

**A G E N D A**

**SOUTH CAROLINA WORKERS' COMPENSATION COMMISSION**

1333 Main Street, 5<sup>th</sup> Floor  
Columbia, South Carolina 29201

**August 15, 2016 – 10:30 a.m.**

Commission Hearing Room A

*This meeting agenda was posted prior to the meeting and proper advance notice was made to all concerned parties in compliance with requirements in the Freedom of Information Act.*

1. CALL TO ORDER *CHAIRMAN BECK*
2. APPROVAL OF AGENDA OF BUSINESS MEETING  
OF AUGUST 15, 2016 *CHAIRMAN BECK*
3. APPROVAL OF MINUTES OF THE BUSINESS MEETING  
OF JULY 18, 2016 (Tab 1) *CHAIRMAN BECK*
4. GENERAL ANNOUNCEMENTS *MR. CANNON*
5. APPLICATIONS FOR APPROVAL TO SELF-INSURE (Tab 2) *MR. SMITH*
6. DEPARTMENT DIRECTORS' REPORTS *MS. OSBORNE*  
Human Resources (Tab 3) *MS. SPRANG*  
Information Services (Tab 4) *MR. DUCOTE*  
Insurance and Medical Services (Tab 5) *MS. SPANN*  
Claims (Tab 6) *MS. BRACY*  
Judicial (Tab 7)
7. EXECUTIVE DIRECTOR'S REPORT (Tab 8) *MR. CANNON*  
Administration – Financial Report (Tab 9) *Mr. Cannon*
8. OLD BUSINESS *CHAIRMAN BECK*  
A. 2016 Medical Services Provider Manual Fee Schedule (Tab 10) *Mr. Cannon*
9. NEW BUSINESS *CHAIRMAN BECK*  
A. Approval of 2017 Commission Calendar (Tab 11) *Mr. Cannon*
10. ADJOURNMENT *CHAIRMAN BECK*

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<b>1</b>	<b>Approval of Minutes of the Business Meeting of July 18, 2016</b>
<b>2</b>	<b>Self-Insurance</b>
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<b>4</b>	<b>Information Services</b>
<b>5</b>	<b>Insurance and Medical Services</b>
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<b>7</b>	<b>Judicial</b>
<b>8</b>	<b>Executive Director's Report</b>
<b>9</b>	<b>Summary of Revenues and Expenditures</b>
<b>10</b>	<b>2016 Medical Services Provider Manual Fee Schedule</b>
<b>11</b>	<b>Approval of 2017 Commission Calendar</b>

THE  
SOUTH CAROLINA WORKERS' COMPENSATION COMMISSION  
BUSINESS MEETING  
July 18, 2016

A Business Meeting of the South Carolina Workers' Compensation Commission was held in Hearing Room A of the Workers' Compensation Commission on Monday, July 18, 2016, at 10:30 a.m. The meeting agenda was posted prior to the meeting and proper advance notice was made to all concerned parties in compliance with requirements in the Freedom of Information Act. The following Commissioners were present:

T. SCOTT BECK, CHAIRMAN  
SUSAN S. BARDEN, VICE CHAIR  
R. MICHAEL CAMPBELL, II, COMMISSIONER  
MELODY L. JAMES, COMMISSIONER  
GENE MCCASKILL, COMMISSIONER  
AISHA TAYLOR, COMMISSIONER  
AVERY B. WILKERSON, JR., COMMISSIONER

Present also were: Gary Cannon, Executive Director; Amy Bracy, Judicial Director; Wayne Ducote, Insurance and Medical Services Director; Bridgette Amick, Medical Policy Analyst; Alicia Osborne, Human Resources Manager; Keith Roberts, Attorney; W.C. Smith, Self-Insurance Director; Sonji Spann, Claims Director; and Amanda Underhill, Business Analyst. AnnMargaret McCraw, Midlands Orthopaedics and Neurosurgery, was also present.

Chairman Beck called the meeting to order at 10:30 a.m.

**AGENDA**

Commissioner Barden moved that the agenda be approved. Commissioner McCaskill seconded the motion, and the motion was approved.

**APPROVAL OF MINUTES – BUSINESS MEETING OF JUNE 18, 2016**

Commissioner Barden moved that the minutes of the Business Meeting of June 18, 2016 be approved. Commissioner James seconded the motion, and the motion was approved.

**GENERAL ANNOUNCEMENTS**

There were no general announcements.

**APPLICATIONS FOR APPROVAL TO SELF-INSURE**

Self-insurance applications were presented by W.C. Smith, Self-Insurance Director. Eight (8) prospective members of two (2) funds were presented to the Commission for approval. The applications were:

**SC Home Builders SIF**

American Classic Construction, LLC  
Black Mountain Development Group, LLC  
Dillard Jones Interiors LLC  
Forrest McKie, Inc.

Manuel Juarez dba Juarez Painting  
Master Craftsmen Design, LLC  
Upland Builders, LLC

**SC School Board Insurance Trust**  
Anderson School District One

After examination of the applications, it was determined that each complied with the Commission's requirements and each was recommended for approval. Commissioner Wilkerson made the motion to approve the applications to self-insure, and Commissioner Campbell seconded the motion. The motion was unanimously approved.

**DEPARTMENT DIRECTORS' REPORTS**

The Department Directors presented their reports which were also submitted to the Commission in written form.

**Human Resources Department**

Alicia Osborne presented the Human Resources report for the period of June 16 through July 13, 2016. She announced the following resignations: Quintina Smith, Fiscal Technician II, effective July 4, 2016; Brian Myers, IT Consultant, effective June 30, 2016; and Marlene Johnson-Moore, Law Intern, effective July 1, 2016. Recruiting began on June 23, 2016 for the Fiscal Technician II position. Twenty-five individuals submitted applications. Interviews were scheduled with five candidates. A decision is pending.

**Information Technology Department**

On behalf of Sandee Sprang, Amanda Underhill presented the Information Services Department's report. Ms. Underhill said the IT Department has been busy working on the office renovations project. IT staff continues to work with various departments to ensure business processes and procedures are supported by the data systems.

Ms. Underhill said that the Progress system is approaching ten years of age. The IT staff and members of the Executive Staff met with NTT Data, Inc., regarding legacy modernization. NTT Data has worked with other state agencies to update data systems utilizing modern technology.

Ms. Underhill reported the eCase web portal upgrade is in the testing phase. The project is at approximately 84% completion.

Commissioner Taylor asked if the IT Consultant position will be filled. Gary Cannon, Executive Director, said that the position will be filled.

**Insurance and Medical Services Department**

Wayne Ducote presented the Insurance and Medical Services Department's report. Mr. Ducote pointed out the following highlights from the report:

- Year to date, the Compliance Division has compelled 323 employers to come into compliance with the Act. Although the division has assessed \$6.1 million in fines, 77% of those fines, or \$4.6 million, have been waived or rescinded as employers have either obtained coverage or were found not to be subject to the Act.
- Year to date, the Compliance Division has resolved \$183,759 in outstanding carrier fines.

- In June, the Compliance Division collected \$53,108 in fines and penalties and year to date collected \$902,128 in fines.
- In June the Coverage Division created 2,057 claim files. Year to date, 24,516 claim files have been created which is 104% of claim file volume prior year.
- The Coverage Division collected \$14,200 in fine revenue in June. Coverage fines are at 81% of collections for prior year.
- In June, the Self Insurance Division collected \$31,107 in self-insurance tax. Year to date, Self Insurance tax revenue is trending at 101% of prior year.
- The Medical Services Division is in the final stages of reviewing and updating the Medical Services Provider Manual.

