

# NYS WORKERS' ADVOCATE CONFERENCE



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## Navigating Your Medical Needs

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**Workers'  
Compensation  
Board**

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# **Medical Director's Office (MDO) Overview**

# Medical Director's Office (MDO) overview

## Who we are

- The Board's MDO is comprised of medical professionals and other support staff.
- The responsibilities of the MDO include the oversight of all medical issues at the Board, with a key focus on ensuring high-quality care and outcomes for injured workers.

**We are here to help!**

# Medical Director's Office (MDO) overview

## What we do

- Help the Board create and ensure compliance with our *New York Medical Treatment Guidelines (MTGs)*, *New York Workers' Compensation Drug Formulary*, and *New York State Workers' Compensation Fee Schedules* for provider reimbursement.
  - Implement strategies and programs to ensure proper instructions for adjudicators, health care providers, and medical reviewers who utilize the *MTGs*, related *Drug Formulary*, *Medical Fee Schedules*, and impairment guidelines.
- Get involved when there is a dispute regarding medical treatment for injured workers.

# Medical Director's Office (MDO) overview

## What we do (cont'd)

- Provide expertise to Board leadership on important medical subjects, whether that's legislation such as telehealth or any other number of matters.
- Encourage provider participation in the workers' compensation system and train them on how to do so.
- Regularly field stakeholder questions.
- Routinely serve as impartial reviewers of case files in which there are questions or controversies related to medical necessity or appropriateness of billing, to ensure implementation consistent with Board guidance.
- Oversee the recruitment, authorization, retention, and referral for discipline of providers and certain other entities.



# **What to Do When There's a Workplace Injury or Illness**

# What to do when there's a workplace injury or illness

## Seek medical treatment immediately

- In an emergency, an injured worker can see any medical doctor. Otherwise, they should see a Board-authorized health care provider.
  - We have a directory of such providers on our website.
- When getting treatment, injured workers should tell their health care provider that they have a work-related injury or illness, and provide the name of their employer.
- The worker should provide written notification to their employer as soon as possible, but **within 30 days**.
- If injured workers fail to notify their employer within 30 days after the date of injury, they may lose their rights to workers' compensation benefits.
- For ongoing care, injured workers should see their doctor no more than 15 days after the injury and at least every 90 days if they have ongoing lost time from work.

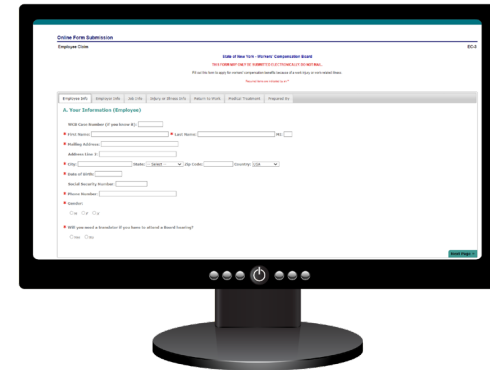




# What to do when there's a workplace injury or illness

## File a claim

- An *Employee Claim (Form C-3)* should be filed by mail or online as soon as possible to report the injury to the Board.
- The Board must be notified of an injury or illness **within two years**.
- If the same body part has been injured before, or if the worker has had a similar illness, a *Limited Release of Health Information (Form C-3.3)* must also be filed.



# Timeline

Responsible Party	Action	When
Injured worker	Notify your employer of your work-related injury/illness	Within <b>30 days</b> of injury/illness
Injured worker	File a claim with the Board	<b>As soon as possible</b> , but within <b>two years</b> of your injury/illness
Employer	Notify insurance carrier of injury/illness	Within <b>10 days</b> of notification of injury/illness
Insurance carrier	Provide injured worker with a written Statement of Rights and any requirements for using pharmacy or diagnostic testing networks	Within <b>14 days</b> of employer's notification of injury/illness
Insurance carrier	Begin the payment of benefits if lost time exceeds seven days	Within <b>18 days</b> of employer's notification of injury/illness
Injured worker	Continue to receive payments for benefits every two weeks during disability period	<b>Every two weeks</b>



# Care and Benefits for Injured Workers

# Health care for workers

- Health care to treat a work-related injury or illness is a workers' compensation benefit that is provided at no cost to injured workers for their lifetime.
- Health care is covered whether or not injured workers lose time from work or are receiving a benefit for lost wages.



# Health care for workers (cont'd)

## Types of services covered

Medical and Osteopathic	Psychological (by referral)	Hospital Care	Nursing Services
Dental	Chiropractic Treatment	Laboratory Tests	Surgical Appliances
Podiatric	Surgery	Prescribed Drugs	Prosthetic Devices

# Board-authorized providers

Health care providers must be authorized by the Board to treat injured workers.

