

IRR: CLM818
DATE: 1-12-2016
PRIORITY: Medium
STATUS: Open
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BUSINESS REQUIREMENT/ISSUE: MTC CB is currently defined to be used when benefits are changing and there is no break in the continuity of benefits. A Suspension is defined as all payments of indemnity benefits have stopped because... Since a Suspension implies ALL benefits have stopped and requires a form to be sent to the injured worker in FL, we have recommended that the claim administrator not suspend benefits until they are certain that all benefits have stopped. If an IW receives a notice that benefits are being suspended when they are really changing from one benefit category to another, this can confuse them and send them to seek legal counsel. We have allowed and recommended that the CB be sent when changing from one BTC to another, even if there is a break in the continuity of benefits. For example: TT has been paid, IW is released to return to light duty work and employer can accommodate. Whether or not any TP benefits are due will be determined based on the claimant's earnings every 2 weeks. If the IW earns too much to be due TP the first 2 weeks, but receives TP the second 2 weeks, we would like to receive a CB when that TP check is sent.

This has never been a problem since we mandated in 2007 until the auto-triggering of transactions has come in to play. When the adjuster/EDI rep is not making the decision of what MTC to send, and the MTC decision is being automated based on whether or not there is a break in benefit dates, we are no longer receiving CBs when we expected to receive them. A new benefit type can not suddenly appear on an 02, Periodic or any other Event unless it was introduced with a CB/RB/PY or it will fail in FL. We are seeing a lot of these rejections and discovered that with automated triggering some vendors determine if a CB should be sent based on whether or not check dates are consecutive. A CB may have been attempted, but failed internal vendor edits; however, other MTC's are not being held by that vendor until the CB has cleared edits, and these additional MTCs (e.g. SA) are being sent and are failing due to the presence of a new BTC.

We understand the CB definition and we know some states want it handled that way (consecutive dates); however, as a jurisdiction, we would like the claim administrators to have the ability to send CB's without enforcing the consecutive dates if we choose. Or we would like there to be another MTC for changing/introducing benefit types without consecutive dates, without requiring a suspension and reinstatement.

REQUESTER'S PROPOSED SOLUTION:

Option 1: Amend the definition of CB as noted below

CB Change in Benefit Type – The Claim Administrator has identified that the Benefit Type Code (DN0085) has changed from the previously reported Benefit Type Code. The jurisdiction will determine if the CB should be sent with or without a break in continuity of benefits. A CB would also be filed if an employer previously paid salary in lieu of compensation (EP with Benefit Type Code 2xx) and is now paying salary in lieu of compensation again after the claim administrator either began paying (IP with Benefit Type Code 0xx) or reinstated benefits (RB with Benefit Type Code 0xx). The jurisdiction will determine if the CB should be sent with or without a break in continuity of benefits (Sx). If the Benefit Type Code is being corrected in response to a TE, the CO MTC is used.

Record: A49; R22

DP Rule: A previous IP, AP, or Subsequent Report UR has been filed.

Option 2: Create a new MTC that can be used to introduce a new BTC when there has been a break in the continuity of benefits, but entitlement to all benefits is not being suspended.

Final Proposed Resolution (October 2017)

Update definition for MTC CB:

CB = Change in Benefit Type – The Claim Administrator has identified that the Benefit Type Code (DN0085) has changed from the previously reported Benefit Type Code. without a break in continuity of benefits. If the employee had been evaluated for and subsequently determined to receive a different benefit type (0xx), the CB should be used to report the new benefit type if no "terminating" transaction has been accepted. The jurisdiction will determine what represents a "terminating" transaction via the Event table. A CB would also be filed if an employer previously paid salary in lieu of

~~compensation (EP with Benefit Type Code 2xx) and is now paying salary in lieu of compensation again after the claim administrator either began paying (IP with Benefit Type Code 0xx) or reinstated benefits (RB with Benefit Type Code 0xx), without a break in continuity of benefits (SX).~~ A CB would also be filed when resuming 2xx employer paid salary in lieu of compensation after 0xx indemnity benefits have been paid; for example (EP, IP, CB-2xx) or (EP, IP, SX, RB-0xx, CB-2xx).

Update definition for Anticipate Wage Loss Indicator:

ANTICIPATED WAGE LOSS INDICATOR – DN0201

Definition: An indicator that Temporary Partial Disability benefits are anticipated to be owed, but either the claim administrator has not yet received the required wage documentation in order to make payment(s) or where documentation has been received but does not qualify for payment at this time.

Orig/Rev: 11/30/06, XX/XX/XX

Record: R22

Format: 1 A/N

Values: **Y = Yes, N= No**

DP Rule: DN0201 Anticipated Wage Loss Indicator will be used when an employee has returned to work with restrictions and is being evaluated for Temporary Partial Disability but payment has not yet been made.

Upon approval, add scenarios utilizing Anticipated Wage Loss Indicator for Temp Partial Disability to the 3.1 Scenarios.