



Workers'
Compensation
Board

ONBOARD

A Better System for a Better Board

OnBoard: Limited Release for **Insurers**

Agenda

- 
1. OnBoard: Limited Release Recap
 2. Prior Authorization Request Submission and Insurer Response Processes
 3. Insurer FAQs
 4. Updates and What's Next
 5. Questions

OnBoard Timeline

- Began in summer 2019.
- Identified opportunities to release system functionality early, to better assist stakeholders.
 - OnBoard: Limited Release
- The project has three phases:

Mid second
quarter 2021
(calendar year)



Limited Release
Phase 1

No earlier than
October 2021



eClaims EDI R3.1
Phase 2

2023



OnBoard
Phase 3

Prior Authorization Requests

- OnBoard: Limited Release will digitize and streamline the PAR process for the following requests:

New PAR Name	Old PAR Name
Confirmation	previously done using the Attending Doctor's Request for Optional Prior Approval and Carrier's/Employer's Response [Form MG-1])
Variance	previously done using the Attending Doctor's Request for Approval of Variance and Carrier's Response [Form MG-2])
Special Services	includes the 12 requests related to the Medical Treatment Guideline (MTGs) previously done using the Attending Doctor's Request for Authorization and Carrier's Response [Form C-4 AUTH]
Non-MTGs treatment costing more than \$1,000	previously done using Form C-4 AUTH

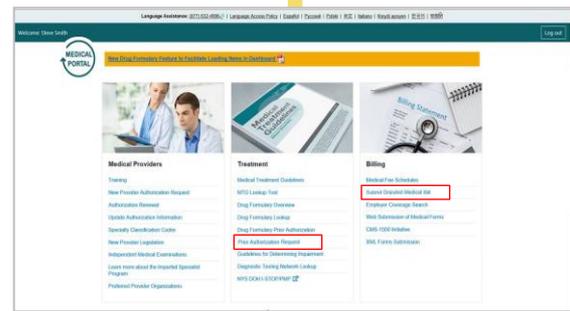
- Paper *Form MG-1*, *Form MG-2*, and *Form C-4 AUTH* will be eliminated when use of Limited Release begins.

New Prior Authorization Requests

- Prior authorization of Durable Medical Equipment (DME).
- Non-MTGs treatment costing \$1,000 or less.
- Medication PARs (replacing the current Drug Formulary Prior Authorization Request process).
- Transfer of completed PAR submissions to the eCase folder.

Prior Authorization Process

- Begins with accessing the Portal.
- Access Limited Release dashboard.
- Select “Submit an eForm.”
- Enter requested information.



The screenshot shows the 'Home' dashboard with a table of Prior Authorizations. The table has columns for 'Prior Auth ID', 'Type', 'Patient', 'Patient DOB', 'Carrier Case #', 'WCB Case #', 'Last Activity', and 'Prior Auth Status'. The table contains 10 rows of data, with the first row highlighted in blue.

Prior Auth ID	Type	Patient	Patient DOB	Carrier Case #	WCB Case #	Last Activity	Prior Auth Status
PA-02-123-1234	Formulary	Underwood, Carrie	01/01/1990	IN1234567	01957462	06/23/2020	LEVEL 3 REVIEW
PA-02-123-1234	Mandatory	Smith, Amanda	01/01/1990	IN1234567	01957462	06/21/2020	LEVEL 3 REVIEW
PA-12-333-1634	Variance	Belen, Kyle	01/01/1990	IN1234567	01957462	07/03/2020	LEVEL 3 REVIEW
PA-10-106-1247	Non-MTG-\$1000	Donalddon, Aaron	01/01/1990	IN1234567	01957462	07/05/2020	LEVEL 3 REVIEW
PA-12-443-9933	Formulary	McGibson, William	01/01/1990	IN1234567	01957462	07/10/2020	UNAPPROVED
PA-03-193-1234	Special Services	Garcia, Robert	01/01/1990	IN1234567	01957462	07/15/2020	LEVEL 3 REVIEW
PA-11-185-1934	Disable Medical Equipment	Davis, Susan	01/01/1990	IN1234567	01957462	07/17/2020	LEVEL 3 REVIEW
PA-08-123-1748	Variance	Brown, Lianne	01/01/1990	IN1234567	01957462	07/23/2020	UNAPPROVED
PA-06-115-1536	Mandatory	Miller, Amber	01/01/1990	IN1234567	01957462	07/23/2020	DENIED
PA-02-843-9957	Non-MTG-\$1000	Lopez, Julia	01/01/1990	IN1234567	01957462	07/24/2020	LEVEL 3 REVIEW

