

Self-Insurance Training Presents:

Web Resources Test Prep and SICATS

2024 Quarterly Training

Safety Message



Resources

- Claim Adjudication Guidelines
- Forms & Publications
- Medical Aide Rules and Fee Schedule (MARFS)
- RCW's (Title 51) Revised Code of Washington https://apps.leg.wa.gov/rcw/default.aspx?Cite=51
- WAC's (Title 296) Washington Administrative Code https://apps.leg.wa.gov/WAC/default.aspx?cite=296-20

Claims Trainee

- A new person hired by an SIE/TPA to make claims decisions, who is not already a certified claims administrator.
- Must become a certified claim administrator within two years.

Certification Test Eligibility

- Minimum of 1 year of administration/oversight of claims under Title 51 RCW, under the mentorship of a WA state certified claims administrator.
- Completion of a comprehensive goal-oriented curriculum approved by the department.

Applying for the Certification Test

- Apply using the department's online database through SICATS.
 - The system will automatically default to a test date 7 days after the application date.
 - Select the goal-oriented curriculum and annotate the date of course completion.

Prior to Testing

- Instructions will be emailed to you.
 - Please review prior to testing.
- Remember to pay the proctor.
 - Keep a copy of the receipt.

What if I do not pass the test?

- You may apply to retest for the next available testing week.
- Current certified claims administrators will have their certification terminated and cannot manage claims until they have successfully passed their retest.

Maintaining Your Certification

- Must earn a minimum of 45 credits every 3 years in the area of claims management.
 - Including attending any mandatory trainings.
- If you do not meet the minimum requirements to renew via continuing education credits, you must retake the "self-insurance claims administrator" test.

Submitting Courses in SICATS

- Load approved courses taken in SICATS.
- To get the course verified by the department send either to SIContEdu@Ini.wa.gov:
 - Self-Insurance Continuing Education Report of Course Completion (F207-191-000).
 - Certificate for any department approved continuing education course.

 Once you are logged in to SICATS, click "Add a Completed Course" in the left hand column.