There was discussion regarding carrier Rule to Show Cause (RTSC) hearings. Mr. Ducote said efforts in place to improve RTSC case preparations have resulted in more cases being closed and fewer cases being scheduled for RTSC hearings.

### **Claims Department**

Sonji Spann presented the Claims Department's report. Ms. Spann reported the following for the month of June 2016:

- Closed 2,343 individual case files
- Received \$49,400 in fine revenue
- Claims examiners reviewed 2,784 individual case files
- 244 fines assessed
- 191 Form 18 fines assessed
- 11,908 forms processed
- 1,092 Form 18s processed through SROI
- 1,593 Form 18s received via Email
- 1,651 forms received via USPS
- 811 Form 61 (included)

### **Judicial Department**

Amy Bracy presented the Judicial Department's report. She reported the following for the month of June 2016:

#### Judicial Department

- 900 requests for Hearings
- 139 Motions
- 110 Clincher Conference requests sent to Jurisdictional Commissioners

#### Commissioners

- 70 Single Commissioner Hearings conducted
- 14 Full Commission Hearings conducted
- 491 Orders served at single Commissioner level; 84 of those were Decision and Orders that resulted from hearings that went on record; 93 of those were Motion Orders ruled upon by Commissioners

#### Informal Conference

- 390 informal conferences requested
- 241 informal conferences conducted

#### Mediation

- 76 regulatory mediations scheduled
- 34 requested mediations
- 63 matters resolved in mediation with the receipt of Forms 70

Ms. Bracy announced that beginning July 7, 2016 a new process for the approval of the Form 16 after an Informal Conference was implemented. There was discussion on forwarding the completed Form 16 to the jurisdictional Commissioner. Ms. Bracy will provide a list of the informal conference district locations to the Commissioners. She will provide a progress report on the new process at next month's business meeting.

Ms. Bracy gave an update on work activities of the Judicial Department staff.

### **EXECUTIVE DIRECTOR'S REPORT**

Gary Cannon, Executive Director, presented his report which was also submitted to the Commission in written form. He said office renovations continue to move forward. The next phase of construction and office relocations will begin July 28, 2016.

### **ADMINISTRATION – FINANCIAL REPORT**

Mr. Cannon reported that he will provide the FY 2016 financial report at the August Commission Business Meeting.

### **OLD BUSINESS**

There was no old business.

### **NEW BUSINESS**

#### **2016 Medical Services Provider Manual Fee Schedule**

Mr. Cannon briefed the Commission on Optum's draft of the proposed fees for the 2016 Medical Services Provider Manual. There was discussion.

Commissioner McCaskill made a motion to accept as information. Commissioner Taylor seconded the motion. The vote was taken, and the motion carried unanimously.

### **ADJOURNMENT**

Commissioner Barden made the motion to adjourn. Commissioner Taylor seconded the motion, and the motion was approved.

The July 18, 2016 meeting of the South Carolina Workers' Compensation Commission adjourned at 11:06 a.m.

Reported August 15, 2016

Kim Ballentine

Office of the Executive Director

## MEMORANDUM

Date: August 10, 2016

**TO:** Mr. Gary Cannon  
Executive Director

**FROM:** Alicia Osborne  
Human Resources

**SUBJECT:** Human Resources Report Period of July 14, 16 through August 10, 2016

Below is a summary of the Human Resources activity for the period of July 14 through August 10, 2016.

### Workers' Compensation

- Ongoing Workers' Compensation Injuries
  - Four open claims

### Employee Relations

- Meetings
  - Counseled (17) staff regarding concerns
  - Clarified policies and procedures as needed
- Talent Search
  - Posted three jobs
    - Information Resource Consultant I
    - Systems Information / Business Analyst III
    - Attorney I

### Hired

- Executive Director's Office
  - Loretta Dykes – August 1, 2016

### Separations

- Information Services
  - Amanda Underhill – September 1, 2016

### Renovations

- Phase 3b and 4a – Completed move on August 4, 2016
- Creating Punchlist for end of renovations clean up

### Fiscal Responsibilities

- Trained Fiscal Technician II
  - Invoice payments and deposits
  - SCEIS training
- Processed/Approved Expense reports
- 16 Journal Entries
- 33 Invoices
- Three (3) IDTs processed for payment

## Reports

- Ran SCEIS Deductions Not Taken / Arrears report
  - Notified staff of arrears/deductions not taken
- Ran SCEIS Wage Type Report
- Time Administration
  - Unapproved Leave Report
    - Notified staff of pending leave that needed to be approved
    - Approved leave for (3) supervisors that requested approval
  - Missing Time Report
    - Notified six (1) supervisors of missing time
    - Notified seven (3) staff members of missing time
- Reviewed/updated reports as requested by the Executive Director

## CBRE

- Notified CBRE of building concerns (3)

## SCEIS

- Keyed (2) action items

## Miscellaneous

- Meeting(s)
  - (2) Building Renovations
- Continue with planning, coordinating, and overseeing office renovations
- HR Advisory Meeting – July 27, 2016

# State of South Carolina

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## Workers' Compensation Commission

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To: Gary Cannon  
SCWCC Executive Director  
From: Sandee Sprang, IT Director  
Date: August 10, 2016  
Subject: IT Department August 2016 Full Commission Report

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This report summarizes the activities and accomplishments of departmental projects and initiatives for the IT department during July 2016. The first section, "Systems Operation, Maintenance and Support", details the work related to keeping our current production systems up and running. The second section, "Projects, Enhancements and Development", highlights the activities related to new projects and tasks which bring added functionality to our systems. The last section documents the IT Department's "Training and Meeting" accomplishments.

### **I. Systems Operations, Maintenance and Support**

#### Virtualization

Duane continues to lead the effort with DTO to upgrade our hardware and software to a virtualized environment. He is presently working on building a process to duplicate the virtual environment on the development servers in the production environment.

#### EDI

Amanda and Duane worked with EDI trading partners to research and resolve EDI transactional data errors. They continue to work with the IAIABC EDI Claims Workgroup, reviewing and recommending standard changes.

#### Reporting and Standardization

During July, we produced the reports used to derive data for the Annual Report. We refined several of the reports to simplify the process and correct minor inconsistencies as a result of new business processes.

#### Systems Support

Duane researched and corrected multiple Invoice and Payment issues.

#### Desktop Support

Our HelpDesk support calls are being fielded by everyone in IT and we'll resume tracking metrics for these tasks when this position is filled.

### Staffing

The IT department is currently recruiting for 2 positions, a Business Analyst and a Help Desk. Sadly, we are also losing Amanda Underhill so this position will also be posted in the very near future. Amanda's contributions based on her experience and institutional knowledge will be missed tremendously.

## **II. Projects, Enhancements and Development**

### eCase

The eCase web portal upgrade is in the testing phase. All internal testing is complete and we are ready to open testing to several external users. We are 90% complete with this project.

### Office Renovations

The IT department spent a large portion of time working on the office renovation project assisting with the relocation of equipment and managing the installation of new cable.

### Hardware Upgrades

We have several hardware upgrade projects in process:

- 1) Our wireless network hardware quotes have been requested. We are hoping to procure these as part of our renovation project.
- 2) We are continuing to meet with vendors on the State's VoIP telephone contract to determine which vendor can best meet our needs within our current budget. Our August demo was rescheduled since we are short-staff and all efforts are needed in other areas.

