

OMBUDS OFFICE

# 2021 Annual Report



**Columbus Office**  
30 West Spring St., L1  
Columbus, OH 43215-2256  
800-335-0996  
Fax 877-321-9481



**Ombuds  
Office**

An Independent Service of  
Ohio's Workers' Comp System

**Cleveland Office**  
615 W Superior Avenue, L6  
Cleveland, OH 44113-1889  
800-335-0996  
Fax 877-321-9481

# Table of Contents

<b>Message from the Chief Ombudsperson</b> .....	2
<b>About the Ombuds Office</b> .....	4
<b>Ombuds Office Workflow</b> .....	6
<b>Ombuds Office Case Stories</b> .....	7
<b>2021 Statistical Information Summary</b> .....	13
<b>Ombuds Office 2021 Statistics</b>	
Method of Customer Contact.....	14
Cases by Customer Type .....	15
Cases by Type of Employer .....	16
Cases by Issue Type .....	17
Issue Report - Ombuds Complaints .....	18
Causation and Accountability Reports .....	20
Year-to-Year Comparison .....	21
Issue Report—Ombuds Inquiries .....	22
Issue Report - Other Inquiries .....	24
<b>2021 Administrative Update</b> .....	26
<b>Ombuds Office Table of Organization</b> .....	29
<b>Expenditure Report</b> .....	30
<b>Ohio Workers' Compensation Statistics:</b>	
Industrial Commission .....	31
Bureau of Workers' Compensation .....	32
<b>Industrial Commission Nominating Council</b> .....	34

## Message from the Chief Ombudsperson



December 6, 2022

Industrial Commission  
Nominating Council

Dear Council Members:

I am pleased to present the Ombuds Office Annual Report for calendar year 2021 (CY2021). In accordance with Ohio Revised Code section 4121.45, this report provides a statistical summary of the activity of the Ombuds system from CY2021. Ombuds Office staff again continued to perform our mission of assisting injured workers (IW) and employers in matters dealing with the Bureau of Workers' Compensation (BWC) and the Ohio Industrial Commission (IC).

2021 was a busy and productive year; of the 5,112 customer contacts handled by our office, we categorized 261 as complaints, based on the customer expressing dissatisfaction with BWC or IC. These complaint contacts came from the following sources:

- Injured workers (or their representatives) 71 percent;
- Employers (or their representatives) 16 percent;
- Other 13 percent.

Of the remaining 4,851 customer contacts, we categorized 1,974 as Ombuds inquiries and 2,877 were categorized as other inquiries. These contacts came from the following sources:

#### Ombuds inquiries

- Injured workers (or their representatives) 72 percent;
- Employers (or their representatives) 19 percent;
- Other 9 percent.

#### Other inquiries

- Employers (or their representatives) 77 percent;
- Injured workers (or their representatives) 17 percent;
- Other 6 percent.

In 2014 we developed a new approach to collect data and describe the issues presented to the office. Information about our customer contacts is critical in order to identify patterns, trends, and opportunities for improvement of the workers' compensation system. Reports since 2014, reflect the new, more robust approach to data collection and provide new detail related to all customer contacts to the Ombuds Office.

2021 was a year of rapid change and much unpredictability everywhere and neither the Ombuds Office nor the workers' compensation system were excluded from that change and unpredictability.

In March 2020, all state employees began working from home and staff needed to innovate in order to continue to meet the needs of customers. Ombuds Office staff was able to swiftly develop new processes to ensure minimal disruption to the way we serve customers. The Ombuds Office also quickly developed new codes in order to track the pandemic impact on the workers' compensation system.

Customer outreach and education remained a priority for 2021 despite the logistical challenges. I presented virtually at various workers' compensation seminars and I continued ongoing communication with BWC and IC staff in order to make sure there is a clear understanding of the service provided by the Ombuds Office.

Finally, we have maintained membership with the International Ombudsman Association (IOA) whose mission is to support and advance the ombudsman profession and ensure that practitioners work to the highest professional standards. The IOA provides a set of professional and ethical principles to which members adhere in their ombudsman practice. These principles reflect a commitment to promote ethical conduct in the performance of the ombudsman role and to maintain the integrity of the ombudsman profession – independence, neutrality, impartiality, confidentiality and informality. We also belong to the United States Ombudsman Association whose purpose is to assist existing ombudsmen and ombudsman organizations in improving the operation of ombudsman offices throughout the United States.

Once again, all Ombuds staff faithfully continued to perform their work and resolve issues for our customers. They deserve commendation for their continued dedication and hard work.

I appreciate the confidence placed in me by this nominating council and look forward to a productive 2022.

Sincerely,



Beryl Piccolantonio  
Chief Ombudsperson

## About the Ombuds Office

The Ohio General Assembly established a workers' compensation ombudsperson system, which has been in place since the 1970s (ORC 4121.45). The Ombuds Office is a neutral and independent resource available to employers, injured workers, and their representatives, to assist with problems navigating and questions arising out of the Ohio workers' compensation system. We answer inquiries and investigate complaints about the workers' compensation system, facilitating resolution of issues when possible. We capture, categorize and analyze inquiry and complaint data to identify areas of potential concern in the workers' compensation system. This information is published annually.

### § 4121.45 Ombudsperson system.

- A. There is hereby created a workers' compensation ombudsperson system to assist claimants and employers in matters dealing with the bureau of workers' compensation and the industrial commission. The industrial commission nominating council shall appoint a chief ombudsperson. The chief ombudsperson, with the advice and consent of the nominating council, may appoint such assistant ombudspersons as the nominating council deems necessary. The position of chief ombudsperson is for a term of six years. A person appointed to the position of chief ombudsperson shall serve at the pleasure of the nominating council. The chief ombudsperson may not be transferred, demoted, or suspended during the person's tenure and may be removed by the nominating council only upon a vote of not fewer than nine members of the nominating council. The chief ombudsperson shall devote the chief ombudsperson's full time and attention to the duties of the ombudsperson's office. The administrator of workers' compensation shall furnish the chief ombudsperson with the office space, supplies, and clerical assistance that will enable the chief ombudsperson and the ombudsperson system staff to perform their duties effectively. The ombudsperson program shall be funded out of the budget of the bureau and the chief ombudsperson and the ombudsperson system staff shall be carried on the bureau payroll. The chief ombudsperson and the ombudsperson system shall be under the direction of the nominating council. The administrator and all employees of the bureau and the commission shall give the ombudsperson system staff full and prompt cooperation in all matters relating to the duties of the chief ombudsperson.
- B. The ombudsperson system staff shall:
1. Answer inquiries or investigate complaints made by employers or claimants under this chapter and Chapter 4123. of the Revised Code as they relate to the processing of a claim for workers' compensation benefits;
  2. Provide claimants and employers with information regarding problems which arise out of the functions of the bureau, commission hearing officers, and the commission and the procedures employed in the processing of claims;
  3. Answer inquiries or investigate complaints of an employer as they relate to reserves established and premiums charged in connection with the employer's account;
  4. Comply with Chapter 102. and sections 2921.42 and 2921.43 of the Revised Code and the nominating council's human resource and ethics policies.
  5. Not express any opinions as to the merit of a claim or the correctness of a decision by the various officers or agencies as the decision relates to a claim for benefits or compensation.

For the purpose of carrying out the chief ombudsperson's duties, the chief ombudsperson or the ombudsperson system staff, notwithstanding sections 4123.27 and 4123.88 of the Revised Code, has the right at all reasonable times to examine the contents of a claim file and discuss with parties in interest the contents of the file as long as the ombudsperson does not divulge information that would tend to prejudice the case of either party to a claim or that would tend to compromise a privileged attorney-client or doctor-patient relationship.

C. The chief ombudsperson shall:

1. Assist any service office in its duties whenever it requires assistance or information that can best be obtained from central office personnel or records;
2. Annually assemble reports from each assistant ombudsperson as to their activities for the preceding year together with their recommendations as to changes or improvements in the operations of the workers' compensation system. The chief ombudsperson shall prepare a written report summarizing the activities of the ombudsperson system together with a digest of recommendations. The chief ombudsperson shall transmit the report to the nominating council.
3. Comply with Chapter 102. and sections 2921.42 and 2921.43 of the Revised Code and the nominating council's human resource and ethics policies.