Account Summary

Account Information

Update Contact Information

Update Work History

Continuing Education

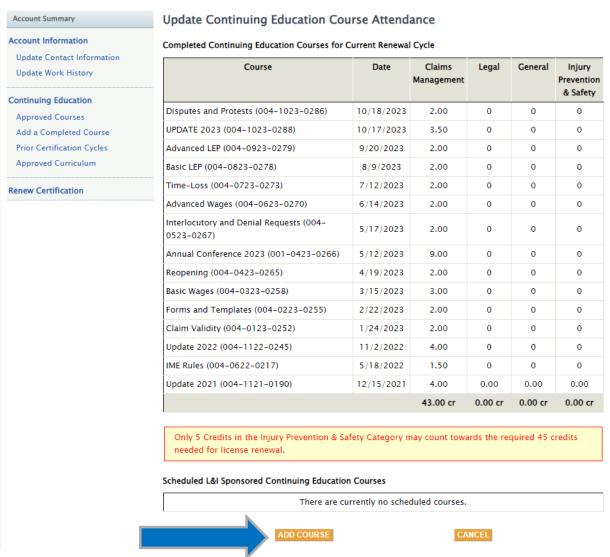
Approved Courses

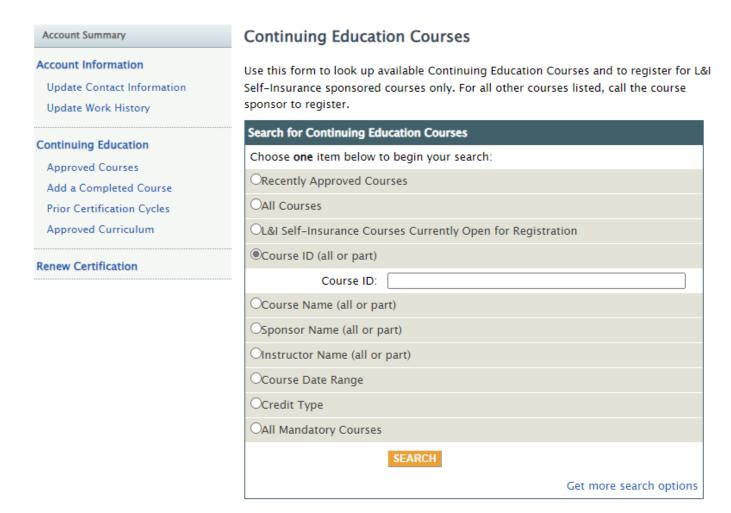
Add a Completed Course

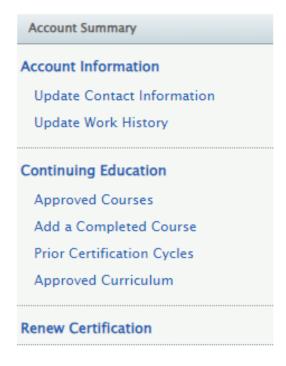
Prior Certification Cycles

Approved Curriculum

Renew Certification



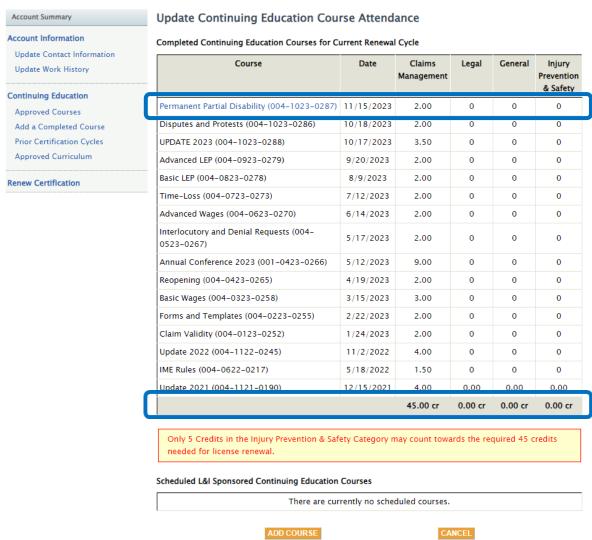




Continuing Education Courses

Your search for "Course ID": '004-1023-0287', found 1 record(s).





Certification Renewal

- Maintain all completed course documentation for the duration of your current certification period of 3 years.
 - False reporting of credits will result in revoking certification and could result in refusal of future applications to take the certification test. (WAC 296-15-360(6)(e))
- Following your renewal, continuing education credits earned will reset back to zero.

Changes in Contact Information

- Must notify the department within 30 calendar days of the effective date of any change in mailing address, work location or name.
 - Must be reported/changed using SICATS.
- Highly recommended you use a personal email address and personal phone number for your contact information.

SICATS Assistance

- If you have any questions at all, please contact us.
 - Phone: (360)902-6709
 - Continuing Education/Certification renewal questions
 SIContEdu@LNI.WA.GOV
 - Self-Insurance Trainer questions
 SITrainerQuestions@LNI.WA.GOV

Knowledge Check



What two things must a claims trainee complete to be eligible to take the self-insured claim administrator test?

- 1. One year administration/oversite of claims under Title 51 under the mentorship of a WA certified claims administrator.
- 2. Complete a comprehensive goal-oriented curriculum approved by the department.

What is the renewal period for a certified claim administrator?

3 years

How many continuing education credits does a certified claim administrator need to renew their certification?

45 verified credits

Angela is a certified claim administrator who excepted a new job with a new employer. When must she report this change to the department?

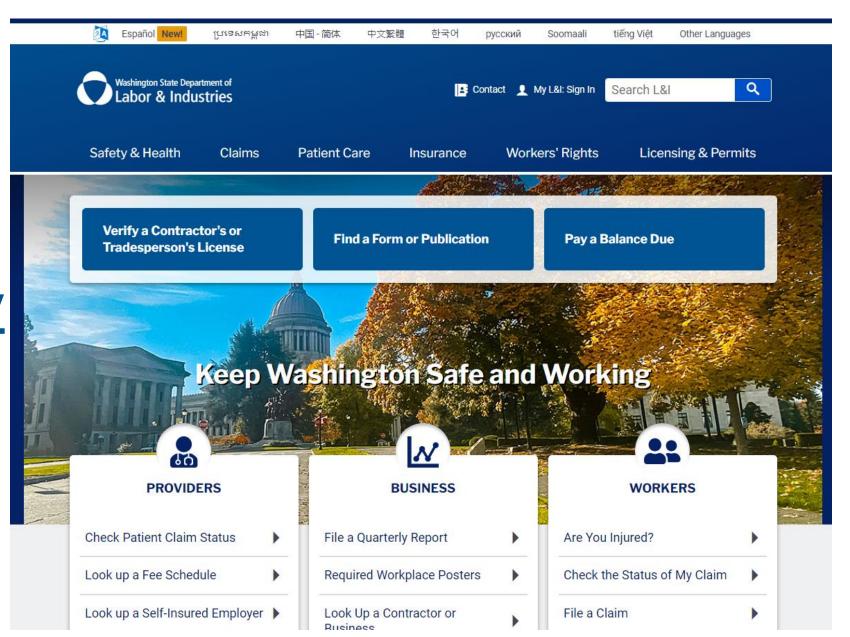
30 calendar days

Nick's certification period ends on 2/10/2024. He earned 35 CEC's including all mandatory trainings.

What must he do in order to renew?