### Video Conferencing

This project is on our list of priorities and will gain momentum once the time-constrained priorities are completed.

## **III. Trainings and Meetings**

Sandee met with TeamIA to discuss the modernization of our Progress system.

State of South Carolina



**Workers' Compensation Commission**

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**To:** Mr. Gary Cannon  
SCWCC Executive Director

**From:** Wayne Ducote, Jr.  
IMS Director

**Date:** 8-Aug-16

**Subj:** Insurance and Medical Services Department  
July 2016 Full Commission Report

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Please find attached information provided to summarize the status and workflow of initiatives currently underway within the Insurance and Medical Services (IMS) Department.

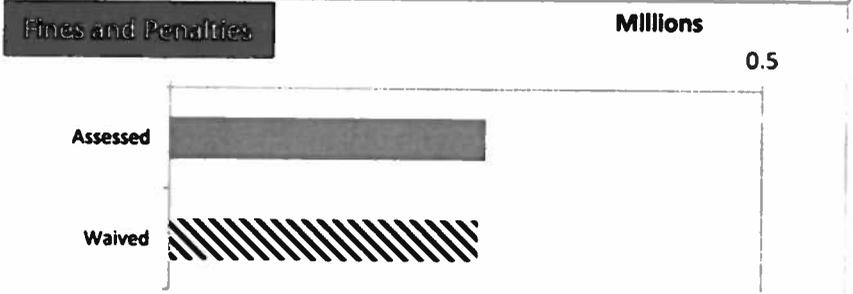
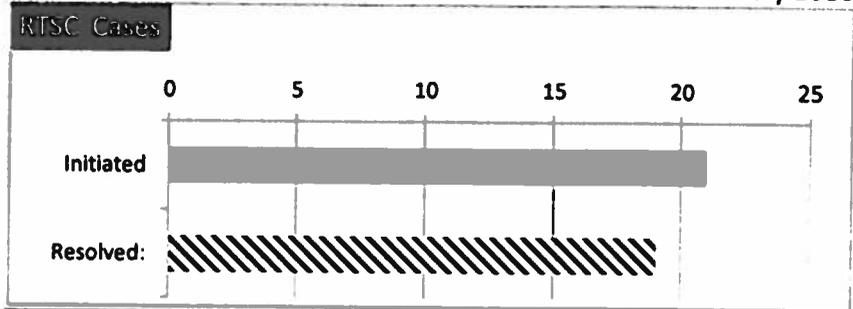
In addition to the statistical data provided, please be advised of the following:

- |                            |   |
|----------------------------|---|
| <b>Compliance Division</b> | <ol style="list-style-type: none"><li>1. Reviewing revenue metrics / projections.</li><li>2. Working with staff to review workflow processes and additional training opportunities.</li></ol>                       |
| <b>Coverage Division</b>   | <ol style="list-style-type: none"><li>1. Working with staff to review workflow processes and explore opportunities to enhance service provision.</li></ol>  |
| <b>Medical Services</b>    | <ol style="list-style-type: none"><li>1. Continue work on pharmaceutical payment disputes involving SAF.</li><li>2. In the final stages of the review and update of the Medical Services provider Manual.</li></ol> |

While this summary is in no way all-inclusive, it may serve to assist you and our Commissioners in understanding the key initiatives underway in the IMS Department and provide measures by which the Department's effectiveness can be gauged. IMS welcomes any guidance that you and/or our Commissioners can provide concerning our performance and direction.

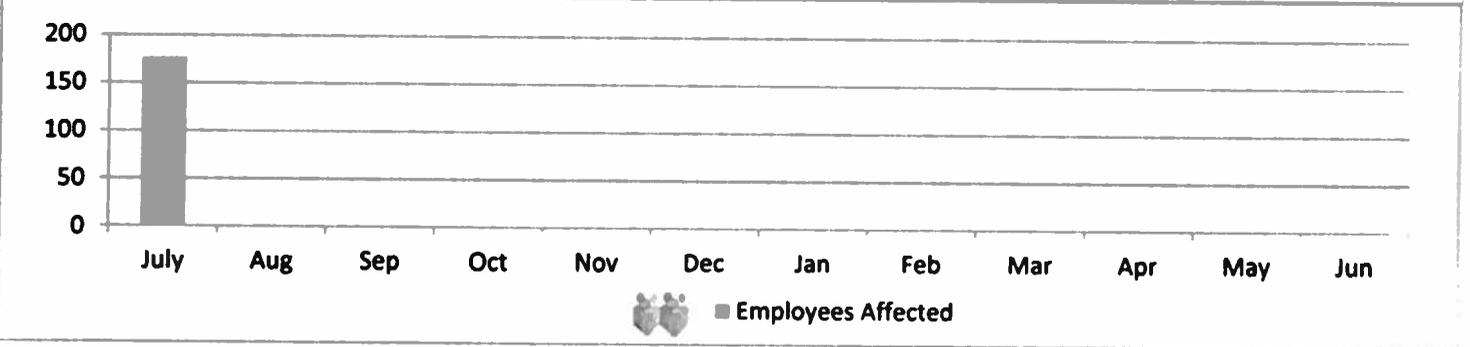
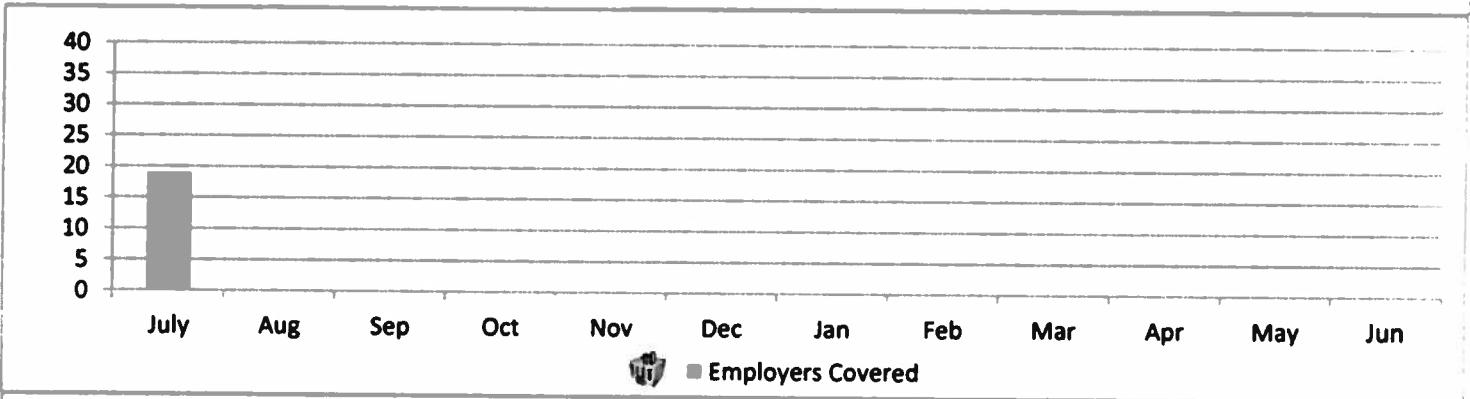
**Employers Obtaining Coverage**

The Compliance Division works with great diligence to help uninsured employers become compliant with the South Carolina Workers' Compensation Act. Year to date, the Compliance Division has compelled 19 employers in South Carolina to come into compliance with the Act. In so doing, approximately 177 previously uninsured workers are now properly covered.



