear understanding of how that will be accomplished.

This understanding includes:

- · what data is expected from trading partners,
- when this data is to be provided,
- in what format it is to be presented,
- · through what vehicles it can be transported, and
- · how the acknowledgement process works.

This is the work we will be doing together in conjunction with the IAIABC Implementation Committee.

C-2	Employer's Report of Work Related Injury/ Illness
VF-2	Political Subdivision's Report of Injury to Volunteer Firefighter
VAW-2	Political Subdivision's Report of Injury to Volunteer Ambulance Worker
C-7	Notice that Right to Compensation is Controverted
C-669	Notice to Chair of Carrier's Action on Claim for Benefits
C-8/8.6	Notice That Payment of Compensation Has Been Stopped or Modified

Paper Files Replaced by Electronic Filings for Claim Administrators

Electronic transmission means less paperwork for claim administrators and the Workers' Compensation Board.

We have identified forms that will be eliminated for claim administrators through the eClaims project. These are:

- The C-2, Employer's Report of Work Related Injury/ Illness form.
- The VF-2, which is the Political Subdivision's Report of Injury to Volunteer Firefighter form.
- The VAW-2, which is the Political Subdivision's Report of Injury to Volunteer Ambulance Worker form.
- The C-7, Notice that Right to Compensation is Controverted form.
- The C-669, Notice to Chair of Carrier's Action on Claim for Benefits form.
- And the C-8/8.6, Notice That Payment of Compensation Has Been Stopped or Modified form.

FROI First Report of Injury	SROI Subsequent Report of Injury	
C-2	C-7	
C-7	C-669	
VF-2	C-8/8.6	
VAW-2		

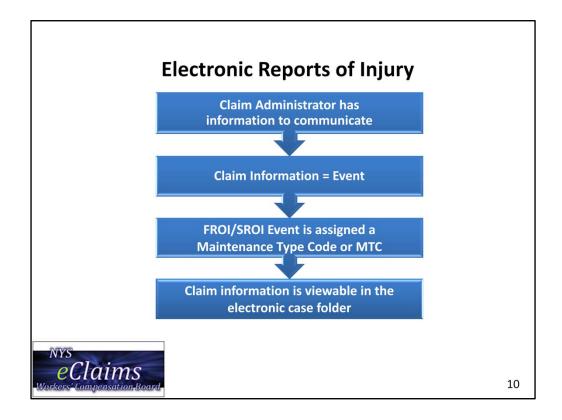
Mapping WCB forms to FROI/SROI

In IAIABC terminology, the First Report of Injury is known as FROI and a Subsequent Report of Injury is SROI.

Information currently contained on C-2, C-7, VF-2, and the VAW-2 forms is the information that will be submitted for First Reports of Injury. While claim administrators will only submit electronically, reports of injuries may still be filed by employers using paper forms.

The data currently submitted on C-7, C-669, and the C-8/8.6 forms is the information that will be submitted as SROI for Subsequent Reports of Injury.

There must be a First Report of Injury before a Subsequent Report of Injury will be accepted.



Electronic Reports of Injury

Currently a claim administrator communicates a claim event by submitting a carrier form such as a C-2 or a C-669.

In an electronic environment, these claim events are communicated as a FROI or SROI event. An event is assigned a Maintenance Type Code or MTC which enables the information to be mapped to the case file. This information then becomes part of the electronic case folder.

Event Examples

Maintenance Type Code (MTC)						
FROI First Report of Injury		SROI Subsequent Report of Injury				
00	Original	04	Denial			
01	Cancel	PD	Partial Denial			
02	Change	IP	Initial Payment			
04	Denial	CA	Change in Benefit Amount			



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Event Examples Maintenance Type Code - MTC

Each event has a code.