Retake and pass the self-insurance claims administrator test.

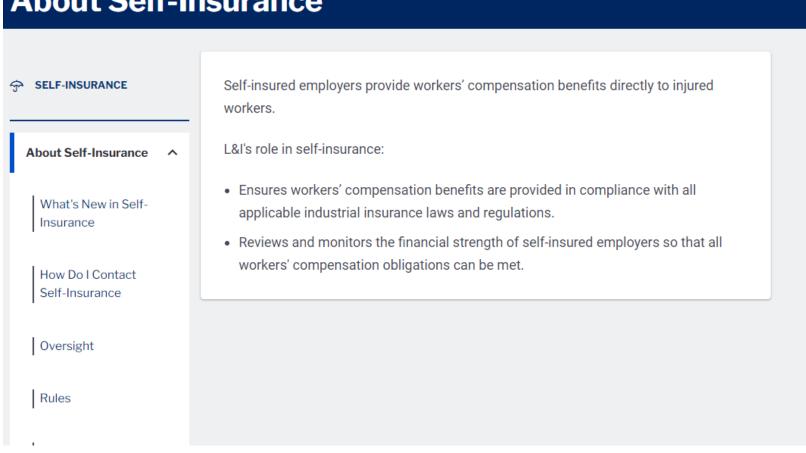
Can he manage claims after 2/10/2024?



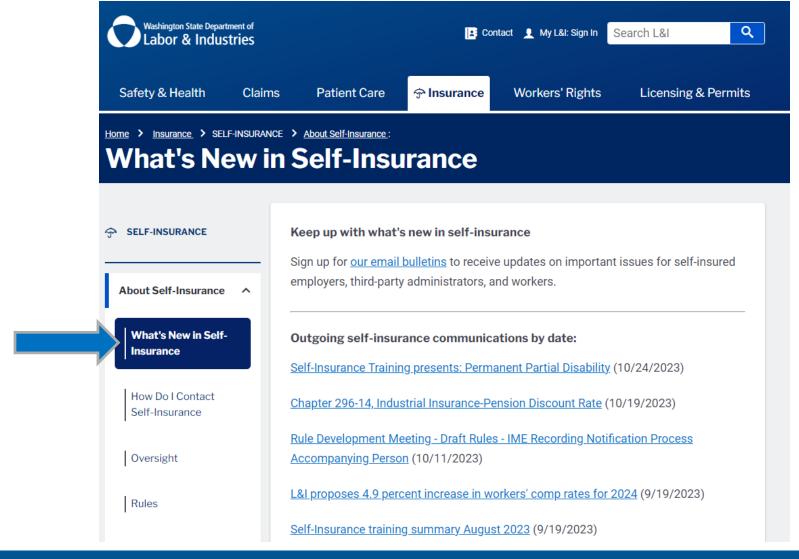
www.lni.wa.gov



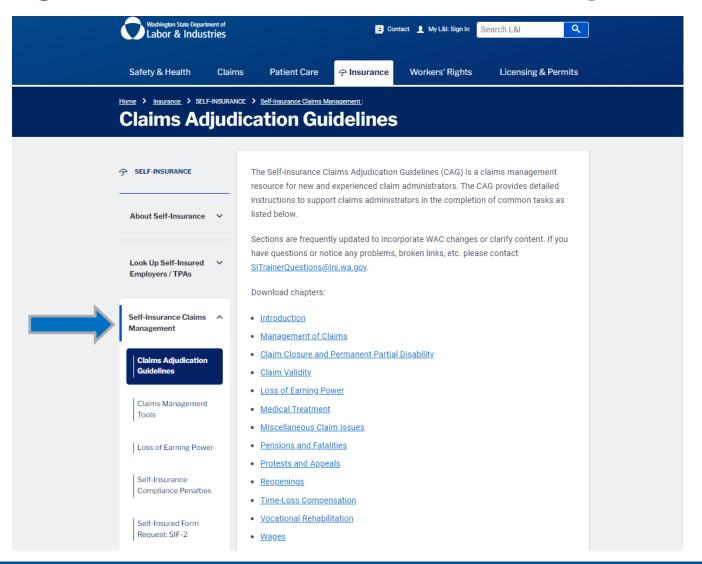
Self-Insurance Main Page



What's New for Self-Insurance



Claim Adjudication Guidelines(CAG)