**Penalties Waived**

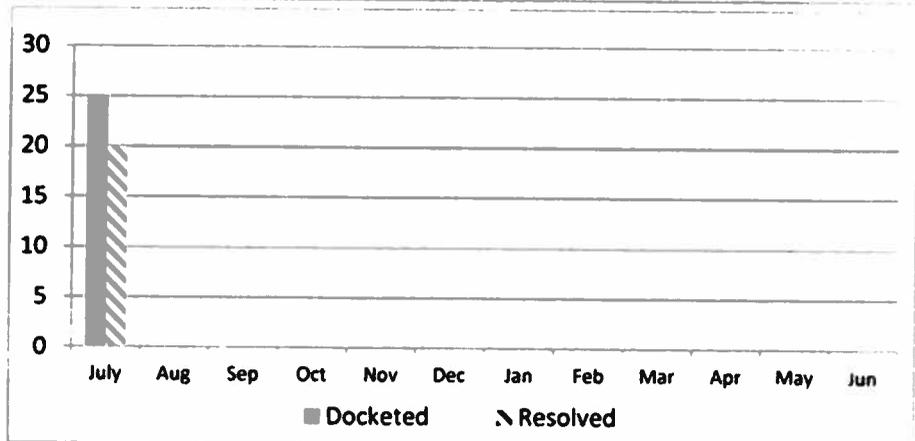
Although the Division has assessed \$ 2.7m in fines, 98% of those fines (\$2.6m) have been waived or rescinded as employers have either obtained insurance coverage or were found not to be subject to the Act.



**Carrier Rule to Show Cause Hearings**

The Compliance Division manages the Rule to Show Cause process involving the recovery of outstanding carrier fines and penalties. In the month of July 2016, 25 carrier RTSC cases were docketed; 23 cases were resolved and \$13,619 was recovered.

Year to date, 25 carrier RTSC cases have been docketed, 23 cases have resolved and \$13,619 has been recovered.



**Carryover Caseload:**

The Compliance Division closed July 2016 with 244 cases active, compared to an active caseload of 355 at the close of July 2015.

**Cases Resolved:**

For the month of July 2016, Compliance Division staff closed-out 117 cases.

**Compliance Fines:**

In July 2016, the Compliance Division collected \$60,305 in fines and penalties. Year to Date, the Compliance Division has collected \$60,305 in fines.

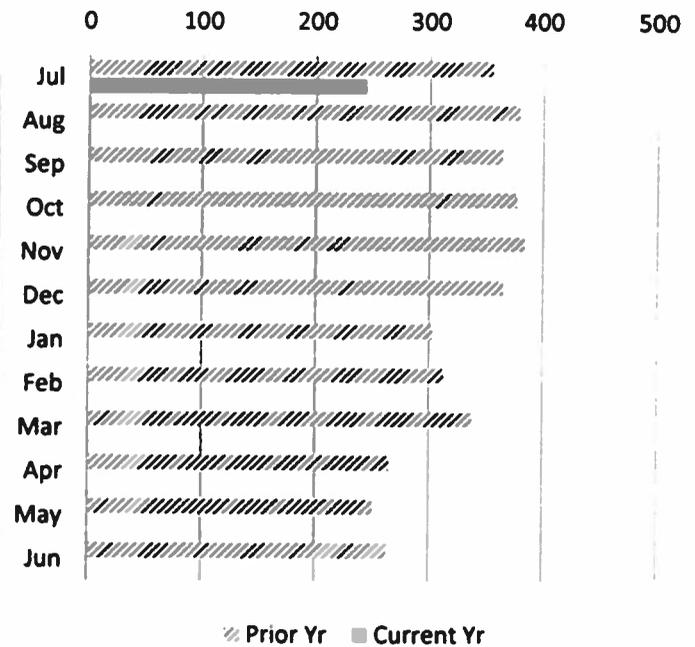
Year to Date vs Prior Year Total (\$902,128): 6.7%.

July 2016 vs. July 2015: 55%

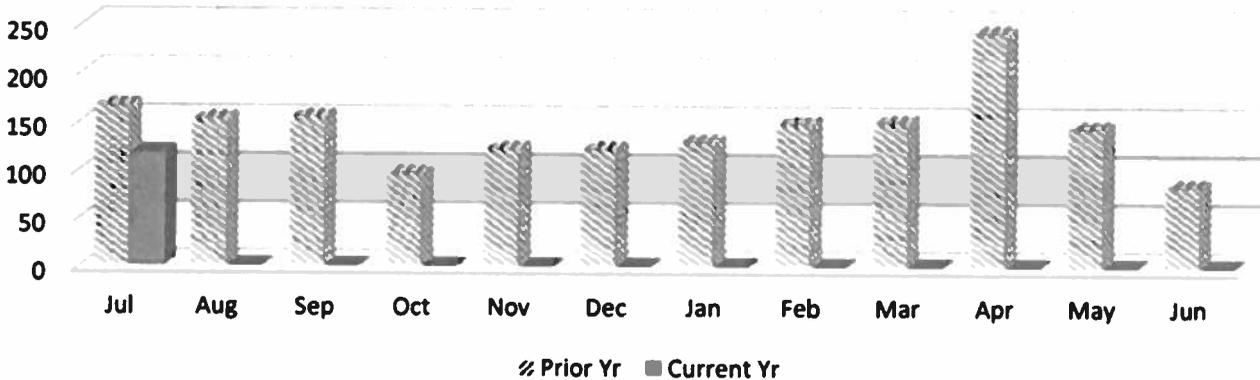
Current Year End trend is 80% of 2015-2016.