When making a First Report of Injury or FROI, the following codes are used:

00 is for Original,

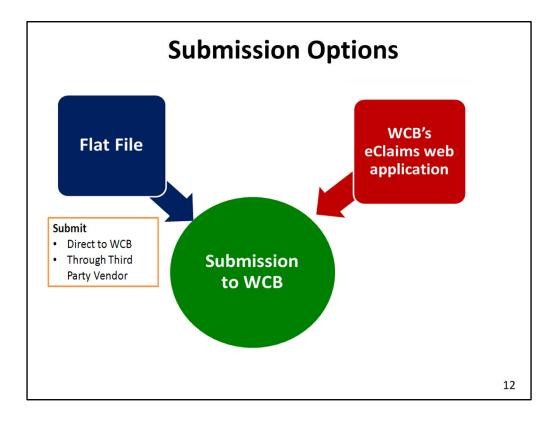
01 is for Cancel,

02 is for a Change,

04 is for a Denial.

For the Subsequent Reports of Injury or SROI, the following codes are used: 04 is for a Denial, PD is Partial Denial, IP is Initial Payment, CA is a Change in Benefit Amount.

The Maintenance Type Codes, as well as all of New York's data requirements, will be covered in detail in future presentations.



Submission Options

There are different methods for submitting reports of injury. You do not have to limit yourself to one form of submission or join IAIABC to submit data.

Using a secure file transfer protocol, you may submit a flat file. Submissions can be done directly to the Workers' Compensation Board or through a third party vendor.

There will also be a secure data entry option offered through the Workers' Compensation Board's new eClaims web application. This is primarily for small volume filers, though not limited solely to that group.



Project Milestones:

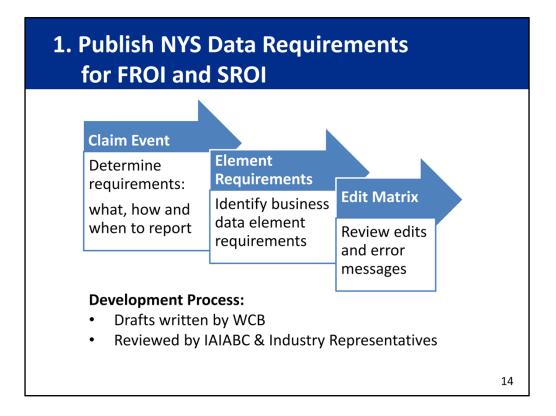
There are several milestones in this project that involve claim administrators.

First is the publication of New York State specific data requirements tables that reflect New York State's workers' compensation laws. These tables will identify the events, data elements, and edits.

We then need to determine an implementation strategy for handling new and existing cases.

There will be a testing period to ensure accurate transmissions.

And finally, we need to develop a phased-in production schedule when actual data will be transmitted.



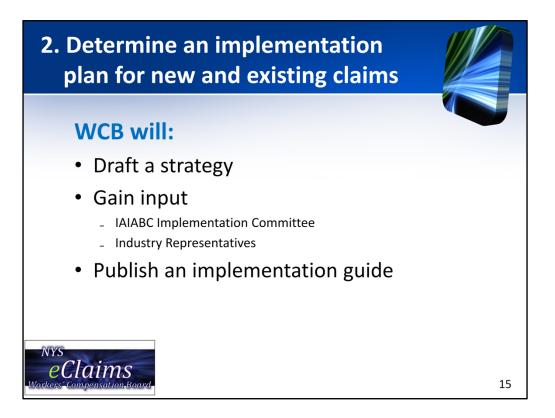
1. Publish New York State Data Requirements for FROI and SROI

Implementing the IAIABC standards requires the development of three separate tables for New York State's specific data requirements.

Each table builds upon the other.

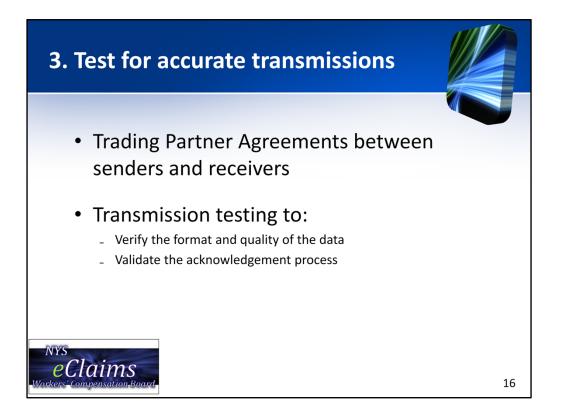
- The first table is the Event Table of the data requirements claim administrators must follow for what, how and when to report information related to first and subsequent reports of injury.
- Next an Element Requirements Table will be developed. This table will consist of the discrete data components that New York State will require from claim administrators.
- Once the required claim events *and* data elements are identified, the next step is to review the edits or validation that will be applied to each. This is specified in an Edit Matrix table which also includes standard error messages associated with those edits.