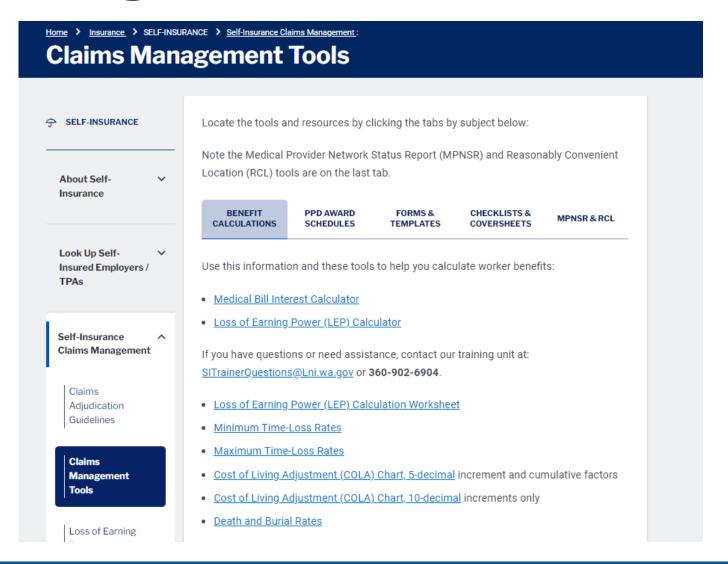
Claim Adjudication Guidelines(CAG)

Claim Validity

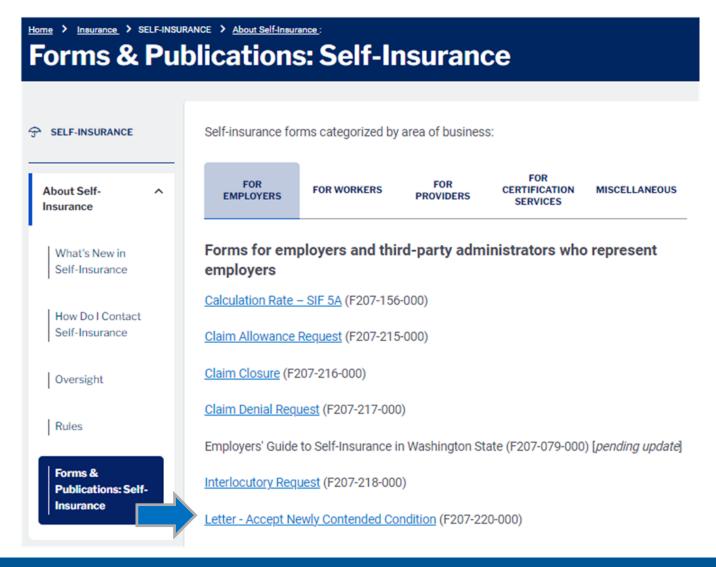
Self-Insurance Claims Adjudication Guidelines

Claim Resolution	Page 4
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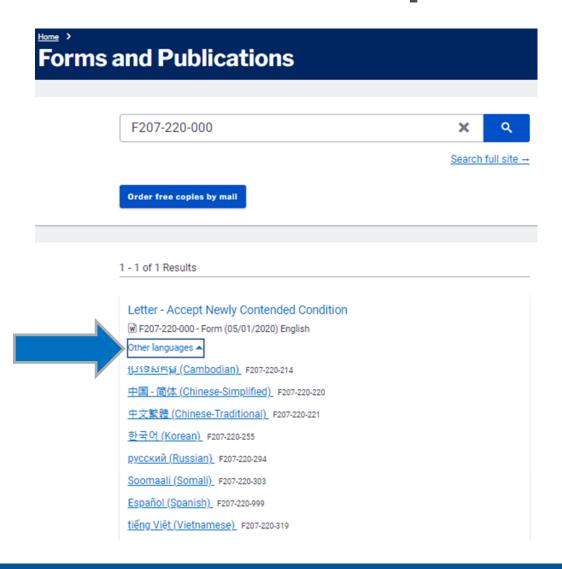
Claim Management Tools



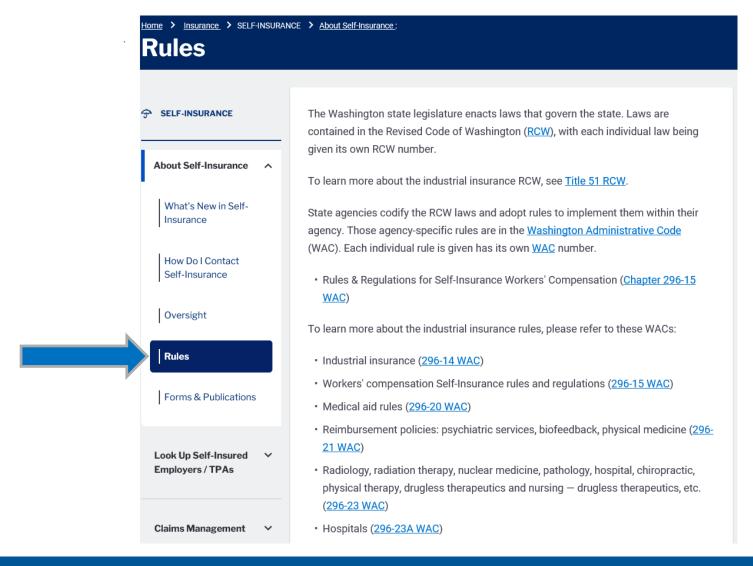
Forms and Publications



Translated Forms and Templates



RCWs and WACs



RCW Title 51

Chapter 51.14
applies specifically
to self-insurers.