YTD 2016-17 (July - July) vs YTD 2015-2016: 55%

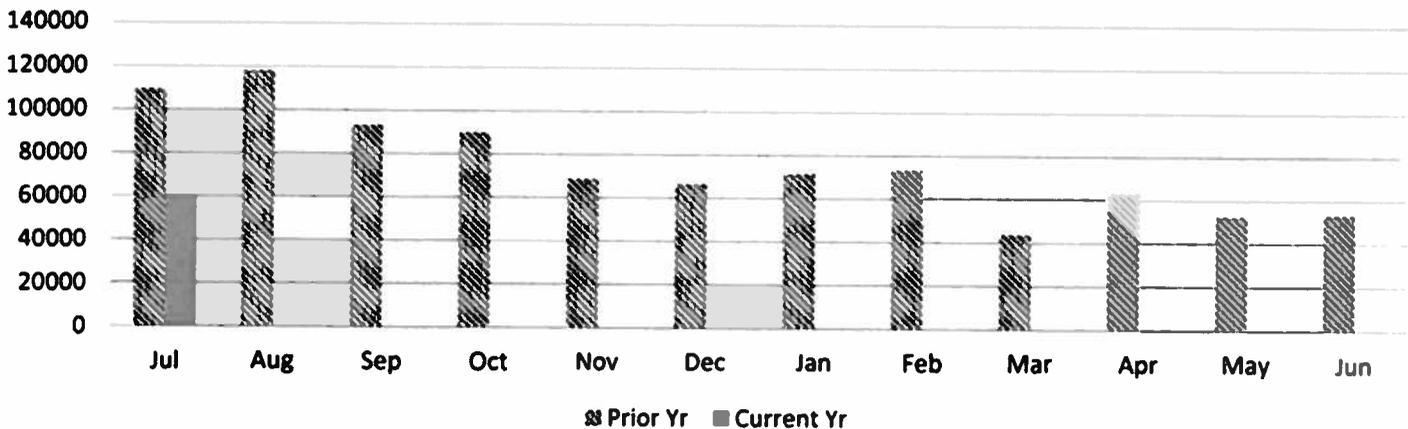
**Caseload Pending v. Prior Year**



**Cases Resolved v. Prior Year**



**Compliance Fines Collected v. Prior Year**

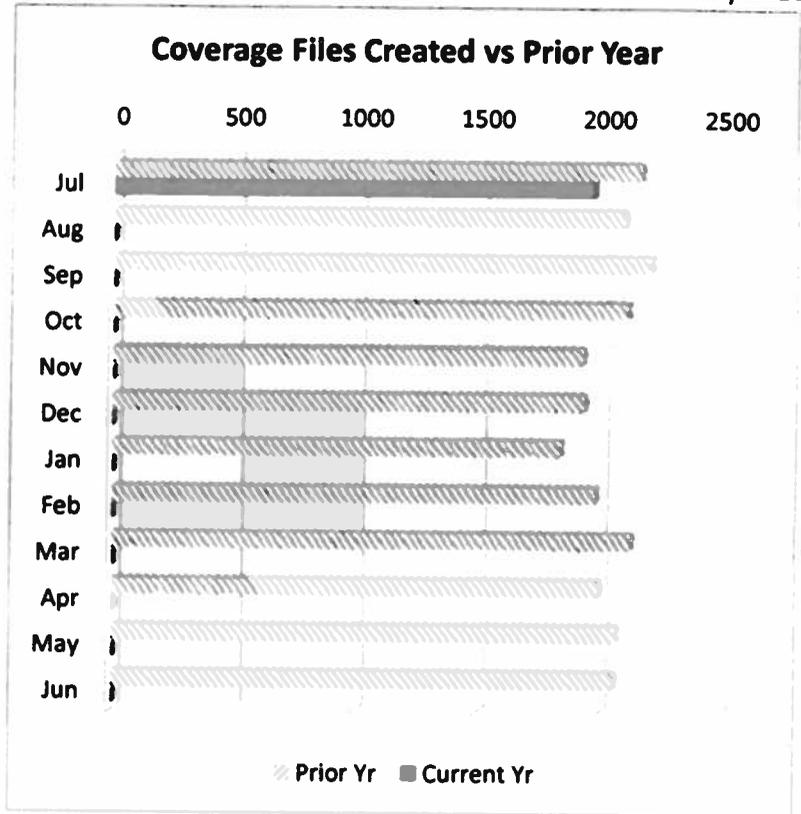


**WCC Claim Files:**

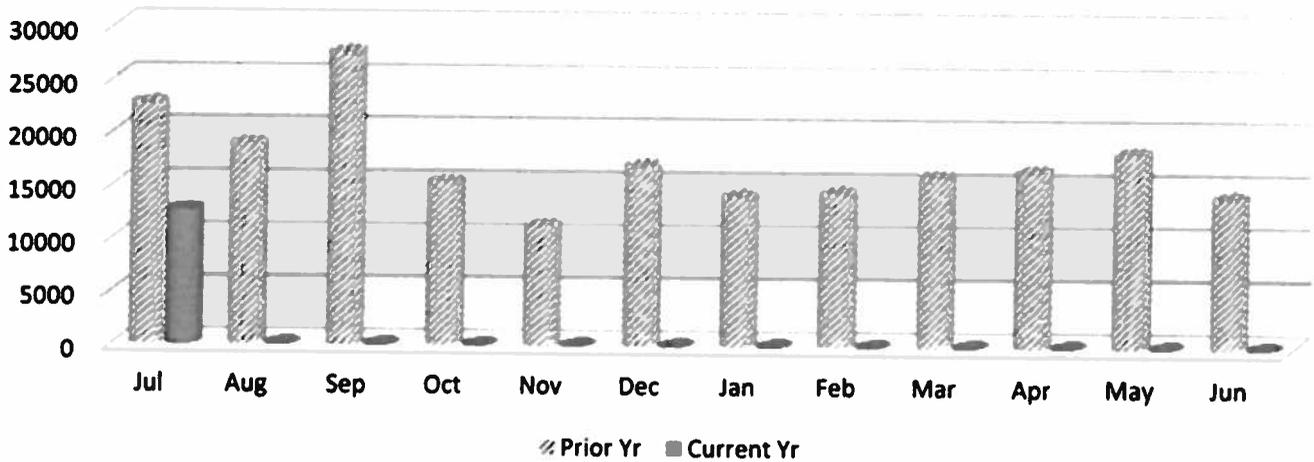
In July 2016, the Coverage Division recieved a total of 1,971 WCC Claim files. Of these, 1,698 were created through proper carrier filing of a 12A, and 273 were generated as a result of a Form 50 claim filing. Year to Date, 1,971 Claim files have been created which is 8% of claim file volume prior year (24,516).

**Coverage Fines:**

The Coverage Division collected \$12,600 in fine revenue in July 2016, as compared to \$22.650 in Coverage fines/penalties accrued during July 2016. Year on Year, Coverage fines are at 6% of collections for prior year.



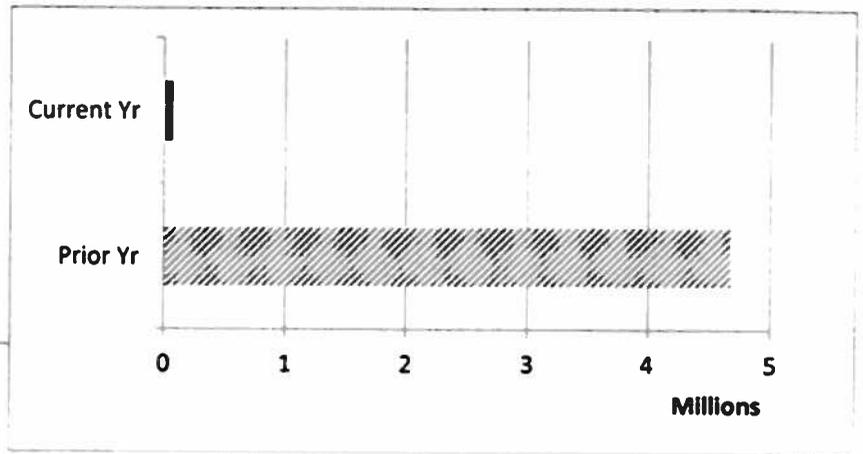
### Coverage Fines Collected v Prior Year



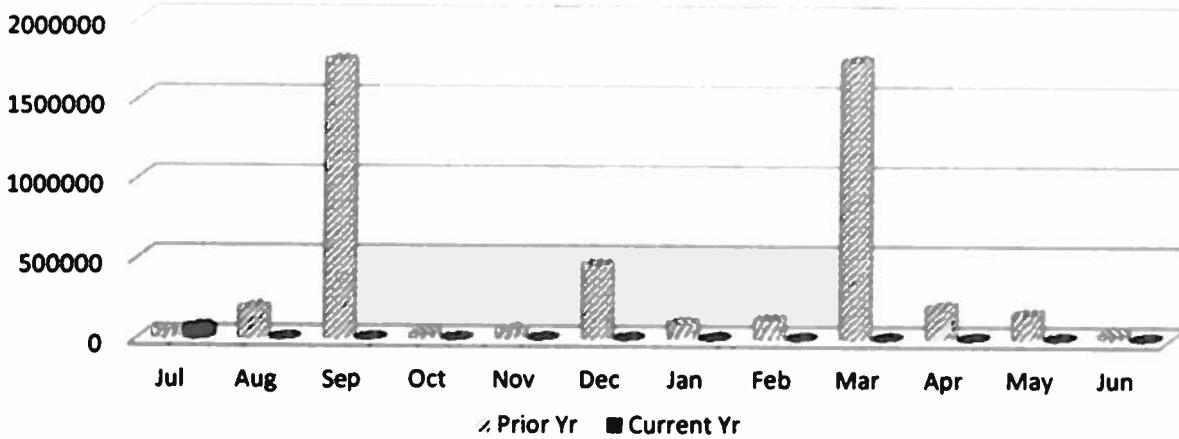
During the month of July 2016, the Self Insurance Division:

- \* collected \$58,868 in self-insurance tax.
- \* added 8 new self-insurers.
- \* conducted 3 Self Insurance audits.