The screenshot shows the 'Requester Information' form. It asks 'On behalf of which of the following Providers are you completing this form?' and 'Please select license for this request.' The 'Requesting on Behalf of' dropdown is set to 'Dr. Alan Swenson'. The 'License' dropdown is set to 'Select a License', with a list of options: '#123456789 | Physician', '#987654321 | Chiropractor', and '#543216789 | Physical Therapist'.

Prior Authorization Process

- Enter the requested information:
 - CPT Code
 - MTG Site
 - Body Part Information
 - MTG Consistency
- Attach documents as necessary.
- Add additional items to a PAR.
 - Durable Medical Equipment, for example.
- Complete request (PAR needs to be submitted by the provider).

This screenshot shows the 'Items Requested' section of a PAR form. It includes fields for 'Select category of PAR' (with 'Other Treatment/Testing' selected), 'Enter the CPT Code/Description' (with 'A0021 - Outside state ambulance service' entered), 'Select MTG associated with this PAR' (with 'Foot and Ankle' selected), 'MTG Reference Code/Description' (with 'C.T.R.L.A: Nocturnal Splints for Treatment of Tarsal Tunnel Syndrome' selected), and 'Select body part associated with this PAR' (with 'Ankle' and 'Left' selected). There are also radio buttons for 'Is requested treatment/testing addressed by and consistent with the MTG?' with 'Addressed by MTGs and Consistent with MTGs' selected. A sidebar on the right shows claim details: Claimant DOB 06/30/1968, WCB Case Number WC-12345, Site/Condition Ankle, and Provider Dr. Ron Swanson.

This screenshot shows the 'Items Added (1)' summary section of the PAR form. It displays the details for the single item: Item #1, PAR Type: MG-1, Consistent, Body Part: Left Ankle, CPT/HCPCS: C.T.R.L.A: Nocturnal Splints for Treatment of Tarsal Tunnel Syndrome, and MTG: A0021 - Outside state ambulance service. Below this, it states 'Based on items entered, the following Prior Authorization Request types will be submitted:' and lists 'MG-1, Consistent'. A yellow warning box says 'Heads up! Once you move on to the next screen, you won't be able to make changes to the Claim details.' The sidebar on the right shows claim details: Claimant Name Julius R. Johnson, Claimant DOB 06/30/1968, WCB Case Number WC-12345, Site/Condition Ankle, and Provider Dr. Ron Swanson.

Prior Authorization Process Response

- Insurers will receive PAR requests in their dashboard.
- Workload Administrators will either respond directly or assign the PAR to the level 1 or level 2 reviewer.
- The reviewer will fill out their response, shown here.

Prior Authorization request: PA-00-0001-465 | Step 1 of 4:
Durable Medical Equipment PAR Summary and Insurer Response Save as Draft
Insurer Response to Prior Authorization: DME

INSURER RESPONSE TO PRIOR AUTHORIZATION: DME
Durable Medical Equipment PAR Summary and Insurer Response

- Insurer Response Details
- Supporting Documentation
- Review and Submit

Please provide your response for each line item below

Body Part Bilateral Disc	Medical Treatment Guideline Mid and Low Back - D.2.b Non-Operative Proce...	CPT/HCPCS A4381: Ostomy pouch, urinary, for use on facep...
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L1 Insurer Response
Deny