	PCWs >	> Title 51
Legislature Home	KCVV3 >	Title 31
House of Representatives	RCW D	ispositions
Senate	Title F	51 RCW
Find Your District	Title 5) i RCVV
Laws & Agency Rules	INDUS.	TRIAL INSURANCE
Bill Information	Chapt	ers
Agendas, Schedules, and Calendars	51.04	General provisions.
Legis tive Committees	51.08	Definitions.
Coming to the Legislate.	51.12	Employments and occupations covered.
Legislative Agencies	51.14 51.16	Self-insurers. Assessment and collection of premiums—Payrolls and records.
Legislative Information Center	51.18	Retrospective rating plan.
Email Updates (GovDelivery)	51.24	Actions at law for injury or death.
View All Links	51.28	Notice and report of accident—Application for compensation.
	51.32	Compensation—Right to and amount.
	51.36	Medical aid.

Funds. Penalties. Appeals.

Construction.

51.98

RCW 51.14

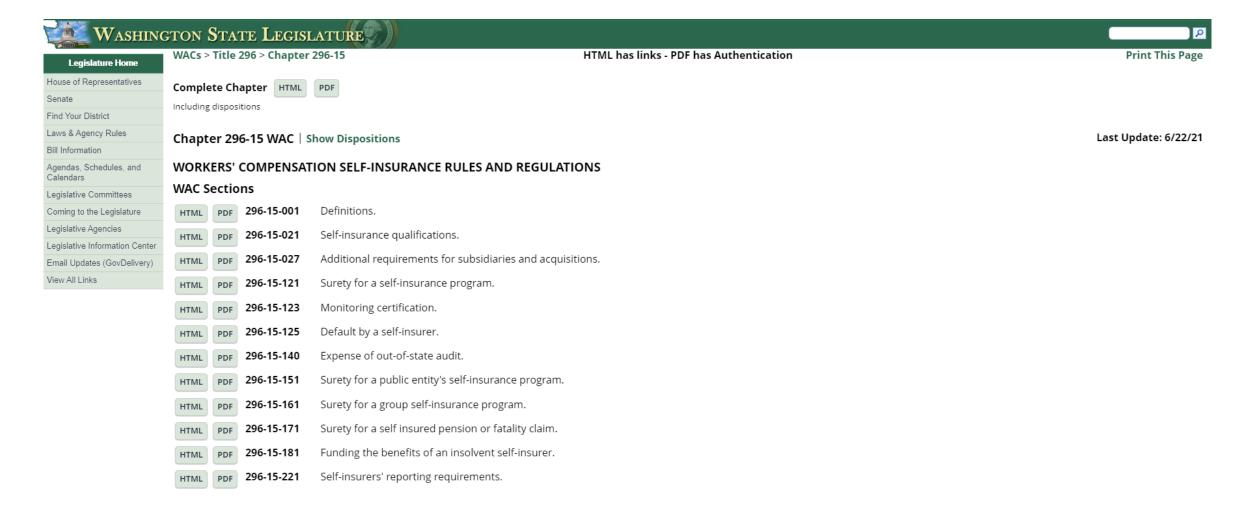


Sections

SELF-INSURED EMPLOYERS

51.14.010	Duty to secure payment of compensation—Options.
51.14.020	Qualification.
51.14.030	Certification of employer as self-insurer.
51.14.040	Surety liability—Termination.
51.14.050	Termination of status—Notice—Financial requirements.
51.14.060	Default by self-insurer—Authority of director—Liability for reimbursement.
51.14.070	Payments upon default.
51.14.073	Default lien.
51.14.077	Self-insurers' insolvency trust—Assessments—Rules.
51.14.080	Withdrawal of certification—Grounds.
51.14.090	Withdrawal of certification, corrective action upon employees' petition.
51.14.095	Corrective action—Appeal.
51.14.100	Notice of compliance to be posted—Penalty.
51.14.110	Employer's duty to maintain records, furnish information—Electronic reporting system—Requirement and penalties—Confidentiality of claims data—Rules.
51.14.120	Copy of claim file—Notice of protest or appeal—Medical report.
51.14.130	Request for claim resolution—Time.