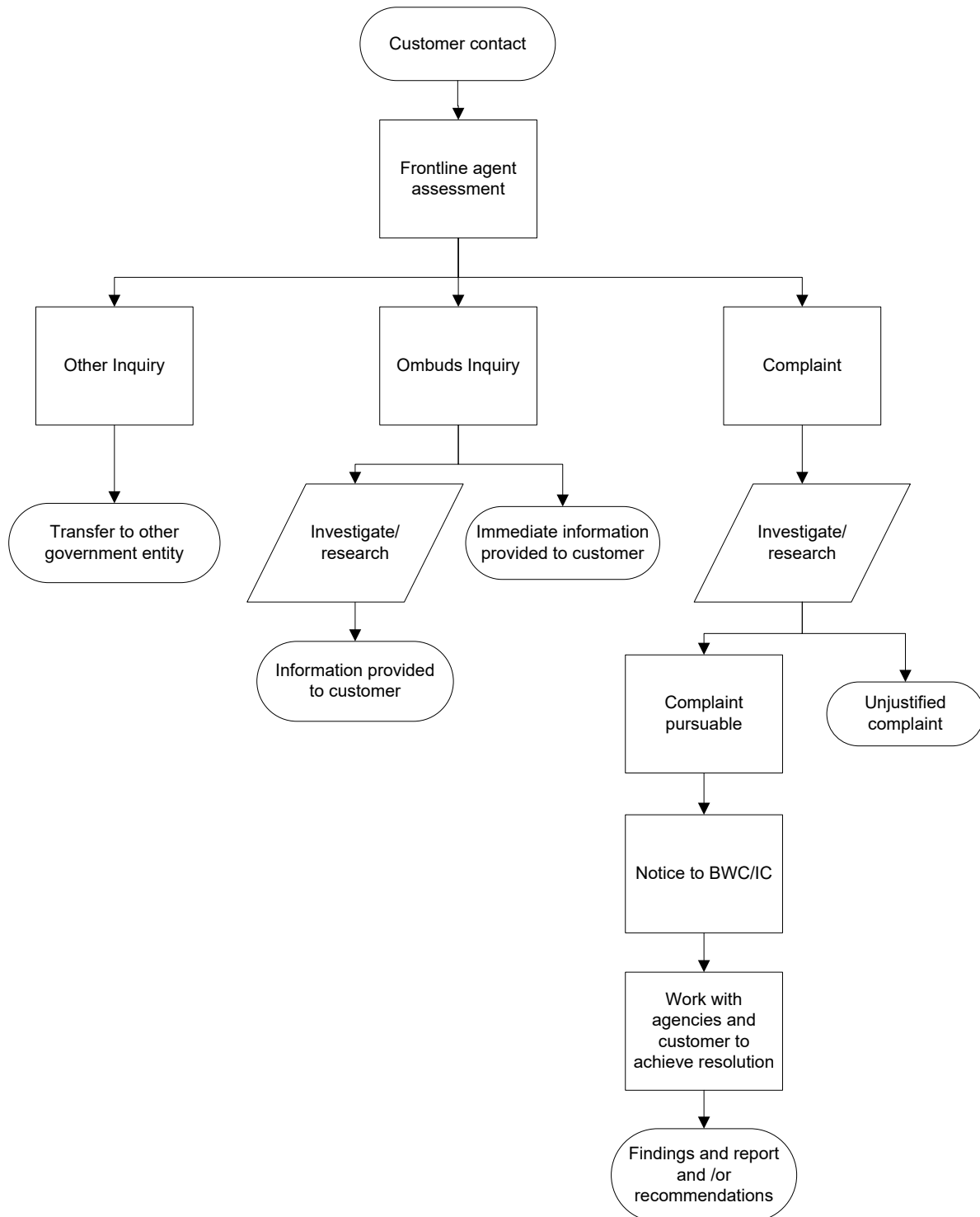
D. No ombudsperson or assistant ombudsperson shall:

1. Represent a claimant or employer in claims pending before or to be filed with the administrator, a district of staff hearing officer, the commission, or the courts of the state, nor shall an ombudsperson or assistant ombudsperson undertake any such representation for a period of one year after the ombudsperson's or assistant ombudsperson's employment terminates or be eligible for employment by the bureau or the commission or as a district or staff hearing officer for one year;
2. Express any opinions as to the merit of a claim or the correctness of a decision by the various officers or agencies as the decision relates to a claim for benefits or compensation.

E. The chief ombudsperson and assistant ombudspersons shall receive compensation at a level established by the nominating council commensurate with the individual's background, education, and experience in workers' compensation or related fields. The chief ombudsperson and assistant ombudspersons are full-time permanent employees in the unclassified service of the state and are entitled to all benefits that accrue to such employees, including, without limitation, sick, vacation, and personal leaves. Assistant ombudspersons serve at the pleasure of the chief ombudsperson.

F. In the event of a vacancy in the position of chief ombudsperson, the nominating council may appoint a person to serve as acting chief ombudsperson until a chief ombudsperson is appointed. The acting chief ombudsperson shall be under the direction and control of the nominating council and may be removed by the nominating council with or without just cause.

# Ombuds Office Workflow



## Ombuds Office Case Stories

The sampling of case stories below represents the variety of complaints and issues our customers brought to us in 2021.

### **Please help us fix this!**

An employer contacted the Ombuds Office because they received notification that they had been rejected from the group rating program due to a lapse in coverage. The employer explained that they have two different policies and when they last submitted payment to BWC, they submitted a check along with a note indicating how much was to be applied to each policy. BWC incorrectly applied the entire payment to one policy. The employer stated that they contacted BWC several times to request the misapplied payment be corrected, but it did not happen. The employer said they eventually made a duplicate payment to bring the policy back into good standing and requested a fee waiver for the lapsed payment. The employer said they were told to complete a *Request for Retroactive coverage and Penalty Abatement or Waiver of Payroll True-Up Penalties* form. The employer explained that they completed the form and attempted several times to fax it to the number indicated, but the fax would not go through. They called BWC and were given a different fax number, but that was also unsuccessful. After being told they could not email the form or submit any other way, they called our office.

Ombuds Office staff worked with the employer to file an employer complaint. Once the BWC reviewed the employer complaint, the employer was granted their request for penalty abatement and placed back into the Group Experience Rating program.

### **He needs this treatment!**

An IW's attorney contacted the Ombuds Office about his client who is a firefighter with a claim allowed for prostate cancer and right renal cell carcinoma. The attorney explained that the IW and his doctor wanted to attempt the least invasive treatment procedure available and requested a procedure called High-Intensity Focused Ultrasound (HIFU). However, the request for treatment had been pended for approximately six months. The attorney explained that initially, the managed care organization (MCO) and BWC said the procedure was experimental even though the FDA has approved HIFU for the treatment of prostate cancer. Next, the MCO and/or BWC interrogated the IW's treating urologist who would perform the HIFU procedure about his experience, training, and the facility at which the procedure would be performed. The IW and attorney were told that the facility involved refused to become a BWC certified facility, but when the attorney contacted the owner of the facility, the owner said he had never been contacted by the BWC and would have no issue with becoming BWC certified.

Ombuds Office staff began researching the claim and reached out to the MCO for an update on the status of the treatment request. Soon after reaching out, the IW's attorney called back and said that the MCO contacted the IW and said that the treatment request was being transferred to the maintenance section at the MCO because of the length of processing time which meant that essentially, the request would need to be resubmitted. Additionally, the attorney said that the IW's urologist stated that if the procedure is not completed within the next month his cancer will transition from being treated in the early stage to a more complicated and dangerous stage.



Ombuds staff next reached out to the BWC staff who works with the MCO, and it was determined that at this point, it would be best if the provider submitted a new request for the HIFU procedure. BWC staff explained that they would make sure the request was quickly sent for a physician review, but explained that despite the FDA approval, she was not sure it would meet BWC's criteria for approval. Ultimately, BWC denied the treatment request, but the IW was able to get it approved after a hearing at the IC.

A couple months later, the IW's attorney contacted the Ombuds Office again because the cancer treatment company would not fully commit to the services until it received confirmation of the amount the BWC will pay for the procedure. The provider indicated that the cost for the procedure is \$25,000.00 and the attorney pointed out that since the BWC has never approved an HIFU procedure, he had lots of questions about how BWC was determining what it was willing to pay.

Ultimately, the IW switched providers to one recommended by the MCO and the new provider recommended that the HIFU procedure would no longer work because the cancer had progressed too far. The IW ended up undergoing surgery and is now in remission.

### **Why does this keep happening?**

An IW's attorney contacted the Ombuds Office with concerns about how the BWC was handling a request for home healthcare for his client who is statutorily permanently and totally disabled (PTD) and has quadriplegia. The attorney explained that the IW previously had a hearing at the Industrial Commission where she was ultimately successful in getting home healthcare authorized for 12 hours per day 7 days a week, but that the MCO was now denying an extension of that care.

Ombuds Office staff reviewed the claim and saw that at the onset of her claim, the IW had been approved for home healthcare for 15 hours per day, but that gradually the time was reduced to 12 hours. The MCO sent the most recent request for 12 hours out for a physician review and the reviewing doctor opined that only 8 hours was needed. The attorney appealed the denial and was already scheduled for an IC hearing, so Ombuds staff determined to wait and see what the outcome of the hearing was.