Insurer Response
Grant

Is this request granted without Prejudice? *
 Yes No

Granted for? *
 Purchase Price Rental Price

Is model/version on WCB price list? *
 Yes No

Overall Response to PAR
Grant

Prior Authorization request: PA-00-0001-465 | Step 1 of 4:
Insurer Response Details Save as Draft
Insurer Response to Prior Authorization: DME

INSURER RESPONSE TO PRIOR AUTHORIZATION: DME
Durable Medical Equipment PAR Summary and Insurer Response

- Insurer Response Details
- Supporting Documentation
- Review and Submit

Is this Claim apportioned? *
 Yes No

Amount or Percentage covered? *
70

Additional Insurer information responsible for this Claim? *

Insurer Name

Title of the Reviewer *
Other

Other Title *
Other Title

← Durable Medical Equipment PAR Summary and Insurer Response Supporting Documentation → Exit

Prior Authorization Process

- Prior to responding, insurers can attach supporting documentation.
- Review and submit response.

Prior Authorization request: PA-00-0001465 | Step 1 of 4

Supporting Documentation Save as Draft

Insurer Response to Prior Authorization: DME

INSURER RESPONSE TO PRIOR AUTHORIZATION: DME

- Durable Medical Equipment PAR Summary and Insurer Response
- Insurer Response Details
- **Supporting Documentation**
- Review and Submit

Supporting Documentation

Document must be less than 30MB

File Name	Description	Upload

[Upload Additional Documents](#)

[Insurer Response Details](#) [Review and Submit](#) Exit

Prior Authorization request: PA-00-0001465 | Step 1 of 4

Review and Submit Save as Draft

Insurer Response to Prior Authorization: DME

INSURER RESPONSE TO PRIOR AUTHORIZATION: DME

- Durable Medical Equipment PAR Summary and Insurer Response
- Insurer Response Details
- Supporting Documentation
- **Review and Submit**

Please review the following information for accuracy prior to submission.

Insurer Responses Edit

Body Part: Medical Treatment Guideline: CPFWMDCS:

Insurer Response:

Is this request granted without Prejudice? *

Granted for? Is model/version on WCB price list? *

Overall Response to PAR:

Insurer Response Details Edit

Is this Claim apportioned? * Amount or Percentage covered? *

Additional insurer information responsible for this Claim? *

Insurer Name:

Title of the Reviewer *
 Other Title:

Supporting Documentation Edit

No Supporting Documentation attached.

[Supporting Documentation](#) [Submit](#) [Previous](#) Exit

Frequently Asked Questions



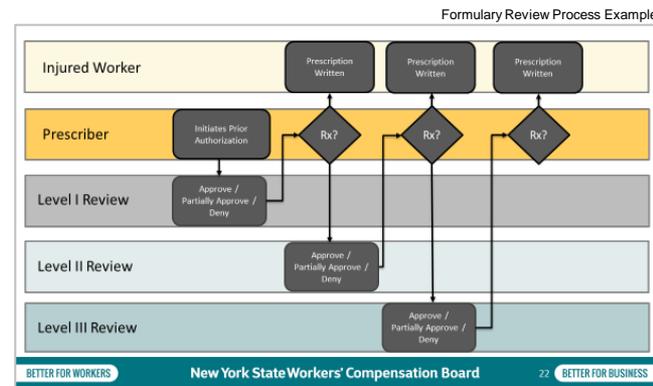
Q

Will the current time periods for insurer response remain the same once the new system is implemented?

A

Yes, all current time frames for insurer review and response will remain the same as they are today.

If an insurer does not respond within the designated timeframe, an Order of the Chair may be issued.





Will an MTG PAR denial only escalate to a Level 2 review if the claimant or claimant's attorney objects to the denial?



All Level 1 reviews resulting in a denial or partial grant will require an automatic escalation to a Level 2 review before the response is entered into the system and sent to the health care provider. The only exception is a Medication PAR – where the health care provider will need to manually escalate for a Level 2 review if the Level 1 reviewer does not fully grant the Medication PAR.