51.14.140	Violations of disclosure or request for resolution—Order by director.
51.14.150	School districts, ESDs, public hospital districts, or hospitals as self-insurers—Authorized—Organization—Qualifications.
51.14.160	School districts, ESDs, or hospitals as self-insurers—Rules—Scope.
51.14.170	Administration of claims—Third-party administrators.
	OFFICE OF THE OMBUDS
51.14.300	Ombuds office created—Appointment—Open and competitive contracting.
51.14.310	Ombuds—Term of office—Removal—Vacancies.
51.14.320	Ombuds—Training or experience qualifications.
51.14.330	Ombuds office—Staffing level.
51.14.340	Ombuds office—Powers and duties.
51.14.350	Ombuds office—Referral procedures—Department response to referred complaints.
51.14.360	Ombuds liability—Discriminatory, disciplinary, or retaliatory actions—Communications privileged and confidential—Testimony.
51.14.370	Confidentiality of ombuds records and files—Disclosure prohibited—Exception.
51.14.380	Explaining ombuds program—Posters and brochures.
51.14.390	Ombuds office—Funding.
51.14.400	Ombuds—Annual report to governor.

WACs

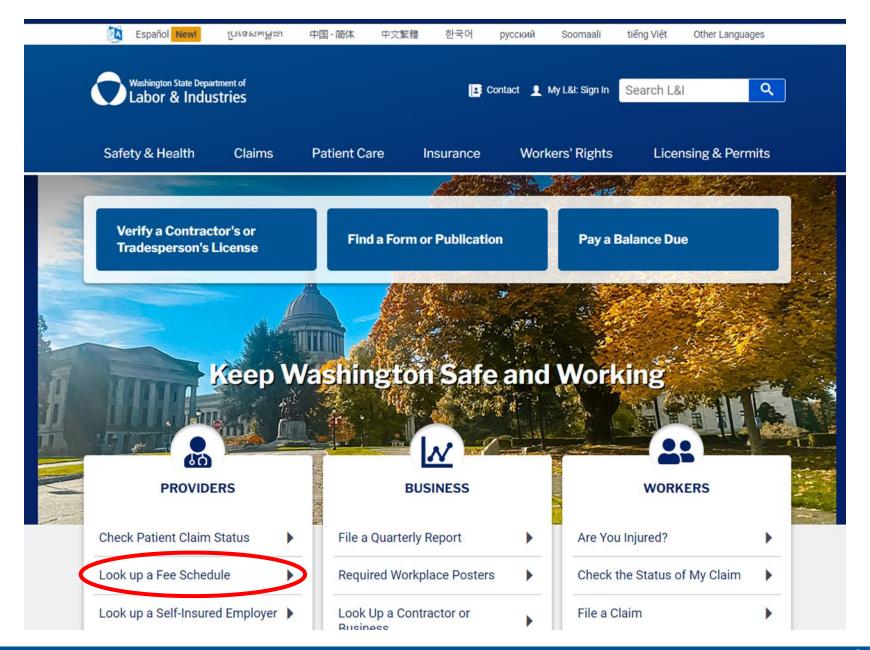


Medical Aid Rules (WACs)



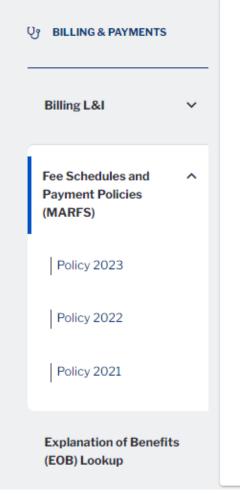
Medical Aid Rules and Fee Schedules (MARFS)

- Self-Insurers must authorize treatment and pay bills according to the same MARFS published by L&I.
- Updated effective July 1st each year <u>https://lni.wa.gov/patient-care/billing-payments/fee-schedules-and-payment-policies/</u>





Fee Schedules and Payment Policies (MARFS)



This site contains the policies, payment methods and maximum fees used to pay health care and vocational providers who treat injured workers and crime victims.

Make sure to check the <u>Updates & Corrections</u> tab for any changes to the Payment Policies or Fee Schedules.