Prior to publication, drafts of the requirement tables will be evaluated by the IAIABC Implementation Committee and reviewed by industry representatives.



2. Determine an implementation plan for new and existing claims

The Workers' Compensation Board will propose a strategy for handling new and existing claims. As with the Data Requirements Tables, this plan will be shared with the IAIABC Implementation Committee and industry representatives prior to publication.



3. Test for accurate transmissions

Before testing begins, each claim administrator group will contract with the Workers' Compensation Board through a Trading Partner Agreement. The agreement addresses the need for secure transfer of data between a sender and receiver.

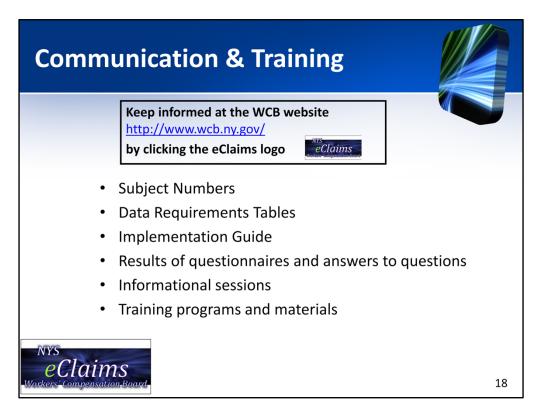
During the testing phase, we will certify claim administrators. This means that the "trading partner" or sender has participated in the testing process and has demonstrated the ability to submit data that is accurate and usable, especially with large file transmittals. The testing process will include the trading partner's ability to receive and process acknowledgements from the Workers' Compensation Board.



4. Begin Production: Spring 2013

In conjunction with the IAIABC Implementation Committee and industry representatives, we will develop a production schedule for when actual data submission will begin.

We envision this happening in the spring of 2013 with a pilot group, followed by a phased rollout with other claim administrators.



Communication and Training

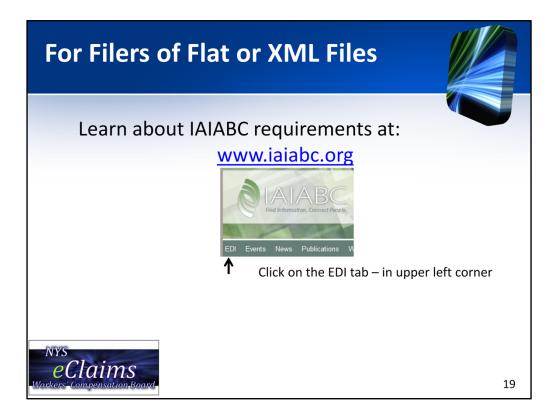
You can stay informed about the project at the Workers' Compensation Board's website which is <u>www.wcb.ny.gov</u>

We have added a section for relevant information that you can access by clicking on the eClaims logo.

Throughout the project, we will post information on the website, including:

- Subject Numbers, which are the formal Workers' Compensation Board's communications,
- The Data Requirements Tables,
- An Implementation Guide, and
- The results of questionnaires and answers to questions you and others have raised

In addition, look for announcements of informational sessions and training programs.