- In order to provide treatment to injured workers, health care providers must be Board-authorized other than in emergency situations as mentioned earlier.
- You may search for an authorized health care provider on the Board's website, [wcb.ny.gov](http://wcb.ny.gov), or you can contact us by phone at **(800) 781-2362** for assistance.
  - Injured workers may receive care from their own doctor if they are authorized by the Board.
- We understand that there are several ancillary providers who are not eligible for Board authorization (e.g., audiologists, dentists, optometrists) who still treat injured workers.
  - Such providers are able to submit a *Request for Decision on Unpaid Medical Bills (Form HP-1.0)* if they have a billing dispute.

# Health care expenses

**Health care providers will bill the insurer directly.**

- Per **Workers' Compensation Law section 13f**, providers are not to bill injured workers directly.
  - Injured workers should not pay the health care provider or hospital, or use other health insurance for treatment of their work-related injury or illness, unless the Board does not accept their claim or they don't pursue it.
- Doctor(s) may ask injured workers to sign a notice of responsibility, known as a *Form A-9*, stating that they will pay the medical bills if the Board does not allow their claim, or if they drop their claim before it's accepted.

# Health care expenses

## Worker rights and responsibilities regarding health care expenses

- If specific medical services are disputed, the workers' compensation insurer must pay any undisputed portion.
  - The insurer must explain in writing why the services were not paid and request any information needed to pay them.
- Insurers can submit valuation objections to bills (*Form C-8.4*) as well as legal objections (*Form C-8.1B*), but must do so simultaneously.
- The Board also has a Request for Decision on Unpaid Medical Bill(s) process, or *Form HP-1.0*.



# Health care expenses

## Travel to and from treatment is covered

- Injured workers should keep receipts for travel expenses related to their injury.
  - They may be reimbursed for mileage, public transportation, or expenses incurred for treatment.
- The *Claimant's Record Of Medical and Travel Expenses and Request For Reimbursement* ([Form C-257](#)) must be completed by the injured worker detailing any and all injury-related travel expenses.
  - This form can be found on the Board's website.



# Health care expenses

## Provider networks

- **Preferred Provider Organizations (PPO):** Insurers may require injured workers to use their PPO for medical care. The insurer must notify workers if it uses a provider network. If unsatisfied with the PPO care, workers may select an authorized health care provider outside the PPO after 30 days of treatment.
  - Any employer utilizing the services of a certified PPO shall distribute to all employees a written notice of the PPO arrangement.
  - Note this can often be in the form of an email, notice on employer website, letter, or poster in the employer's break room or common room.
- **Diagnostic Networks:** Insurers may require injured workers to use their facility network for diagnostic tests (except in a medical emergency). Workers should tell their providers if the insurer has this requirement.



***Medical Treatment  
Guidelines (MTGs)***

# Medical Treatment Guidelines (MTGs) overview

## What are the MTGs?

- The Board's *New York Medical Treatment Guidelines (MTGs)* are the standard of care for treating individuals with work-related injuries and illnesses in New York State and are based on the best available medical evidence and the consensus of experienced medical professionals.
- There are 16 in total, covering the most common/frequent injuries and illnesses.
- The *MTGs* apply to all providers treating injured workers within the workers' compensation system – whether a provider is Board-authorized or not – as the standard of care for the treatment of injured workers.
- The *MTGs* are available for download from the Board's website.

# *Medical Treatment Guidelines (MTGs) Overview*

## Why are there medical treatment guidelines?

- Medical treatment guidelines were created to ensure that injured workers get the best medical care for their injury or illness.
- Medical treatment guidelines can reduce red tape because the overwhelming majority of the recommended treatments are pre-approved.

# Medical Treatment Guidelines (MTGs) Overview

## Care outside of New York State

- Injured workers can continue to receive medical care for a claim even if they are outside New York State. Treatment provided out of state must be consistent with the recommendations in the *MTGs*.



# Prior Authorization Requests (PARs)

## What is a PAR?

- A PAR is a request by an injured worker's health care provider to obtain prior approval from the insurance carrier to cover costs associated with a specific treatment under workers' compensation insurance. There are several categories of treatment that require prior authorization.

# Prior Authorization Requests (PARs)

Some procedures within the *MTGs* require pre-authorization.

- Procedures within the *MTGs* that require pre-authorization include, but are not limited to:
  - Most spinal surgeries and implantable spinal cord stimulators
  - Electrical bone growth stimulators
  - Osteochondral autografts and autologous chondrocyte implantation
  - Knee arthroplasty (total or partial knee joint replacement) and meniscal allograft transplantation
  - Peripheral nerve stimulation





# Getting Medication for an Injury or Illness

# Drug Formulary

- Legislation enacted in April 2017 required the Board to establish a drug formulary.
- The *New York Workers' Compensation Drug Formulary* is based on a medication's effectiveness and appropriateness for the treatment of illnesses and injuries covered under the Workers' Compensation Law.
- The *Drug Formulary* drug list designates drugs as either "Phase A," "Phase B," or "Perioperative."
  - Some drugs are listed as second-line therapy (2nd line) and may only be used when other drugs associated with the condition and the phase of treatment have been deemed ineffective.
  - Drugs not listed on the *Drug Formulary* are considered non-formulary.
- *Formulary* drugs, prescribed appropriately, do not require prior authorization.