Year to Date, Self Insurance tax revenue is trending at 131% of prior year and 3 Self Insurance audits have been completed.



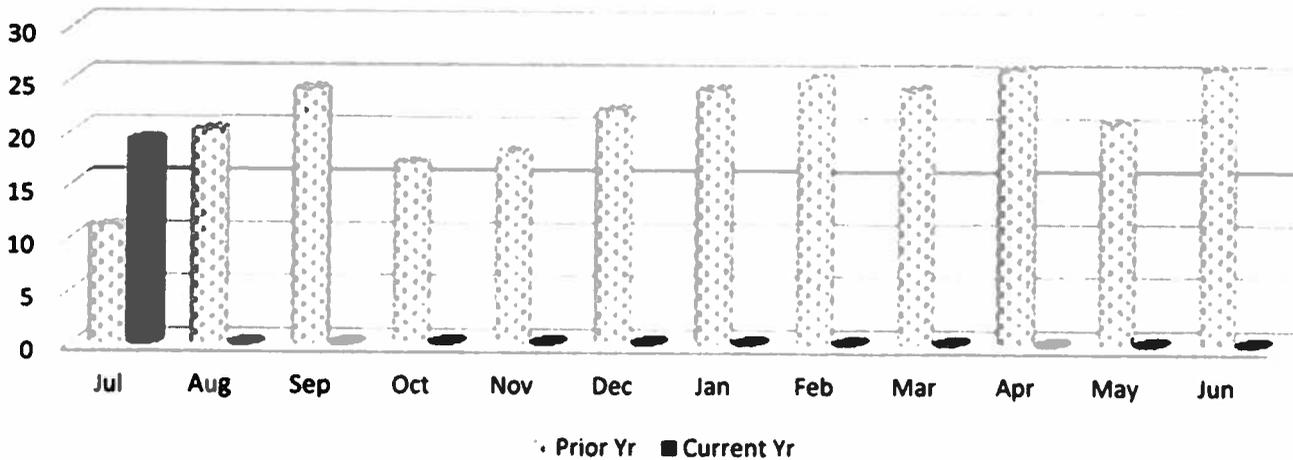
**Self Insurance Tax Collections v. Prior Year**



IMS MEDICAL SERVICES DIVISION

In July 2016, the Medical Services Division began the month with 16 bills pending review, received an additional 21 bills for review, conducted 18 bill reviews and ended the month with 19 bills pending.

**Medical Bills Pending Review v. Prior Year**



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## Workers' Compensation Commission

### MEMORANDUM

To: Gary Cannon, Executive Director  
From: Sonji Spann, Claims Director  
Date: August 9, 2016  
Re: Claims Department –August 2016 Full Commission Report

Please find attached information provided to summarize key workflow benchmarks related to the functions of the Claims Department. In addition to the statistical data provided herein, please note the following information:

	July 2016	June 2016	July 2015
Individual Case Files Closed	2,178	2,343	2516
Fine Revenue Collected	\$40,450	\$49,400	\$69,250
# of individual case files reviewed by examiners	2,973	2784	845
Total Fines	246	244	355
Form 18 Fines	181	191	315
Total Forms Processed	11,739	11,908	12,479
SROI	1116	1092	403
Email 18's	1772	1593	1846
USPS	1464	1651	2384
Form 61's Rec'd	743	811	
Form 61's Approved	668		

- Claims continue to review files for compliance and closure ( this has caused an increase in manual fines)
- Claims continue to educate the stakeholders





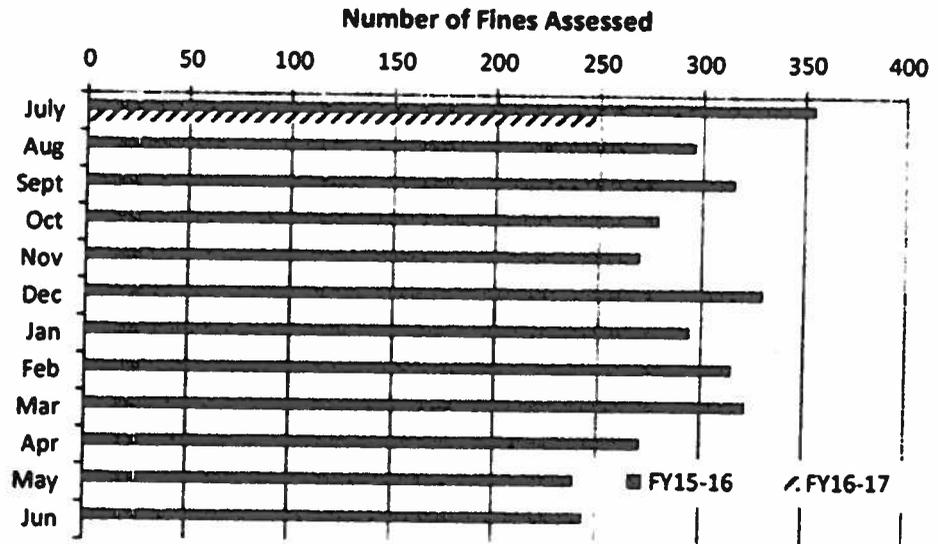




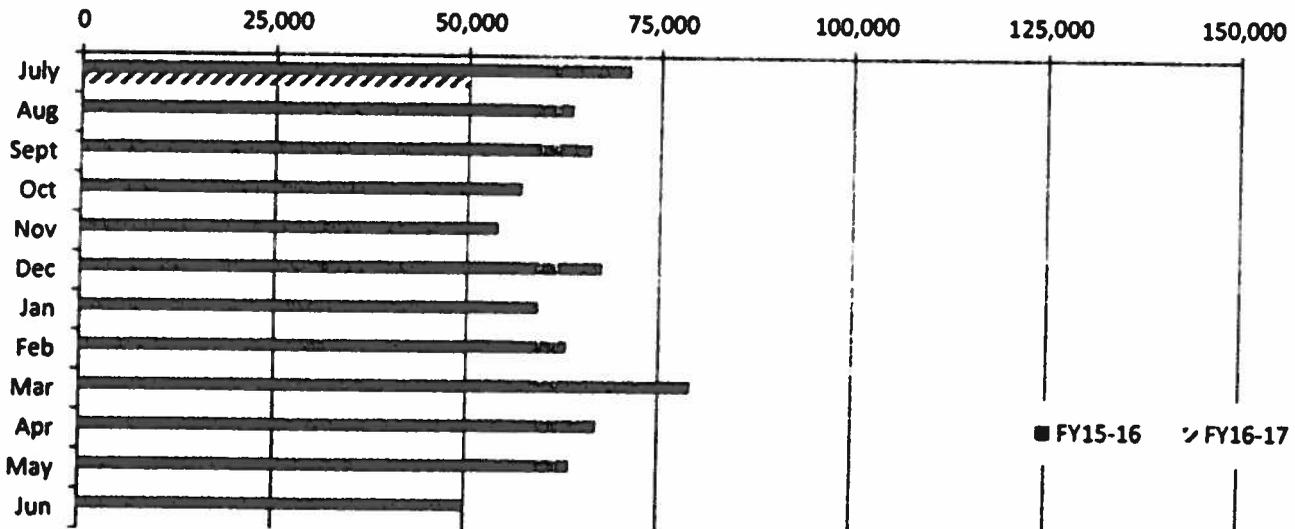
**CLAIMS DEPARTMENT - Fine Activity Report July 2016**

The number of fines assessed by the Claims Department increased in number to 247 from 244 in July. The number of Claims fines paid decreased from 236 in June to 198 in July.