Once the IC granted the request for the full 12 hours of home healthcare again, Ombuds staff reached out to BWC staff to discuss the issue with them. Ombuds staff conveyed the attorney's concerns including that the IW's condition was not likely to change, that the IW is only 24 years old and that her mother was told by staff at the MCO that the goal of the MCO is to reduce home healthcare to just a couple hours per day. The IW's mother is very concerned about her daughter's quality of life if this happens.

BWC staff reached out to the MCO case manager and the catastrophic program coordinators and decided to contract with a BWC certified provider to obtain a catastrophic case management plan (CCMP). The CCMP is a tool to assist with the ongoing medical management of a catastrophic injury and provides a comprehensive plan with information about the IW's abilities, her daily activities, and recommendations for medical services, rehabilitation, medical equipment, supportive care needs, and other relevant factors.

Several months later, the IW's attorney contacted the Ombuds Office again and said that the CCMP assessment was still not complete, and that the IW was again being denied a request for home healthcare. Ombuds Office staff reached back out to BWC staff and was told that the CCMP was not complete because the MCO was not timely providing the information to the provider who was completing the plan. BWC staff worked with the MCO to put together a packet of information and directed the MCO to approve 12 hours per day until the CCMP is completed.

The CCMP was completed in October 2021 and, among other recommendations, the plan recommended 24x7 care for the IW. Currently, the IW's family provides 12 hours of care and the IW is approved to receive 12 hours per day of home healthcare through the MCO.

### **I need this rebate!**

An employer contacted the Ombuds Office and was upset because he was told by BWC that he did not qualify for a rebate because his true-up report was late. The employer explained that he filed his true-up report on the day it was due, but it did not get uploaded into BWC's system until the following Monday. The employer did not think he should be penalized based on the length of time BWC's system took to upload a document when he complied with the deadline. Ombuds staff reached out to the BWC and was told the only option this employer had was to file an *Application for Adjudication Hearing* form (Legal-15) to request a hearing. The BWC held a hearing and ultimately granted the employer the rebate, finding that the true-up report was filed timely.

### **This is not working.**

The Ombuds Office was contacted by an IW attorney who described significant frustration with the IC's interpreter services. The attorney described that this vendor was used a lot by the IC but often did not actually send an interpreter to the scheduled hearing resulting in the hearing needed to be canceled.

Ombuds Office staff reached out to staff at the IC and learned that because of the contract the agency has with the company, they must be given first offer when interpreter services are needed for a hearing. In follow-up with the IC several months later, the Ombuds Office learned that the IC decided to contract with a different interpreter services company following the expiration of the prior contract.

### **What are my rights?**

An IW reached out to the Ombuds Office with some general questions. They did not want to provide any identifying information because they feared retaliation from their employer. They described that they had reached maximum medical improvement but still have injury-related restrictions that prevent them from returning to their former position of employment. They also said that they are near retirement age and worked for their company for nearly 30 years. The IW wondered if they would be required to accept any job offered for any shift and whether resigning from their employer meant they would forfeit any future benefits.

Ombuds Office staff explained to the IW that communication with our office is confidential and that it would be helpful to be able to look at the claim. Additionally, staff explained that often in these situations, vocational rehabilitation with living maintenance compensation benefits is part of the plan and gave detailed information about how that works. Eventually, the IW did provide a claim number, but since the employer was self-insuring and since the IW had not yet had any hearings, most of the claim documents were not in the BWC system. After much conversation with the IW and his wife, the IW eventually hired an attorney and filed a self-insured complaint.

### **My client needs help.**

An attorney for an employer contacted the Ombuds Office with several questions related to her client's delayed filing of a payroll report. The attorney explained that the employer recently realized that due to several pandemic related circumstances, one of their payroll reports was not filed timely. As soon as it

was discovered, the employer filed the report, but the employer was then told they are not eligible to receive several of the dividend payments the BWC and the Governor approved for businesses. The attorney indicated she understood that OAC 4123-24-03 (A)(4) and (B) allows for a one-time waiver of penalties for a violation of the filing deadline of a payroll, but she requested help from Ombuds staff to navigate.

Ombuds Office staff reviewed the policy and sent the attorney a *Request for Retroactive Coverage and Penalty Abatement* form (U-59) for review and completion. Ombuds staff explained that after the BWC processed their request, the Ombuds Office could inquire about the rebates to see if the employer now qualified for them. After discussing with the employer, the attorney talked with her client and realized that the employer already filed a U-59 with the assistance of a third-party administrator who no longer works for them. Ombuds staff was able to search and find that the form had been filed, denied, set for an adjudication hearing, and then dismissed at the request of the employer. The attorney was able to verify with the employer that they dismissed in order to gather proof, but that they were confused because it did not seem that one-time forgiveness, even if granted, would allow them to receive the dividends, which amounted to nearly \$500,000.

Ombuds Office staff reached out to BWC Employer Services staff to inquire about the eligibility for dividend and was told that, in other cases, the Adjudication Committee has been upholding the decision from the BWC finance department that one-time forgiveness does not result in eligibility for rebates or dividends. The Adjudication Committee was basing their decision on their interpretation of OAC that eligibility is determined based on the snapshot date regardless of a grant of one-time forgiveness.

About one month later, Governor DeWine requested the BWC to expand their eligibility for rebate/dividends to include policy holders that were unable to meet the snapshot deadline so the practice was changed and this employer ultimately received the rebate.

### **Can you help?**

An IW's attorney contacted the Ombuds Office requesting urgent help for their client who is PTD and whose benefit payments had stopped while a settlement was being finalized. The attorney explained that it appeared the BWC was still trying to obtain the employer's agreement on the DWRF amount, but the attorney was not sure because there was no documentation or explanation in the claim notes.

Ombuds Office staff reached out to the BWC settlement team to inquire whether the IW's attorney could pick up a settlement check and was told that the settlement agreement was, in fact, still waiting for the employer's signature. Ombuds staff was told that the matter was being handled by staff from the BWC legal team and that the settlement could not be released until it was resolved. Ultimately, the signature was obtained and Ombuds Office staff helped ensure that the payments were released promptly and available for in-person pick up.

### **This is unjustified!**

Ombuds Office staff received a call from an IW's psychologist who was upset because he believed BWC's decision to deny vocational rehabilitation to the IW was based on his records. The doctor felt that the order was an unjustified attack on his professional reputation. The order stated that vocational rehabilitation was denied because of a "lack of psychological provider support."

Ombuds Office staff reached out to the MCO in order to gain understanding about the wording of the order. MCO staff said they were unsure and suggested reaching out to the vocational rehabilitation team. Ombuds staff was told by a member of the vocational rehabilitation team that the psychologist did not return the vocational rehabilitation form and that the wording in the BWC order reflected that, but they offered to reach out to the psychologist directly to explain. The psychologist told Ombuds Office staff that he was unwilling to have a conversation until BWC issued a written retraction of the statement.

Ombuds Office staff also let the psychologist know that the IW filed an appeal to the order and still needed the form to be completed. The psychologist asked that a call be made to his office manager who acknowledged that the form had been sent to her by MCO or BWC staff, but that she had not submitted it because she was waiting for the psychologist to provide her with direction. In follow-up conversation with the psychologist, he said that although he was unaware of the form, he had previously told his office manager that he did not agree with vocational rehabilitation. Ombuds Office staff let the psychologist know that a retraction would not be issued because he and his staff did not return the form, but said feedback would be provided to the BWC MCO business unit urging more specificity in the wording of orders.

### **Can BWC create a fast track?**

A staff member from an MCO contacted the Ombuds Office and asked if anyone from BWC has ever considered creating a fast track for processing requests for additional allowance when surgery is being recommended. The MCO staff explained that she has seen many instances where surgery is delayed in order to process at least one additional allowance request. She said that often, the delay in needed surgery seems to result in a worse outcome than may have occurred if surgery had been performed sooner. She wondered if BWC could create a faster process track for additional allowance requests that are made and a surgery request is pending.

Ombuds Office staff inquired if she could offer any specific examples and she provided two from her current case load. In one claim, the IW was injured in September 2020 and had an MRI in early November of that same year. Surgery was recommended, and the MRI showed a couple additional issues for repair. A request for these additional allowances was made right away, but not fully processed and added to the claim until January 2021. The IW was not able to have surgery until February 2021 and, is still off work because recovery has been difficult.

In the other example provided, the IW was injured in August 2019 and had an MRI in September of that same year. Surgery was recommended, but the MRI showed an additional condition for repair which was requested immediately. The additional condition was added to the claim in mid-November 2019 and surgery was finally performed mid-April 2021. The IW did not return to work full duty until August 2021 but has some complications because of the delay in surgery so will need another surgery soon.