Q

Will OnBoard: Limited Release automatically send PAR status updates to insurers and all parties on a claim (e.g., claimant, attorney, health care provider, insurer, etc.)?

A

Insurers will have their own dashboard with a “status” column that will update PAR submissions. Insurers will also receive email or text message notifications that inform them of an update and that work needs to be performed.

Prior Auth Status ▾
LEVEL 2 REVIEW
LEVEL 1 REVIEW
LEVEL 2 REVIEW
LEVEL 1 REVIEW
GRANTED IN PART
LEVEL 2 REVIEW
LEVEL 2 REVIEW
GRANTED
DENIED
LEVEL 2 REVIEW



Q

Is there a limit to the number of users each insurer can have?



A

No, there is no limit to the number of users each insurer can have in OnBoard: Limited Release.



Will a health care provider be able to submit multiple treatments or services on one PAR, or will they require a PAR for each type of treatment/service?



Each type of treatment or service requires a PAR submission; however, the new system allows for treatments, services, and equipment requests to be added as separate line items on a single submission. The system will convert these into one or more PARs depending on what is being requested. If there are multiple medication items being requested, each will get their own individual –PAR—but for the other PAR types, line items within the same PAR family will be combined into a single PAR.

Q

If an insurer is currently using a Pharmacy Benefits Manager (PBM) for Drug Formulary review, how will the PBM receive Medication PAR requests?

A

The insurer will be required to designate a PBM contact who will receive an email or text message notification of each decision throughout the review process.

Q

How can insurers register, and when?

A

All online user administrators for the current Medical Portal and Drug Formulary system will automatically be granted access to OnBoard: Limited Release in the second quarter of 2021. This will enable administrators to add users to the additional roles that will be required for their organization, as well as add new notification emails. The administrator will use their Medical Portal or Drug Formulary login credentials to log into OnBoard: Limited Release.



The image shows a screenshot of the NY.gov ID login interface. At the top, there is a dark blue header with the NY state outline logo and the text "NY.gov ID". Below the header, there are two input fields: "Username:" and "Password:". A grey "Sign In" button is positioned below the password field. At the bottom of the form, there is a link for "Forgot your Username or Password" and a smaller link for "NY.gov ID - Terms of Service".

Q

Will an insurer have the option to opt out of the *Attending Doctor's Request for Optional Prior Approval and Carrier's/Employer's Response (Form MG-1)* in Limited Release?

A

No. A Confirmation PAR in OnBoard: Limited Release (previously done using Form MG-1), will be optional for the health care provider to submit. If a health care provider submits a Confirmation PAR, the insurer's response will be mandatory.

Q

For Variance PARs (previously *Form MG-2*), are Workers' Compensation Law Judges no longer ruling on denials?

A

All requests from a health care provider for a Level 3 review of a Variance PAR denial will be routed to the Board's Medical Director's Office for review, and the injured worker or their attorney may request a hearing using by submitting a *Request for Further Action by Legal Counsel (Form RFA-1LC)*.



Will the new system confirm that a health care provider's request is or is not consistent with the MTGs?



No. The system will not automatically confirm if treatment is consistent with the MTGs. Part of the provider's submission includes if their requested treatment is consistent with a guideline. The insurer needs to review the request and respond, whether or not they agree, based on the specifics of the claimant's case, if it is consistent with the guidelines. The MTG Lookup Tool, which will be available when OnBoard: Limited Release is implemented, will make it quick and easy to search the MTGs.



How does OnBoard: Limited Release allow for the submission of a PAR or *Form HP-1* for a newly injured worker who doesn't yet have a claim or case on file with the Board?



When performing a case lookup to submit a PAR, after two unsuccessful attempts to locate the case, health care providers will be able to continue with the request by manually entering any known information. It should be noted that if the insurer is not found, the Board must review the case for assembly, potentially delaying the authorization process. The system will not allow a *Form HP-1* to be submitted/accepted if the Board has not assigned a WCB Case Number.