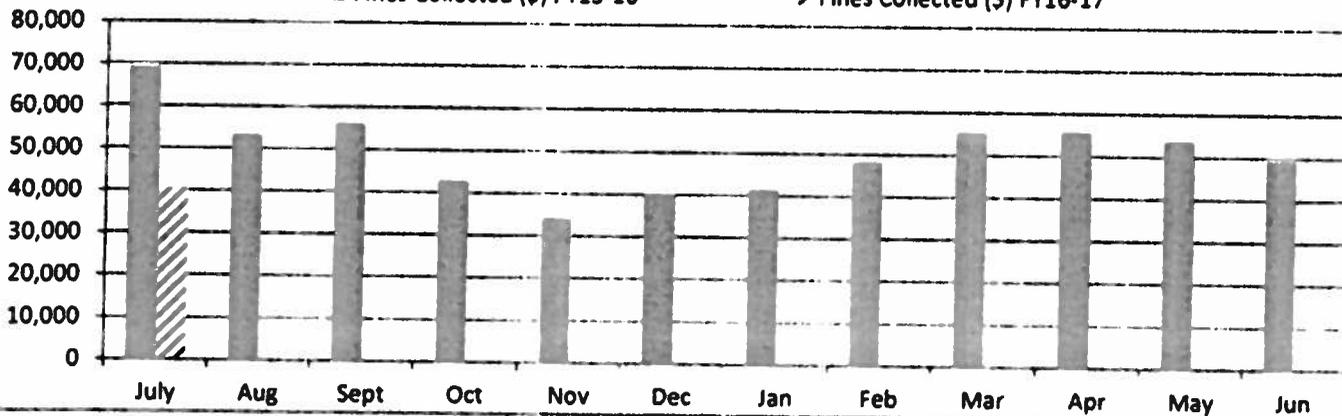
Total fine dollars assessed in July was \$50,000 an increase over prior month of \$49,800. Fine revenue received in July was \$40,450 a decrease over prior month \$49,400.



**Net Fines Assessed (\$)**



Fines Collected (\$) FY15-16
  Fines Collected (\$) FY16-17



Claims Department - Fine Activity Report

Fines Assessed (#)

	FY15-16	FY16-17
July	355	247
Aug	296	0
Sept	316	0
Oct	279	0
Nov	270	0
Dec	330	0
Jan	294	0
Feb	315	0
Mar	322	0
Apr	271	0
May	316	0
Jun	244	0
<b>Total</b>	<b>3,608</b>	<b>247</b>
<b>Mo Avg</b>	<b>301</b>	<b>21</b>

Fines Received (#)

	FY15-16	FY16-17
July	341	198
Aug	260	0
Sept	271	0
Oct	203	0
Nov	168	0
Dec	195	0
Jan	205	0
Feb	241	0
Mar	273	0
Apr	245	0
May	247	0
Jun	236	0
<b>Total</b>	<b>2,885</b>	<b>198</b>
<b>Mo Avg</b>	<b>240</b>	<b>17</b>

Net Fines Assessed (\$)\*

	FY15-16	FY16-17
July	71,050	50,000
Aug	63,600	0
Sept	66,000	0
Oct	57,000	0
Nov	54,000	0
Dec	67,600	0
Jan	59,400	0
Feb	63,000	0
Mar	79,200	0
Apr	67,050	0
May	63,600	0
Jun	49,800	0
<b>Total</b>	<b>761,300</b>	<b>50,000</b>
<b>Mo Avg</b>	<b>63,442</b>	<b>4,167</b>

Fines Collected (\$)

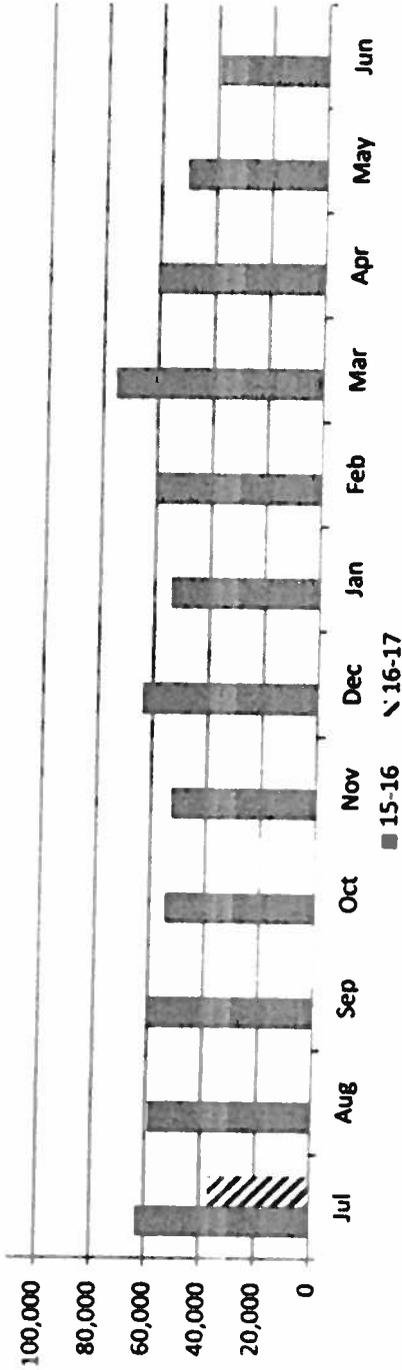
	FY15-16	FY16-17
July	69,250	40,450
Aug	53,350	0
Sept	56,200	0
Oct	42,800	0
Nov	34,200	0
Dec	39,800	0
Jan	41,400	0
Feb	48,250	0
Mar	55,400	0
Apr	55,700	0
May	53,800	0
Jun	49,400	0
<b>Total</b>	<b>599,550</b>	<b>40,450</b>
<b>Mo Avg</b>	<b>49,963</b>	<b>3,371</b>