### **My doctor won't see me!**

Ombuds Office staff received a call from an IW who was upset because her doctor told her they could no longer see her because the BWC owes them over \$1,000. Ombuds Office staff reached out to the BWC claims staff to let them know about the phone call and explain that the IW believes the source of the issue is that her BWC ID card was mailed to the wrong address without any follow-up from BWC. BWC claims staff agreed with the IW's understanding of the problem and said that the MCO should have attempted to resolve the billing issue.

BWC staff reached out to the MCO and explained the situation. They said the bills were not paid because they were not coded correctly by the provider's office. BWC staff directed MCO staff to reach out to the provider's office to walk them through what was needed to resubmit the bills and to explain that they could treat the IW because the billing issue would be resolved. The IW continues to treat with this provider.

### **Can you help my employee?**

A self-insuring employer reached out to the Ombuds Office to ask if we could help his employee who has an allowed claim with approved physical therapy treatment but was turned over to a collection agency because the provider was balance billing him for services provided. Ombuds Office staff agreed to investigate the situation and reached out to staff from BWC Provider Relations. Staff from BWC Provider Relations reached out to the provider who insisted the bills were for services not approved under the claim. Ombuds Office staff reached back out to the employer and to the IW who both said that the bills were for services approved under the claim. Ombuds Office staff next reached out to the self-insured complaint department who agreed to send a letter to the provider explaining the law and including applicable code sections. Ultimately, the provider retracted the bills and contacted the collection agency to withdraw the referral.

## 2021 Statistical Information Summary

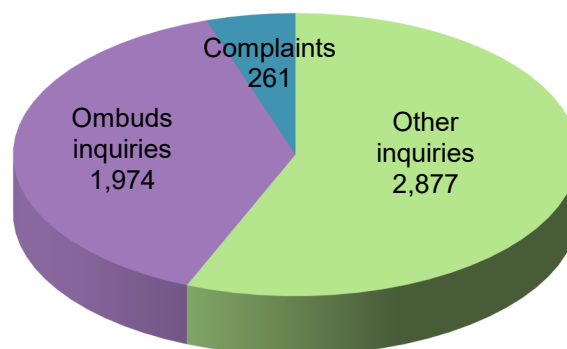
We processed 5,112 customer contacts in 2021. Our staff investigates and researches customer contacts to determine whether a case should be opened. The office classifies contacts as either a complaint (261), an Ombuds inquiry (1,974) or as an other inquiry (2,877). We classify a case as a complaint when a customer expresses dissatisfaction with the Ohio workers' compensation system. The most frequent complaints brought to our office for resolution include:

- BWC processing delays;
- Employer concerns related to their policy accounts receivable balance;
- Non-payment of treatment bills;
- Payment of indemnity benefits to injured workers.

In 2014, we began capturing information related to general inquiry contacts and added several new categories of issues to have a more complete picture of the type of issues that are presented. This additional information allows us to identify trends in order to make recommendations.

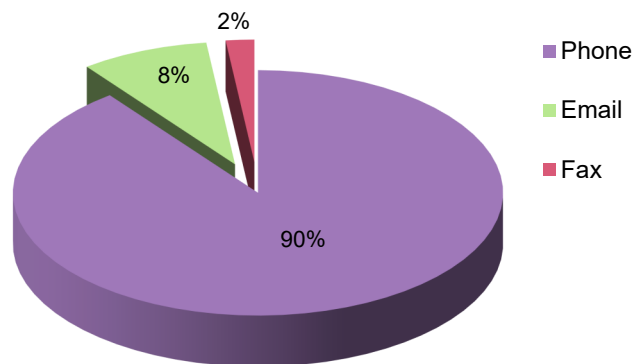
We deem a case to be an Ombuds inquiry when one of our staff directly provides the information requested by the customer and a complaint was not involved. The issues we receive the most inquiries about include employer policy coverage, accounts receivable balance and questions about canceling policy coverage. Additional frequent Ombuds inquiry issues include questions about the claim process and party rights, questions about forms required for various requests, questions about the IC hearing process, and questions about requirements for various types of compensation.

Finally, we receive a number of contacts that we do not open as Ombuds cases because the information requested is more properly obtained elsewhere. We determine quickly if another state agency can more appropriately assist a customer and we provide the proper contact information.



## Method of Customer Contact

We processed 5,112 customer contacts during 2021, which we received by the methods below.

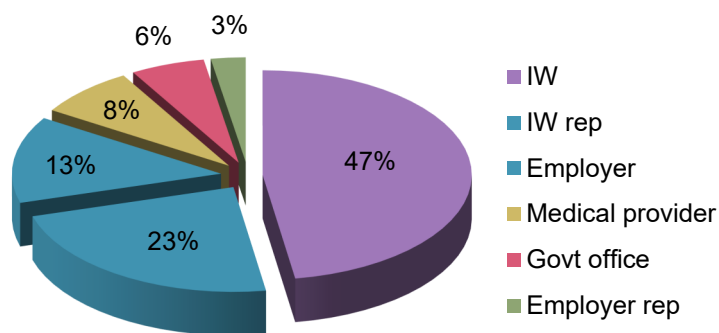


Contact Method	
Phone	4,583
Email	433
Fax	96
Total	5,112

Note, the Ombuds Office was not open for in-person contact in 2021.

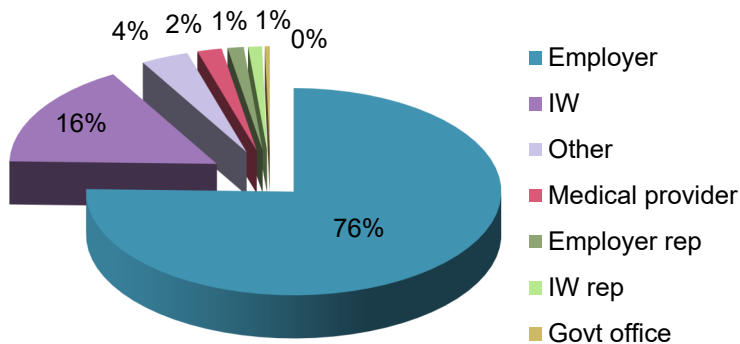
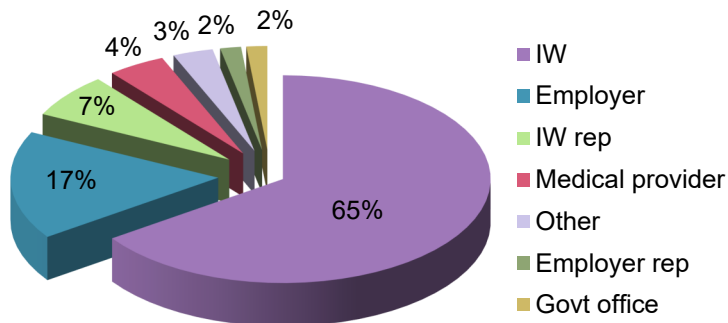
## Cases by Customer Type

The charts below identify the customer type for each of the types of cases received: complaints, Ombuds inquiries and other inquiries.



Customer Type	Count
Injured worker	124
Injured worker representative	60
Employer	35
Medical provider	20
Government office	15
Employer representative	7
<b>Total</b>	<b>261</b>

Customer Type	Count
Injured worker	1,290
Employer	333
Injured worker representative	136
Medical provider	89
Other	62
Employer representative	32
Government office	32
<b>Total</b>	<b>1,974</b>

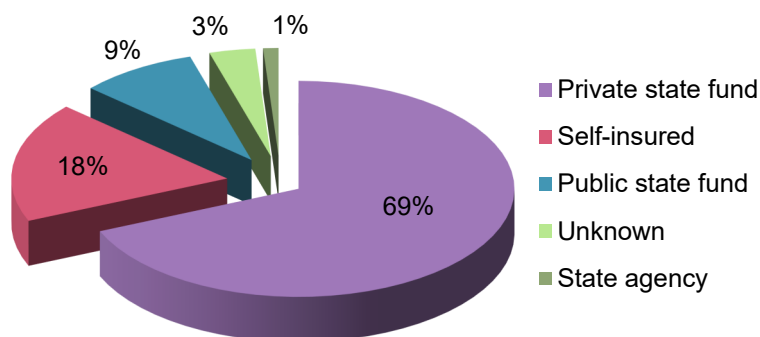


Customer Type	Count
Employer	2,169
Injured worker	468
Other	107
Medical provider	55
Employer representative	36
Injured worker representative	31
Government office	11
<b>Total</b>	<b>2,877</b>