How would an insurer request an IME or record review in OnBoard: Limited Release?



An IME can be requested as part of either a Level 1 or Level 2 review, and the time frame for response will be calculated based on the date the IME request was submitted regardless of whether the IME request was made during a Level 1 or Level 2 review.

Q

Will a Durable Medical Equipment (DME) fee schedule be included in Limited Release?

A

Yes, the *DME Fee Schedule* and the date by which prescription refills must comply with the Drug Formulary have been changed to coincide with the implementation of OnBoard Limited Release. Some items on the DME fee schedule will require prior authorization, others will not.

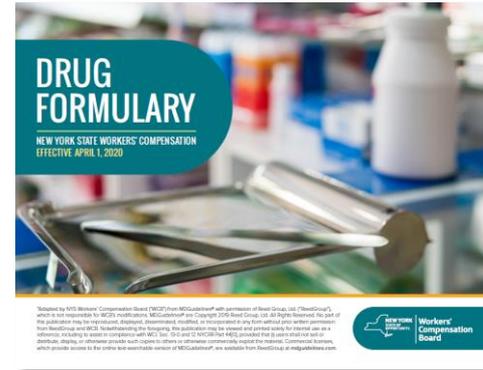


Available on the Board's website
Health Care Providers > Medical Fee Schedules

Projects to Coincide with OnBoard: Limited Release

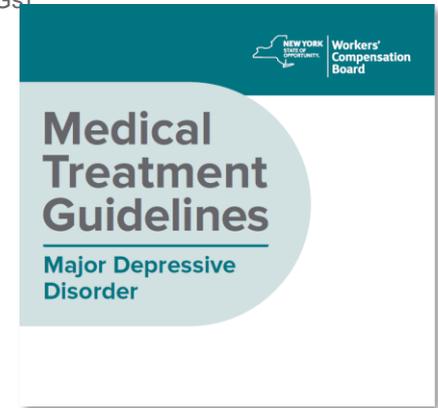
- ***New York Workers' Compensation Drug Formulary (Drug Formulary) Refill Compliance***
 - Deadline for prescription drug refills to comply with the *Drug Formulary* becomes effective with launch of OnBoard: Limited Release

Reminder - OnBoard: Limited Release will include Medication PARs, and replace the current *Drug Formulary* available in the Medical Portal.



Projects to Coincide with OnBoard: Limited Release

- ***Workers' Compensation Board's New York Medical Treatment Guidelines***
 - The following become effective with Limited Release:
 - Hand, Wrist and Forearm Injuries (these guidelines will replace the Carpal Tunnel MTGs)
 - Occupational/Work Related Asthma
 - Ankle and Foot Injuries
 - Elbow Injuries
 - Hip and Groin Injuries
 - Occupational Interstitial Lung Disease
 - Post-Traumatic Stress Disorder
 - Major Depressive Disorder
 - Updated Medical Treatment Guidelines coming:
 - **New:** Traumatic Brain Injury
 - Revisions of Mid and Low Back, Neck, Shoulder and Knee



Updates & What's Next

Latest Website Updates

- Insurer fact sheet.
- Frequently asked questions for insurers.
- Webinar slides and recordings.

The screenshot displays a dark navigation menu on the left with the following sections: SECTIONS, Overview, Timeline, OnBoard: General FAQs, OnBoard: Limited Release, Get Involved & Stay Informed, A Business Process Re-Engineering Project, and Resources. The main content area is titled 'Resources' and includes three sub-sections: Videos, Fact Sheets, and Frequently Asked Questions. Each sub-section contains a list of links, many of which are marked as 'Limited Release' and include icons for video and slides. The 'Webinars' section at the bottom lists several recorded sessions with their respective dates and available formats.