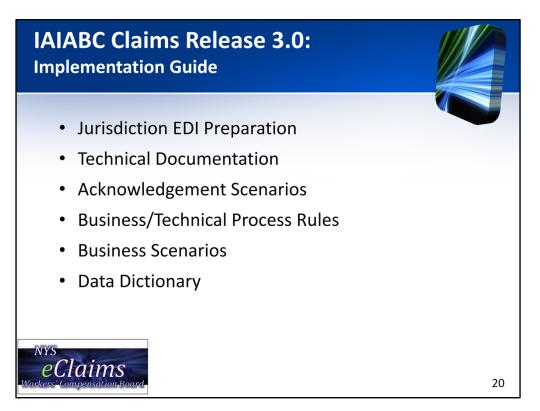


For Filers of Flat or XML Files

If you plan to file by Flat or XML files, you can learn more about the IAIABC standard for Electronic Data Interchange – EDI at the IAIABC website, which is www.iaiabc.org

Click on the EDI tab located in the upper left corner of the homepage screen. There is a drop down menu with a number of resources.

Non-members may purchase a number of resources at the website. You may also wish to consider membership options for broader access to industry information.



IAIABC Claims Release 3.0: Implementation Guide

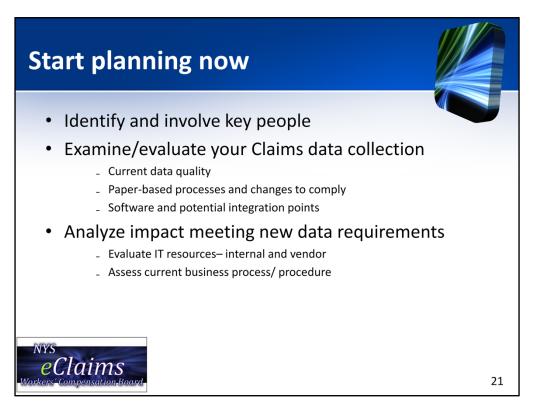
A place to begin with the IAIABC resources is the implementation guide for Claims Release 3.0. This guide will be used in conjunction with the data requirements developed for New York State.

There are six sections:

The first section is targeted to jurisdictions. New York State is using this to prepare for its implementation of Claims Release 3.0.

The other five sections provide specific information on the role of claim administrators in the reporting process.

- Technical Documentation, is where you will find explanations of the Systems and Processing Rules, along with record types and layouts.
- Acknowledgment Scenarios, demonstrates examples of how jurisdictions will acknowledge submitted reports.
- The Business and Technical Process Rules section clarifies the rules for what data submitters must do in various specific circumstances in the life of a claim.
- Business Scenarios presents "real-life" examples of claim events and how to report them to the jurisdiction.
- The Data Dictionary consolidates the definitions of the business and technical terms used in Release 3.0.



Start planning now

We recommend you begin planning how you will meet the mandate. This starts with identifying and dedicating business and technical resources. If you plan to submit Flat or XML files, immediately involve your organization's Information Technology and Project Management units.

For all claim administrators, it is important to begin an examination of your current practices.

- Evaluate the data quality of the information you are currently collecting and reporting.
- Examine your existing paper based processes and start to identify the changes you will need to make to support the eClaim's electronic data filing requirements.
- Examine your existing Claim Administration software and identify potential integration points for sending data to the Workers' Compensation Board.

As you proceed through your examination, analyze how you will meet the new data requirements.

- This includes evaluating the Information Technology resources you currently utilize either internally or with a vendor.
- Assess and compare your current business processes and procedures for collecting claims data to the new data requirements. Where applicable, this should include an evaluation of Third Party Administrator practices and procedures.
- Begin to identify the modifications you will need to make to meet the eClaim's data filing requirements.



Questions or Comments?

The Board has established an email address specifically for eClaims. It is eclaims@wcb.ny.gov

Please use this email to ask us questions or provide comments related to the eClaims process.



Action needed now!

We intend to customize communications and training to meet the varied needs of our claim administrators community. An immediate action we need you to take is completing a needs assessment questionnaire. The questionnaire is located at the WCB website at www.wcb.ny.gov in a section identified as eClaims.

The results will be used to develop a comprehensive communications and training plan.

Please designate a person within your organization to complete and submit the questionnaire by March 30, 2012.

Thank you for viewing this presentation. We are confident that working together we can successfully implement a cost effective method of transmitting employer claims data that will benefit all stakeholders.

Note: Some material in this presentation was taken from the IAIABC website located at www.iaiabc.org