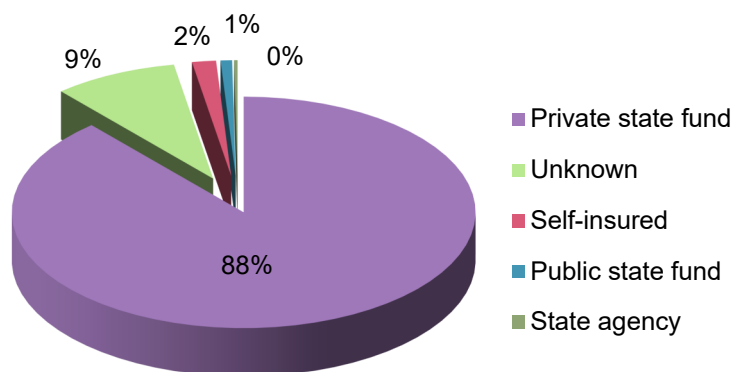
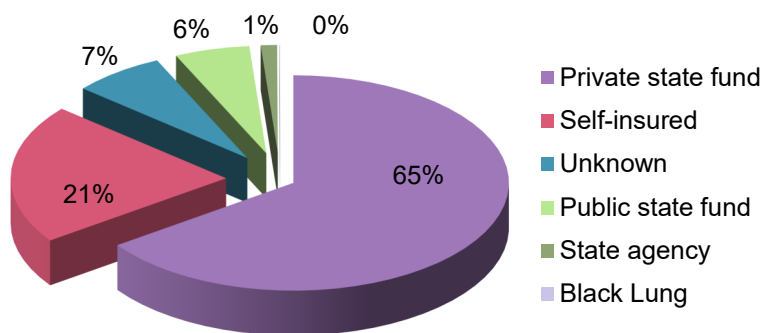
## Cases by Type of Employer

The charts below identify the employer type for each of the types of cases received: complaints, Ombuds inquiries and other inquiries.



Employer Type	Count
Private state fund	179
Self-insured	47
Public state fund	23
Unknown	9
State agency	3
<b>Total</b>	<b>261</b>

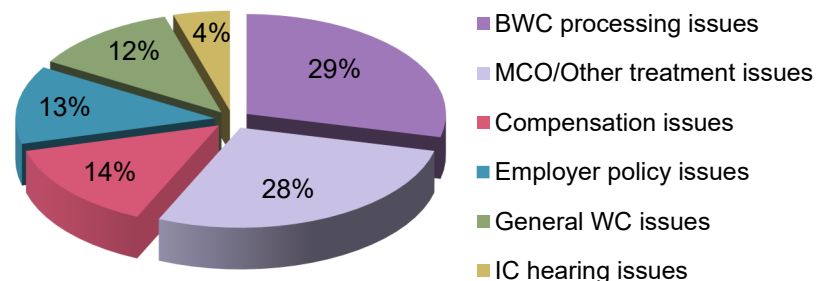
Employer Type	Count
Private state fund	1,287
Self-insured	414
Unknown	137
Public state fund	111
State agency	24
Black Lung	1
<b>Total</b>	<b>1,974</b>



Employer Type	Count
Private state fund	2,549
Unknown	250
Self-insured	48
Public state fund	23
State agency	7
<b>Total</b>	<b>2,877</b>

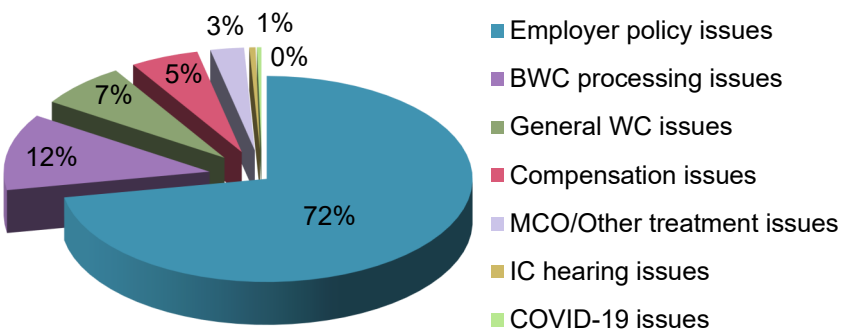
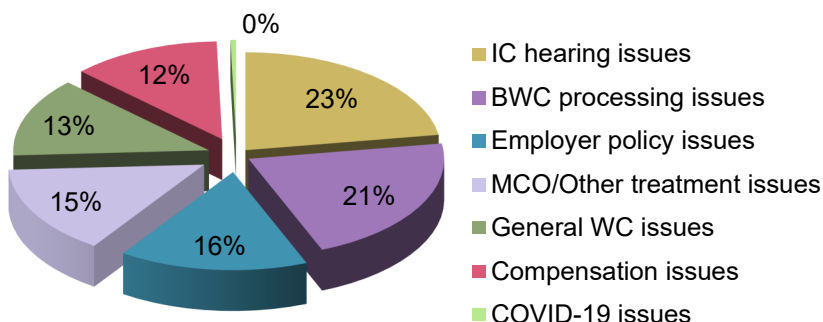
## Cases by Issue Type

The charts below identify the issue type for each of the types of cases received: complaints, Ombuds inquiries and other inquiries.



Complaints by Issue Type	
BWC processing issues	75
MCO/Other treatment issues	73
Compensation issues	37
Employer policy issues	33
General WC issues	31
IC hearing issues	12
<b>Total</b>	<b>261</b>

Ombuds Inquiries by Issue Type	
IC hearing issues	444
BWC processing issues	422
Employer policy issues	308
MCO/Other treatment issues	290
General WC issues	257
Compensation issues	244
COVID-19 issues	9
<b>Total</b>	<b>1,974</b>



Other Inquiries by Issue Type	
Employer policy issues	2,075
BWC processing issues	346
General WC issues	201
Compensation issues	155
MCO/Other treatment issues	76
IC hearing issues	14
Covid-19 issues	10
<b>Total</b>	<b>2,877</b>

## Issue Report - Complaints

The codes below describe what issue our staff determined best described the complaint.

<b>MCO &amp; Other Treatment Issues</b>	
Bills non-payment	19
Authorization of medical treatment	18
ADR	9
Self-insured medical bill	6
MCO staff	5
Vocational rehabilitation	5
MCO form	4
Prescription - prior authorization	3
Prescription - opioids	2
Find physician	2
<b>Total</b>	<b>73</b>

<b>IC Hearing Issues</b>	
Hearing process/Hearing letter	4
Hearing decision	3
Hearing officer	2
Hearing delay	2
IC exam	1
<b>Total</b>	<b>12</b>

<b>BWC Processing Issues</b>	
Claim process	24
Processing delay	18
CSS/MCS	15
BWC E account	7
BWC form	7
Independent medical exam	2
IC hearing referral	1
Website	1
<b>Total</b>	<b>75</b>

<b>General Workers' Compensation Issues</b>	
Self-insured complaint	10
Claim allowance	5
Fraud allegation	4
Additional allowance	4
Medical provider	4
Statute of limitations	3
Attorney/Representative	1
<b>Total</b>	<b>31</b>

## Issue Report - Complaints - continued

The codes below describe what issue our staff determined best described the complaint.

<b>Employer Policy Issues</b>	
Cancel/Sold company	11
Accounts receivable balance	3
Attorney/Representative	3
Coverage	2
Employer invoice	2
Collections	2
Certificate	2
Policy combined/Transferred/Cancelled	2
Rebate/Refund	1
Employer true-up	1
Change of address	1
Audit	1
Employer delay of claim	1
Elective coverage	1
<b>Total</b>	<b>33</b>

<b>Compensation Issues</b>	
Temporary total disability	21
Lump sum settlement	5
Death benefits	3
Permanent total disability/DWRF	2
Wage loss	2
Banking issue	2
Permanent partial disability	1
Travel reimbursement	1
<b>Total</b>	<b>37</b>

## Causation and Accountability Reports - Complaints

These charts denote in further detail what we found to be the problem after investigating the complaint and identifying the responsible entity. Comparison data from prior years is included.

Causation	2019	2020	2021
Unjustified complaint	209	170	125
CSS/MCS	48	27	21
Employer	24	26	21
Unresponsiveness CSS/MCS	2	13	16
Billing issue	8	4	14
MCO	17	13	13
Medical provider	18	17	12
Injured worker	8	9	11
Medical exam/Review required	4	9	6
Claim status	2	4	6
Attorney/Representative	10	5	4
IC	8	7	3
Needs forms or information	8	6	3
Policy services	21	4	3
Website	1	0	2
Wanted claim expedited	2	4	1
Prescription issue	3	3	0
Appeal	1	1	0
Warrant returned or reissued	0	1	0
Overpaid	1	0	0
<b>Total</b>	<b>395</b>	<b>323</b>	<b>261</b>

Accountability	2019	2020	2021
Injured worker	155	138	103
BWC	85	46	45
Employer - state fund	70	52	32
MCO	19	20	29
Medical provider	26	25	24
Attorney/Representative	27	16	14
Employer - Self-insured	11	14	10
IC	0	8	2
Financial institution	0	2	1
Job and Family Services	0	0	1
Pharmacy benefits manager	2	2	0
<b>Total</b>	<b>395</b>	<b>323</b>	<b>261</b>

## Year-to-year comparison - Complaints

The tables below provide a comparison of complaint data for years 2019, 2020, and 2021.