SECTIONS

- Overview
- Timeline
- OnBoard: General FAQs
- OnBoard: Limited Release
- Get Involved & Stay Informed
- A Business Process Re-Engineering Project
- Resources

Resources

Videos

- Intro to OnBoard: [Video](#)

Fact Sheets

- OnBoard: Limited Release – What Health Care Providers Need to Know
- OnBoard: Limited Release – What Insurers Need to Know
- OnBoard: Limited Release – What Claimant Attorneys Need to Know
- OnBoard: Limited Release – What Insurer Attorneys Need to Know

Frequently Asked Questions

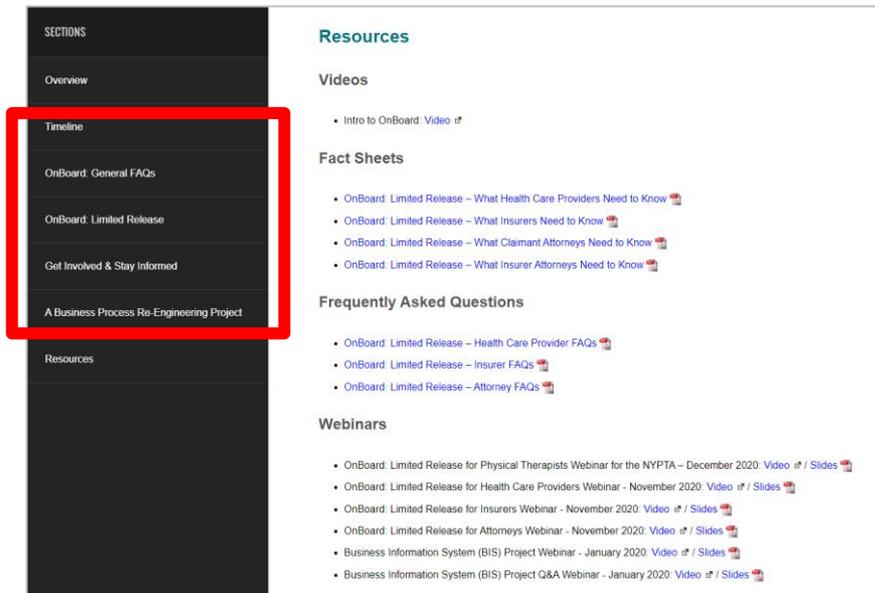
- OnBoard: Limited Release – Health Care Provider FAQs
- OnBoard: Limited Release – Insurer FAQs
- OnBoard: Limited Release – Attorney FAQs

Webinars

- OnBoard: Limited Release for Physical Therapists Webinar for the NYPTA – December 2020: [Video](#) / [Slides](#)
- OnBoard: Limited Release for Health Care Providers Webinar - November 2020: [Video](#) / [Slides](#)
- OnBoard: Limited Release for Insurers Webinar - November 2020: [Video](#) / [Slides](#)
- OnBoard: Limited Release for Attorneys Webinar - November 2020: [Video](#) / [Slides](#)
- Business Information System (BIS) Project Webinar - January 2020: [Video](#) / [Slides](#)
- Business Information System (BIS) Project Q&A Webinar - January 2020: [Video](#) / [Slides](#)

Upcoming Website Updates

- New stakeholder specific sections
 - Fact sheets
 - Updated FAQs
 - New videos



February Webinars

What will they feature?

- **Webpage Updates**
- **Updated Frequently Asked Questions**
- **Early Registration**
 - Who needs to register
 - How to register





Future Insurer Training

Monthly Webinar Series

Training Guides and Video Tutorials

Just-in-time Training Webinars

Website Content

Q&A Webinars

Support Channels

Next Steps for Insurers

- Review your current paper or fax-based systems. You will no longer be using these!
- Review the OnBoard webpage



Stay Engaged

- **wcb.ny.gov/OnBoard**
 - Overview, timeline, FAQs, resources
- **Subscribe for OnBoard Updates**
 - Subscribe to receive email updates on all things OnBoard!
- Email OnBoard@wcb.ny.gov
- **Questions?**