Use the following Fee Schedules and Payment Policies by year:

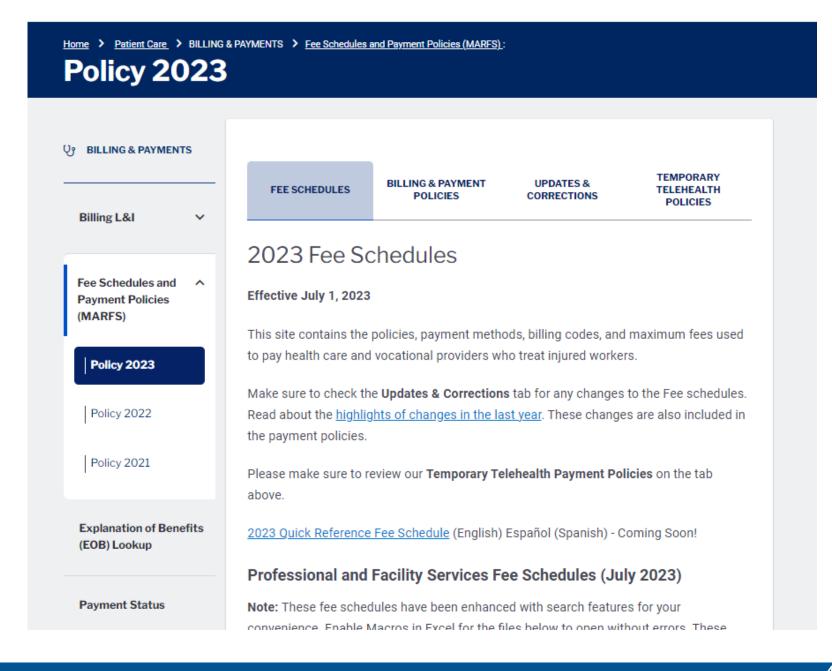
- 2023 Fee Schedules and Payment Policies
- 2022 Fee Schedules and Payment Policies
- 2021 Fee Schedules and Payment Policies

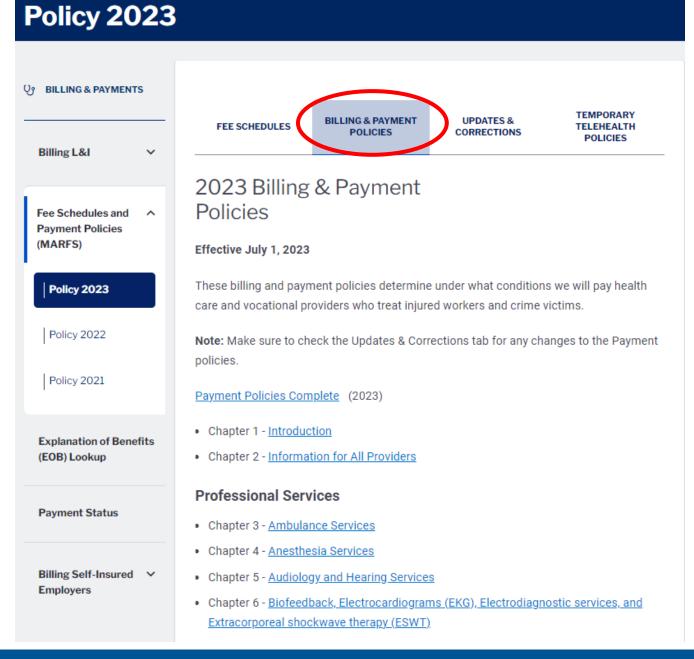
To look up fees and authorization requirements, use our lookup tools: (Note: Enable Macros in Excel for the files below to open without errors.)

Fee Schedule Lookup (2023)

Fee Schedule Lookup (2022)

Fee Schedule Lookup (2021)







Payment Policies for Healthcare Services
Provided to Injured Workers and Crime Victims

Chapter 17: Mental Health Services

Effective July 1, 2023

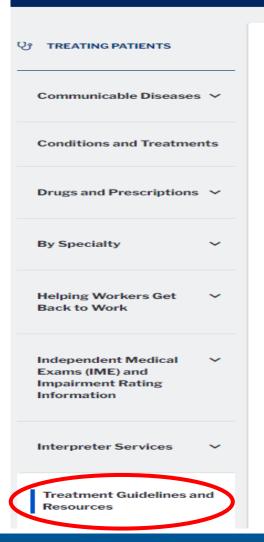


Link: Look for possible updates and corrections to these payment policies on L&I's website.

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Pay	ment policy: Audio only mental health services	17-4
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Pay	ment policy: Mental health consultations and evaluations	17-1
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Medical Treatment Guidelines

Treatment Guidelines and Resources



ABOUT

TREATMENT GUIDELINES ADVANCED IMAGING GUIDELINES PRACTICE RESOURCES FOR ATTENDING PROVIDERS

The medical treatment guidelines are written from a clinical perspective, to guide clinical care. Providers should consult the <u>Medical Aid Rules and Fee Schedule</u> (<u>MARFS</u>) for documentation and coding requirements.

The Medical Treatment Guidelines (also called Medical Practice Guidelines or Review Criteria) are evidence based and were developed by the Office of the Medical Director in collaboration with practicing physicians and advisors.

Some guidelines are intended to be educational tools for medical providers. Some guidelines and the review criteria are used by L&I in the <u>Utilization Review</u> program and claim management process to promote best practices and improve the health of injured workers. They are published by L&I, which is solely responsible for coverage decisions that may result from their use.