Complaints by Customer Type	2019	2020	2021
Injured worker	220	202	124
Injured worker representative	62	41	60
Employer	72	50	35
Medical provider	14	9	20
Government office	8	20	15
Employer representative	16	1	7
Other	3	0	0
<b>Total</b>	<b>395</b>	<b>323</b>	<b>261</b>

Complaints by Employer Type	2019	2020	2021
Private state fund	277	225	179
Self-insured	70	55	47
Public state fund	30	24	23
Unknown	9	10	9
State agency	9	9	3
<b>Total</b>	<b>395</b>	<b>323</b>	<b>261</b>

Complaints by Issue Type	2019	2020	2021
BWC processing issues	127	80	75
MCO/Other treatment issues	80	66	73
Compensation issues	53	61	37
Employer policy issues	83	42	33
General WC issues	32	33	31
IC hearing issues	20	23	12
COVID-19 issues	NA	18	0
<b>Total</b>	<b>395</b>	<b>323</b>	<b>261</b>

## Issue Report - Ombuds Inquiries

Ombuds staff directly provides information to the customer and there was not a complaint.

<b>Employer Policy Issues</b>	
Cancel/Sold company	86
Coverage	54
Accounts receivable balance	34
Employer true-up	24
Certificate	13
Employer invoice	11
Rebate/Refund	11
Payment issue	11
Policy combined/Transferred/Cancelled	9
Collections	8
Wrong policy number	8
Change of address	7
Lien	7
Employer program	7
Audit	7
Manual code classification	4
Installment payment	3
Amended payroll	2
Elective coverage	1
Rate	1
<b>Total</b>	<b>308</b>

<b>IC Hearing Issues</b>	
Hearing process/Hearing letter	360
Hearing decision	58
IC form	22
Hearing officer	3
Hearing delay	1
<b>Total</b>	<b>444</b>

<b>Compensation Issues</b>	
Temporary total disability	94
Lump sum settlement	32
Permanent total disability/DWRF	20
Banking issue	19
Permanent partial disability	18
Wage loss	17
Death benefits	15
Travel reimbursement	10
AWW/FWW amount	5
Lump sum advancement	5
Violation of specific safety requirements	4
Scheduled loss	3
AWW/FWW delay	1
Salary continuation	1
<b>Total</b>	<b>244</b>

<b>COVID-19 Issues</b>	
Unemployment	2
Claim process	2
General issue	1
Medical appointment	1
Independent medical exam	1
Permanent partial disability	1
BWC appeals	1
<b>Total</b>	<b>9</b>

## Issue Report - Ombuds Inquiries - continued

Ombuds staff directly provides information to the customer and there was not a complaint.

<b>MCO &amp; Other Treatment Issues</b>	
Bills non-payment	84
Authorization of medical treatment	83
Medical provider	33
Find physician	19
Self-insured medical bill	15
Reactivation	13
MCO form	10
Prescription - prior authorization	9
MCO staff	8
Provider policy and fee schedule	5
Prescription - general	4
Prescription - opioids	3
Vocational rehabilitation	2
Provider enrollment	2
<b>Total</b>	<b>290</b>

<b>General Workers' Compensation Issues</b>	
Claim allowance	71
Nonspecific	46
Self-insured complaint	38
Medicare	22
Employer form	20
Additional allowance	17
Attorney/Representative	16
Fraud allegation	11
Safety & Hygiene	6
Statute of limitations	5
Interstate jurisdiction	2
Fee dispute	1
Light duty	1
Labor issue	1
<b>Total</b>	<b>257</b>

<b>BWC Processing Issues</b>	
Claim process	180
BWC form	109
CSS/MCS	58
Processing delay	26
BWC E account	22
Independent medical exam	15
Website	6
Status of form/Application	4
IC hearing referral	2
<b>Total</b>	<b>422</b>



## Issue Report - Other Inquiries

Ombuds staff determines that the information being requested is more properly obtained elsewhere.

Employer Policy Issues	
Payment issue	464
Employer true-up	417
Coverage	266
Cancel/Sold company	181
Certificate	168
Accounts receivable balance	161
Rebate/Refund	94
Employer invoice	94
Change of address	57
Policy combined/Transferred/Cancelled	29
Collections	27
Safety & Hygiene	19
Lien	18
Employer program	16
Installment payment	12
Rate	10
Manual code classification	9
Other state coverage	8
Estimated annual premium	7
Gillion back	5
Wrong policy number	4
Elective coverage	3
Audit	3
MCO	2
Amended payroll	1
<b>Total</b>	<b>2,075</b>

Compensation Issues	
Banking issue	89
Temporary total disability	20
Death benefits	20
Permanent total disability/DWRF	11
Lump sum settlement	9
Wage loss	3
Scheduled loss	1
AWW/FWW amount	1
Permanent partial disability	1
<b>Total</b>	<b>155</b>

IC Hearing Issues	
Hearing process/Hearing letter	9
IC form	5
<b>Total</b>	<b>14</b>

## Issue Report - Other Inquiries - continued

Ombuds staff determines that the information being requested is more properly obtained elsewhere.

<b>MCO &amp; Other Treatment Issues</b>	
Provider enrollment	15
Medical provider	14
Prescription - prior authorization	10
Bills non-payment	9
Provider policy and fee schedule	8
Medicare	8
Authorization of medical treatment	3
Prescription - general	3
Self-insured medical bill	3
MCO form	2
Find physician	1
<b>Total</b>	<b>76</b>

<b>General Workers' Compensation Issues</b>	
Nonspecific	102
Employer form	63
Self-insured complaint	13
Fraud allegation	7
Claim allowance	6
Attorney/Representative	5
Additional allowance	2
Interstate jurisdiction	1
Light duty	1
Labor issue	1
<b>Total</b>	<b>201</b>

<b>BWC Processing Issues</b>	
Claim process	130
BWC E account	86
CSS/MCS	62
BWC form	57
Website	6
Status of form/Application	2
Independent medical exam	2
Processing delay	1
<b>Total</b>	<b>346</b>

<b>COVID-19 Issues</b>	
Safety & Hygiene	5
General issue	2
ESS/AE2	1
Unemployment	1
Claim process	1
<b>Total</b>	<b>10</b>

## 2021 Administrative Update

### Budget

Expenditures to operate the Ombuds Office in CY2021 totaled \$741,575. This total includes payroll costs for staff of \$722,398 and operating expenses of \$19,177. Total expenditures for CY2021 declined 2 percent as compared to CY2020. A spreadsheet providing budget details is on page 30 of this annual report.

Total payroll costs for 2021 vs. 2020 decreased 1 percent. Payroll costs include employee salary and employer paid benefits, including health insurance and retirement. Additionally, this portion of the budget includes a mass allocation (cost divided between BWC departments) for William Green Building security guards (personal service). There is some fluctuation in the payroll cost over CY2021 based on the 26 pay period cycle resulting in two months with three pay periods, and individual employees' selections related to their benefits.

In CY2021, staff included the chief ombudsperson, two exempt employees (in Columbus) and five bargaining unit employees (four in Columbus and one in Cleveland). In CY2021, \$143 in overtime was paid.

Non-payroll operating costs for the Ombuds Office for 2021 were \$19,177. This total is a decrease of 17 percent from \$23,217 in 2020. The two largest operating expenses for us are building maintenance and printing (building maintenance is a mass allocation calculated based on the square footage of each department). Also included in this section of the budget, is the cost for office supplies, telephone and travel.

### Database

In December 2021 we concluded our thirteenth full year of the ePowerCenter tracking software. Benefits of this industry standard software include:

- Improved tracking of individual complaints and inquiries;
- Improved consistency of information provided to Ombuds Office customers;
- Quicker recall history of prior discussions with customers;
- Quicker access to injured worker claims data;
- Quicker access to employer risk data;
- Improved report generating capabilities;
- Improved data trend analysis capabilities.

We began collecting data in January 2009, and this data continues to be useful in conducting year over year comparisons and identifying customer trends. In addition, several BWC divisions now use ePowerCenter. The ePowerCenter data on the Ombuds system remains 100 percent segregated from BWC data, and we continue to retain statutory independence and neutrality. This sharing of the same software allows for better data trend analysis of current and future problems.

In 2014, we began tracking general inquiry information in addition to complaint information we previously tracked. This additional data provides a more robust picture of the type and source of issues presented to us for resolution. Additionally, we continuously review database parameters to ensure we are capturing as much information as possible from each customer contact.

The advantage to making these changes is that we can get a much clearer and more detailed picture of the type of issues brought to us.

### **Promoting Ombuds Office services**

In 2014, we resumed the practice of collecting information about how our customers learned of our office and/or the source of their referral. This information allows the office to conduct analysis to promote our services more effectively. Ensuring that potential customers and sources of referrals have an awareness of the office and the services provided continues to be a priority in 2019. I continue to accept speaking engagements to explain Ombuds Office services whenever they are offered.

