

Regulatory Impact Statement for amendment of 12 NYCRR Section 325-1.4.

1. Statutory Authority:

The Workers' Compensation Board (hereinafter referred to as Board) is authorized to amend 12 NYCRR 325-1.4. Workers' Compensation Law (WCL) Sections 13-a and 117(1) authorize the Board to adopt reasonable rules consistent with and supplemental to the provisions of the WCL.

2. Legislative objectives: WCL Section 13-a (5) requires that a medical provider that seeks to perform a medical procedure costing more than one thousand dollars seek prior approval from the employer or insurance carrier. The proposed amendment to 12 NYCRR Sections 325-1.4 updates the regulation to permit the Chair to require that such request for approval be made using an electronic portal maintained by the Board unless the medical provider does not have the ability to submit electronically. The proposed amendment also permits the Chair to waive service requirements on other parties because once the electronic portal is operational as all parties will receive notices from the portal and have access to the same information.

3. Needs and benefits: The purpose of the proposed amendment is to permit the Chair to require use of a self-service medical portal when making requests for authorizations. The medical portal is a product of the Board's Business Process Reengineering project whereby system participants widely expressed an interest in having the ability to operate in a self-service environment and to simplify the processes for requesting approval for medical treatment. The medical portal will be available to all system participants and will do calculations for timing and proper process behind the scenes to relieve users of the need to perform these calculations and analyses.

4. Costs: There are no projected costs to regulated parties who may be affected by the proposed regulation. There are no projected costs to the Board, State and local governments.

5. Local government mandates: The proposed regulation does not impose any mandate, duty or responsibility upon any municipality or governmental entity. Self-insured municipalities may use a medical

portal if they are able. If the self-insured municipality does not have internet access, it may continue to receive requests by paper.

6. Paperwork: The proposed amendment would permit the Chair to eliminate the use of various paper forms associated to requesting medical treatment.

7. Duplication: There is no duplication of State or federal regulations or standards.

8. Alternatives: There were no significant alternative proposals under consideration.

9. Federal standards: There are no applicable federal standards which address the standards contained in the proposed regulation.

10. Compliance schedule: The proposed amendment gives the Chair discretion to require use of the medical portal subject to exceptions. The Chair may delay this requirement to assure that all participants are ready and will dedicate needed resources to assure all participants are capable of using the portal before requiring same.