See <u>Conditions and Treatments (Coverage Decisions)</u> for additional information.

How to use the guidelines

Health care providers are expected to be familiar with the guidelines and follow the recommendations. Good medical judgment is important in deciding how to use and interpret this information.

Guideline history and development process

See the <u>Guideline Process</u> for background information and a description of how guidelines are prioritized, developed, and implemented. All current guidelines are those listed individually below.

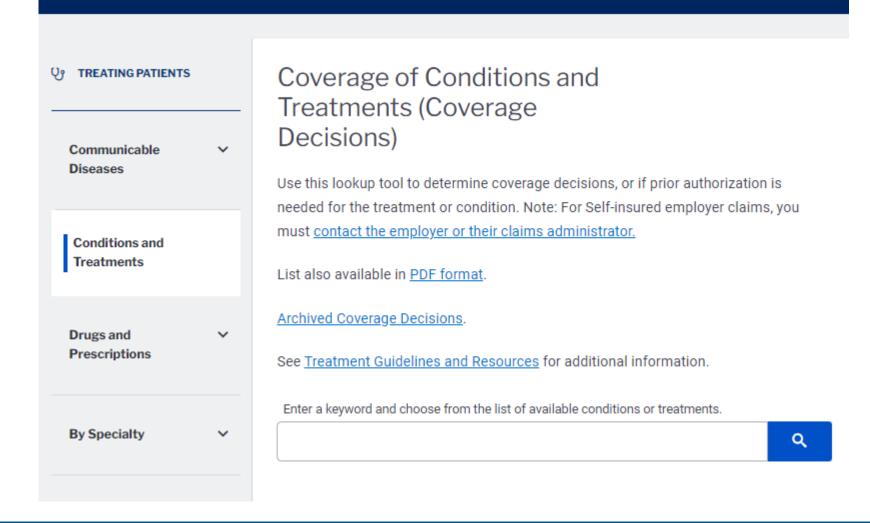
Medical Treatment Guidelines

Treatment Guidelines and Resources



Condition and Treatment Index

Conditions and Treatments



Knowledge Check



Which chapter of the Claim Adjudication Guidelines addresses overpayments?

Miscellaneous Claims Issues

Is treatment to improve or maintain general health appropriate for coverage?

No

Which WAC addresses this? WAC 296-20-03002

Which RCW defines Permanent Partial Disability?

RCW 51.08.150

Which chapter of MARFS covers Durable Medical Equipment(DME)?

Chapter 9

What is the departments coverage decision regarding acupuncture?

Covered with conditions

What is the departments coverage decision regarding acupuncture?

Covered with conditions

What is the departments coverage decision regarding acupuncture?

Covered with conditions

Common Testing Errors

- Forms and Templates
- Date of Manifestation
- Gross Monthly Wages
- Time Loss Rates/Loss of Earning Power
- Permanent Impairment
- RCWs and WACs

Form and Templates Tips

- Use the formal name of the form or template.
- Do not use a name that you may call it.
- Example:
 - If asked for information regarding a notice being sent to the provider authorizing treatment, use:
 - Treatment Decision
 - F207-226-000

Calculations Tips

- Do not write out the math.
 - Examples of incorrect answers:
 - $$15.00 \times 8 \times 22 = 2640.00
 - \$15.00 x 8 x 22 = \$2640.00 + 500 HCB = \$3140.00 OR
 - \$2640.00 w/out HCB or \$3140.00 w/ HCB
- Round to the second decimal place at each step.

Calculations Reminders

- Time-Loss Minimum
- Time-Loss Maximum
- Cost of Living Adjustments (COLAs)
- Health Care Benefits
- Martial and Dependent Status

RCW and WAC Tips

- Do not put a WAC if asked for a RCW.
- Do not add the subsection.
- Examples of correct answers:
 - WAC 296-20-124
 - 296-20-124
 - RCW 51.52.060
 - 51.52.060

General Tips

- Read the testing instruction prior to testing.
- Read the questions.
- You can skip a question and come back to it.
- You can flag a question.
- Use your approved resources.

Resources

- Claim Adjudication Guidelines
- Forms & Publications
- Medical Aide Rules and Fee Schedule (MARFS)
- RCW's (Title 51) Revised Code of Washington https://apps.leg.wa.gov/rcw/default.aspx?Cite=51
- WAC's (Title 296) Washington Administrative Code https://apps.leg.wa.gov/WAC/default.aspx?cite=296-20



Questions?

 Claim-specific questions: Call 360-902-6901 and ask for the claim adjudicator assigned to the claim.

 General claim questions: email us at <u>SITrainerquestions@Lni.wa.gov</u>