### **Printed material**

We produce and print our capabilities brochure in-house at minimal cost by BWC communications and DAS state printing. We mail this brochure upon request; distribute it at speaking engagements; and provide it to BWC, IC, employer and labor groups and other government entities for distribution to potential customers.

### **Promoting services to IC**

We increased awareness of services to the IC in several ways including:

- Presenting an overview of the office and services provided to all IC hearing officers as part of their regional training;
- Meeting with IC support staff in IC offices statewide to discuss available services;
- Providing capabilities brochures to IC hearing officers and staff for distribution to employers, injured workers and their representatives;
- Maintaining placement of link to Ombuds Office information on the IC's website.

### **Promoting Services to BWC**

We increased awareness of services to the BWC in several ways, including:

- Meeting with BWC customer service office managers and claims staff to discuss available Ombuds Office services;
- Meeting with BWC risk staff and employer services specialists to raise awareness of our services available to Ohio employers;
- Meeting with Division of Safety & Hygiene staff, both at headquarters in Pickerington, and in locations across Ohio, to increase awareness of our services available to Ohio employers;
- Meeting with BWC business consultants to increase their awareness of our services;
- Working with BWC's 1-800-OHIOBWC call center staff to increase awareness of our services and to increase appropriate referrals;
- Maintaining placement of link to Ombuds Office information on BWC's website;
- Working with BWC to determine placement of an option to reach the Ombuds Office on the 1-800-OHIOBWC phone line.

### **Promoting services to employers**

We increased awareness of services to employers in several ways, including:

- Mailing letters to unrepresented employers prior to their first IC hearing;

- Distributing our capabilities brochure to business trade groups for distribution to their members;
- Providing information business trade groups can share on their websites;
- Speaking at special events and/or seminars with target audiences present;
- Providing information on our services to local and regional chambers of commerce and safety councils.

### **Promoting services to injured workers**

We will increase awareness of services to injured workers in several ways, including:

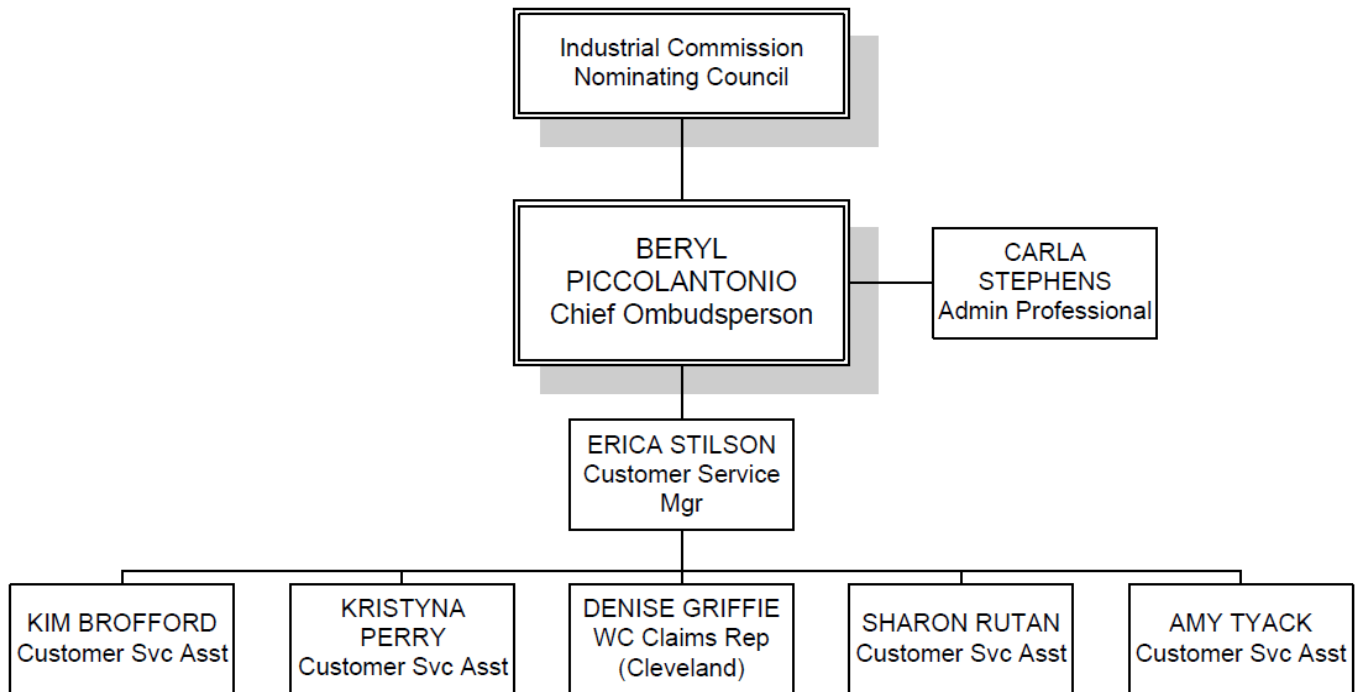
- Mailing letters to unrepresented injured workers prior to their first IC hearing;
- Distributing our capabilities brochure to local unions, across Ohio;
- Speaking at labor seminars, including AFL-CIO, UAW and Teamsters;
- Providing information local unions can share on their websites;
- Conducting meetings with local union stewards to increase their awareness of our services.

### **Promoting services to government officials**

The Ombuds Office has increased awareness of services to other government agencies in several ways, including:

- Providing information about services available to members of the Ohio General Assembly and their staff to use as a resource when handling complaints and inquiries from constituents;
- Providing information on our services to call centers and action lines of local government entities, including Ohio cities, counties, and townships;
- Providing updated information about us to court personnel across Ohio.

## Ombuds Office Table of Organization



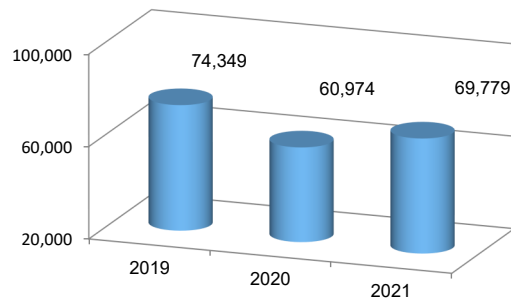
# Ombuds Office Expenditure Report - Calendar Year 2021

OBJECT CLASS	JAN.	FEB.	MAR.	APR.	MAY	JUN.	JUL.	AUG.	SEP.	OCT.	NOV.	DEC.	TOTAL EXPENSES
10 Payroll	56,206	53,045	53,112	53,902	73,534	50,456	55,384	58,738	58,262	87,472	61,708	58,937	720,756
10 Overtime Paid	0	0	0	0	0	143	0	0	0	0	0	0	143
13 Purchased Services	0	0	650	0	0	474	0	0	0	0	0	0	1,124
15 Other Pers Svc	0	0	0	0	0	0	0	0	0	0	0	375	375
<b>Total 100</b>	<b>56,206</b>	<b>53,045</b>	<b>53,762</b>	<b>53,902</b>	<b>73,534</b>	<b>51,074</b>	<b>55,384</b>	<b>58,738</b>	<b>58,262</b>	<b>87,472</b>	<b>61,708</b>	<b>59,312</b>	<b>722,398</b>
20 Edible Products	0	0	0	0	0	0	0	0	0	0	0	0	0
21 Supplies	0	0	0	0	0	0	0	0	0	0	0	925	925
211 INTRNL SUPPLIES	0	0	0	0	0	0	0	0	0	0	0	0	0
22 Vehicle Maintenance	0	0	0	0	0	0	0	0	0	0	0	0	0
221 INTRNL VEHICLE	0	0	0	0	0	0	0	0	0	0	0	0	0
23 Travel	0	0	0	0	0	0	0	0	0	0	0	0	0
24 Communications	0	0	0	0	0	0	0	0	0	0	0	0	0
241 INTRNL COMM	343	352	392	511	330	475	0	0	0	0	0	0	2,403
24 IT Lic Commun	301	221	140	150	293	363	0	430	147	91	82	266	2,484
25 Fuel/Utilities	0	0	577	0	0	643	0	0	603	0	0	582	2,405
26 Maintenance/Repairs	0	0	2,405	0	0	1,909	0	0	772	0	0	2,362	7,448
27 Rentals/Leases	0	0	0	0	0	0	0	0	0	0	0	0	0
27 ISTV/Goods & Svcs	0	219	1,456	0	84	21	94	655	0	0	86	897	3,512
28 Printing/Advert	0	0	0	0	0	0	0	0	0	0	0	0	0
29 General/Other	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>Total 200</b>	<b>644</b>	<b>792</b>	<b>4,970</b>	<b>661</b>	<b>707</b>	<b>3,410</b>	<b>94</b>	<b>1,086</b>	<b>1,522</b>	<b>91</b>	<b>168</b>	<b>5,032</b>	<b>19,177</b>
30 Food Handling Equip	0	0	0	0	0	0	0	0	0	0	0	0	0
31 Office Equipment	0	0	0	0	0	0	0	0	0	0	0	0	0
32 Motor Vehicles	0	0	0	0	0	0	0	0	0	0	0	0	0
34 Commun Equip	0	0	0	0	0	0	0	0	0	0	0	0	0
35 Medical/Lab/Therapeut	0	0	0	0	0	0	0	0	0	0	0	0	0
36 Eductl/Recrftl	0	0	0	0	0	0	0	0	0	0	0	0	0
37 IT Equip	0	0	0	0	0	0	0	0	0	0	0	0	0
38 Copy/Print Equip	0	0	0	0	0	0	0	0	0	0	0	0	0
39 Other Equipment	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>Total 300</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>Grand Total</b>	<b>56,850</b>	<b>53,837</b>	<b>58,732</b>	<b>54,563</b>	<b>74,241</b>	<b>54,484</b>	<b>55,479</b>	<b>59,824</b>	<b>59,783</b>	<b>87,563</b>	<b>61,876</b>	<b>64,344</b>	<b>741,575</b>