# Getting medication

## Pharmacies

- Injured workers can use any pharmacy, unless the workers' compensation insurance carrier or self-insured employer uses an independent pharmacy, pharmacy network, or pharmacy benefit manager (PBM).
  - Workers should let the pharmacist know that they have a workers' compensation case.

# Getting medication

## Independent pharmacy, pharmacy network, or PBM

- If an insurer or self-insured employer uses an independent pharmacy, pharmacy network, or PBM, the pharmacy/pharmacies should be within a reasonable distance from an injured worker's home or employment, or offer mail order service.
- Workers can purchase the medication(s) elsewhere if there is a medical emergency and it is not reasonably possible to immediately obtain the medicine they need from the pharmacies in the chosen network.



# Getting medication

## Pain management

- Opioid pain medications such as OxyContin, Percocet, and Vicodin, among others, have serious side effects, can reduce an individual's ability to function, and are highly addictive.
- High-risk patients who are deemed appropriate for chronic opioid treatment should be treated by (or in consultation with) a physician specializing in addiction medicine.
- Referral to a physician specializing in addiction medicine or to a pain specialist and/or an inpatient/outpatient medically assisted detoxification program (or to a hospital emergency department, if needed) should be made for complicated withdrawal symptoms.

# Getting medication

## Substance abuse support services

- We encourage injured workers to reach out for help if they are struggling with substance abuse.
- Workers should speak with their physician about any opioid pain medication concerns.
  - Patients with a history of substance abuse or other psychosocial risk factors should be co-managed with a physician specializing in addiction medicine.
- Workers' compensation insurance will pay for treatment if it is recommended by a judge or approved by the workers' compensation insurance carrier.
- The Board has social work services available to provide additional support.



**Return to Work**

# Return to work

- After a work related injury or illness occurs, the Board's ultimate goal is helping injured workers return to work and resume, as closely as possible, their everyday lives.





# Return to work

## Degree of disability and labor market attachment

- When treating an injured worker, a board-authorized provider will determine a degree of disability (e.g., total, partial, etc.), which will dictate the level of benefits administered and type work injured workers can return to.
- Injured workers need to maintain labor market attachment while receiving treatment.
  - An injured worker is considered to be attached to the labor market if they are found to be making reasonable efforts to obtain gainful employment that is consistent with their medical restrictions.
- An injured worker must be cleared by their provider prior to returning to work.

# Return to work

## Light duty

- One means of helping injured workers get back to work faster is assigning them with light-duty work.
  - Light duty generally refers to work that is less physically or mentally demanding than their regular job duties.
- Employers may provide transitional work duties based on a worker's medical provider assessment and what they've been cleared to do. Injured workers should speak with their employer about any work that may be available while they heal.

# Return to work

## Vocational rehabilitation

- Vocational rehabilitation can help if a disability prevents an injured worker from returning to their usual job.
  - Board counselors can help find employment that fits a worker's specific abilities.
  - They also help develop a plan for returning to work.
  - This may include vocational counseling and referrals for training and selective job placement.

# Return to work

## Contact the Vocational Rehabilitation team

- For questions on vocational rehabilitation and/or return to work assistance, please contact **(877) 632-4996**.
- General questions on vocational rehabilitation services can also be directed to: [VocRehab@wcb.ny.gov](mailto:VocRehab@wcb.ny.gov)



# Return to work

## Social work

- Board social workers can help injured workers cope with their disability and discuss concerns about rehabilitation.
- Board social workers can also assist when family or financial problems interfere with returning to work.
  - This may include advocating with creditors, such as landlords or utility companies, providing referrals for social services, including food and heating assistance programs, and referrals for counseling and treatment.

# Return to work

## Contact the Social Work team

- For questions regarding social work assistance, please contact **(877) 632-4996**.
- General questions on social services can also be directed to: [SocialWorkers@wcb.ny.gov](mailto:SocialWorkers@wcb.ny.gov)
- For comprehensive return to work information, please visit: <https://www.wcb.ny.gov/returntowork/>.

# Contact Information

## Medical Director's Office

**TELEPHONE:** (800) 781-2362

**EMAIL:** [mdo@wcb.ny.gov](mailto:mdo@wcb.ny.gov)

**WEBSITE:** [wcb.ny.gov](http://wcb.ny.gov)

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**Thank you**

**Questions?**