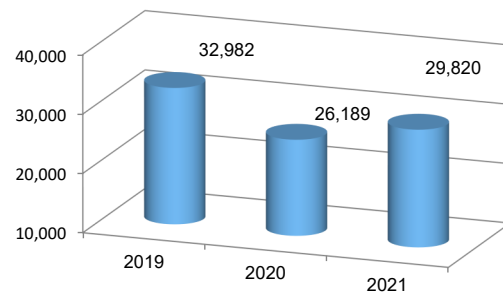
Source: Monthly reports from January through December 2021.  
 Note: Mass Allocations included in March, June, September, and December.

# Industrial Commission 2021 Year-End Statistics

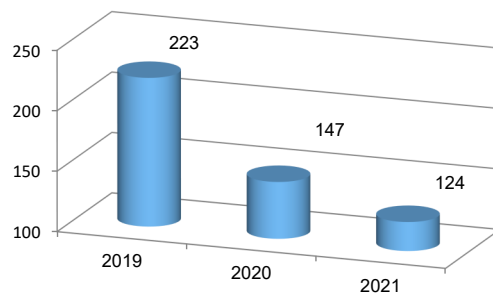
**DHO level hearings**



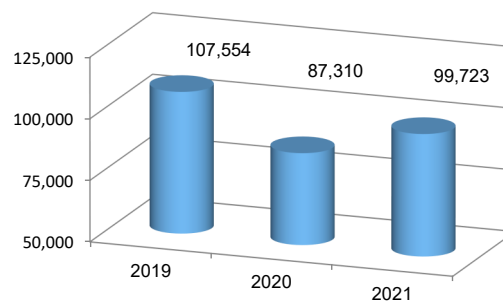
**SHO level hearings**



**Commission level hearings**



**Total IC hearings**



Source: IC Management Planning



# Ohio Bureau of Workers' Compensation

## 2021 Year-End Statistics

	FY 2021	FY 2020	FY 2019
<b>State Fund Claims Filed</b>			
Lost Time	10,706	9,850	11,009
Medical Only	53,683	61,101	72,932
Occupational Disease	1,045	401	255
Death	168	167	168
Disallowed or Dismissed	<u>10,232</u>	<u>10,344</u>	<u>12,240</u>
Total	<u>75,834</u>	<u>81,863</u>	<u>96,604</u>
Net Allowed Injuries	65,602	71,519	84,364
NOTE: Every claim is evaluated at 60 days after filing for purposes of claim type, State Fund versus Self-Insured, combine status, and allowance status. Values exclude combined and Self-Insured claims.			
<b>Open Claims (Per statute)</b>			
Lost Time	185,744	192,664	207,594
Medical Only	<u>393,357</u>	<u>417,301</u>	<u>438,785</u>
Total	<u>579,101</u>	<u>609,965</u>	<u>646,379</u>
<b>Benefits Paid</b>			
Medical Benefits Paid	\$352,566,355	\$430,417,629	\$490,034,666
Compensation Paid			
Wage Loss	\$5,928,044	\$6,481,308	\$6,753,726
Temporary Total	184,624,581	189,744,611	194,770,873
Temporary Partial	3,011	2,693	4,189
Permanent Partial	22,318,732	19,974,366	22,692,662
% Permanent Partial	50,253,261	52,068,618	57,590,270
Lump Sum Settlement	171,625,160	159,717,230	140,426,459
Lump Sum Advancement	14,611,706	17,990,947	16,648,612
Permanent Total & DWRF	355,515,570	367,284,999	369,525,968
Death	77,824,915	79,249,198	80,666,730
Rehabilitation	21,317,274	23,536,162	24,544,006
Other	<u>2,910,028</u>	<u>3,616,901</u>	<u>3,111,525</u>
Total Compensation Paid	\$906,932,282	\$919,667,034	\$916,735,020
Total Benefits Paid	<u>\$1,259,498,637</u>	<u>\$1,350,084,663</u>	<u>\$1,406,769,686</u>
<b>MCO Fees Paid</b>	\$164,987,367	\$168,764,352	\$170,882,589

Source: BWC Fiscal Year 2020 Annual Report

## 2021 Year-End statistics

	FY 2021	FY 2020	FY 2019
<b>Fraud Statistics</b>			
Fraud Dollars Identified	\$ 94,378,598	\$ 77,754,230	\$ 65,144,322
\$\$\$ Saved to \$\$\$ Spent Ratio	8.46 to 1	5.79 to 1	4.93 to 1
Prosecution Referrals	89	150	189
<b>Active Employers By Type</b>			
Private	248,256	245,040	244,247
Public (Local)	3,805	3,802	3,796
Public (State)	114	114	115
Self-Insured	1,110	1,139	1,160
Black Lung	20	26	26
Marine Fund	131	129	128
Total	<u>253,436</u>	<u>250,250</u>	<u>249,472</u>
NOTE: Starting in FY 2019, policies that lapsed within the fiscal year are treated as active.			
<b>BWC Personnel</b>	1,634	1,753	1,774
<b>IC Personnel</b>	303	320	342
<b>BWC COMBINED FUNDS FINANCIAL DATA</b> (000s omitted)			
<b>Operating Revenues</b>			
Premium & Assessment Income, net of			
Provision for Uncollectibles and Ceded Premiums	\$1,169,595	\$1,248,759	\$1,290,499
Other Income	<u>7,359</u>	<u>8,670</u>	<u>9,396</u>
Total Operating Revenues	<u>\$1,176,954</u>	<u>\$1,257,429</u>	<u>\$1,299,895</u>
<b>Operating Expenses</b>			
Workers' Compensation Benefits and Compensation Adjustment Expenses	\$526,258	\$1,260,821	\$760,096
Other Expenses	141,493	176,282	179,137
Total Operating Expenses	<u>\$667,751</u>	<u>\$1,437,103</u>	<u>\$939,233</u>
<b>Non-Operating Revenues</b>			
Net Investment Earnings	\$469,028	\$586,514	\$654,606
Increase (Decrease) in Fair Value	<u>2,995,025</u>	<u>1,206,417</u>	<u>1,536,515</u>
Net Investment Income	<u>\$3,464,053</u>	<u>\$1,792,931</u>	<u>\$2,191,121</u>
<b>Net Dividends, Rebates and Credits</b>	\$6,185,348	\$1,343,613	\$1,182,817
<b>Total Assets</b>	\$24,457,388	\$27,781,847	\$29,373,011
<b>Total Liabilities</b>	\$15,118,553	\$16,195,908	\$18,153,785
<b>Total Net Position</b>	\$9,358,918	\$11,563,977	\$11,295,526

# Industrial Commission Nominating Council

Current as of May 2022

## Employer Representatives

**Ryan Augsburger**  
Ohio Manufacturers Association

**Kevin Shimp**  
Ohio Chamber of Commerce

**Roger Geiger**  
National Federation of  
Independent Business / Ohio

**Gordon M. Gough\*\***  
Ohio Council of Retail Merchants

**Debbie Lantman**  
Ohio Self-Insurers Association

## Public Members

**Peter Gibson**

**Robert Schmitz**

## Labor Representatives

**Tim Burga\***  
Ohio AFL-CIO

**Frank Gallucci**  
Plevin & Gallucci

**R. Sean Grayson**  
AFSCME Ohio Council 8

**David Prentice**  
United Steelworkers

## Ohio Association of Justice Representative

**Philip Fulton\*\*\***

\* Chairperson

\*\* Vice Chairperson

\*\*\* Secretary