\*after reductions and rescinded

### FORM 18 FINE ASSESSMENTS

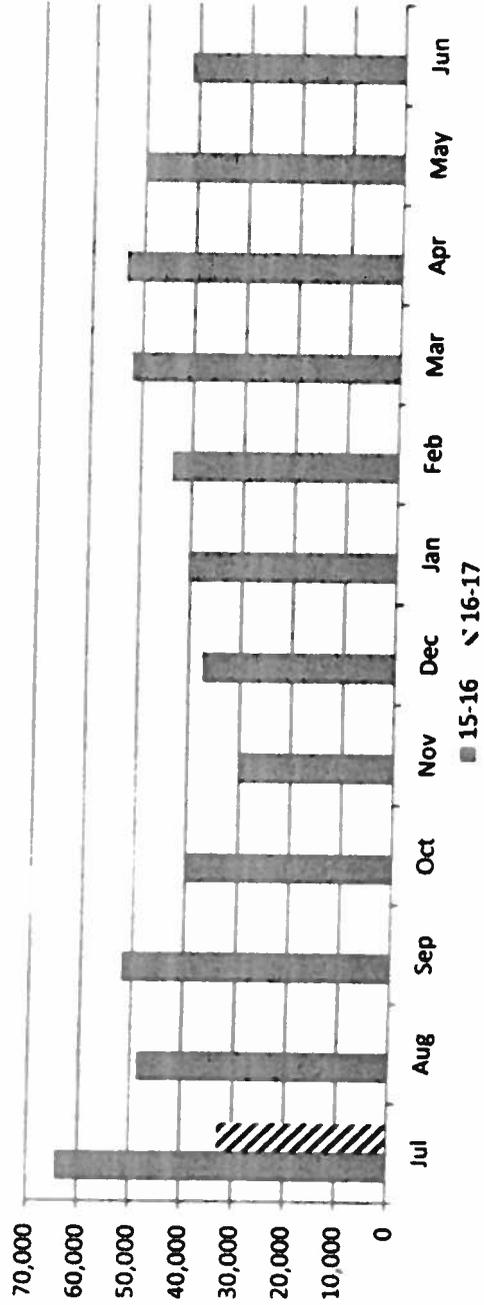
Consistent with overall Commission strategy, the Claims Department works with our Carrier partners to develop approaches that result in increased compliance levels and reduced Fine related costs to businesses in South Carolina.

A key "success measure" of this effort is the Form 18 Fine Assessment report. For the month of June 2016, this has resulted in an decrease in Form 18 Fine Assessments to \$36,800 as compared to July 2016 of \$39,200. The actual number of fines assessed decreased from 191 to 181 in July 2016.



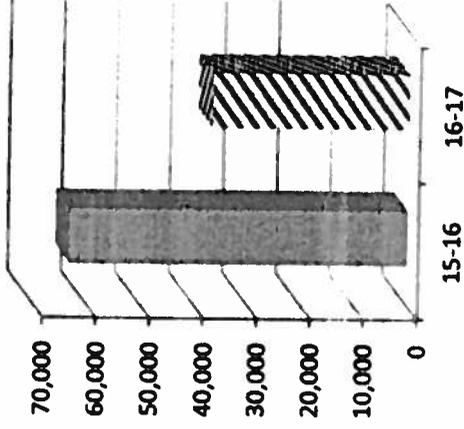
### FORM 18 FINE COLLECTION

In July 2016, the Claims Department received payment on Form 18 Fines resulting in revenue of \$32,800.



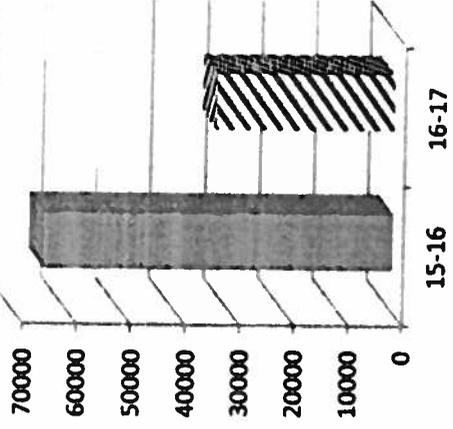
### FORM 18 FINE ASSESSMENTS YTD

Form 18 Fine Assessment is trending at 86% of prior year assessments.



### FORM 18 FINE REVENUE YTD

Form 18 Fine Revenue is trending at 160% of prior year collections.



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**Workers' Compensation Commission**

August 10, 2016

**To:** Gary M. Cannon  
Executive Director

**From:** Amy A. Bracy  
Judicial Director

**RE:** **Monthly Judicial Report for July 2016**

During the month of July, Judicial processed eight hundred fifty-four (854) requests for hearings, one hundred fifteen (115) Motions and one hundred nineteen (119) clincher conference requests that were sent to the Jurisdictional Commissioners.

There were fifty-eight (58) Single Commissioner Hearings conducted during the past month, and thirteen (13) Full Commission hearings were held. A total of four hundred sixty-five (465) Orders were served at the single Commissioner level, seventy-six (76) of those were Decision and Orders that resulted from hearings that went on the record and one hundred nine (109) were Motion Orders that were a result of Motions ruled upon by Commissioners.

The Informal Conference system conducted two hundred seventy-four (274) hearings during the last month.

There were sixty-six (66) regulatory mediations scheduled and twenty-five (25) requested mediations. The Judicial Department was notified of fifty-four (54) matters resolved in mediation, with the receipt of Forms 70.

We have added two new venues in the Walterboro area as part of our Orangeburg District. The City of Walterboro is allowing us to use the Council Chambers at City Hall and Vocational Rehabilitation is allowing us to use a conference room in their Walterboro location.

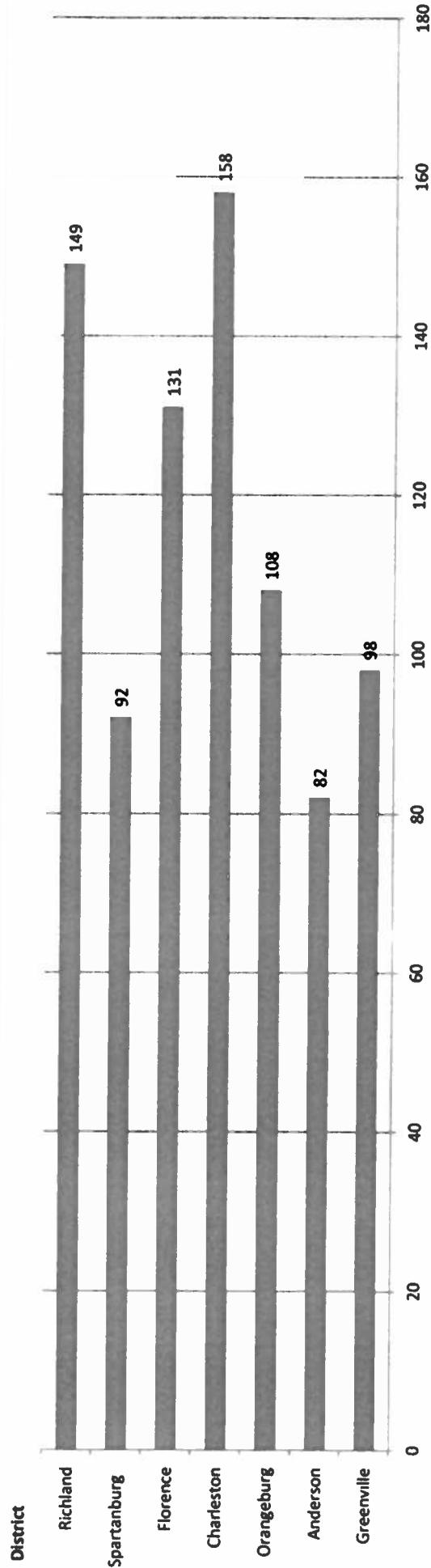
Greenville Courthouse contacted us regarding changes that they are in the midst of and as a result, effective September 1<sup>st</sup> we will be moved to Conference Room E.



### Pleadings Assigned - Three Year Comparison by Month

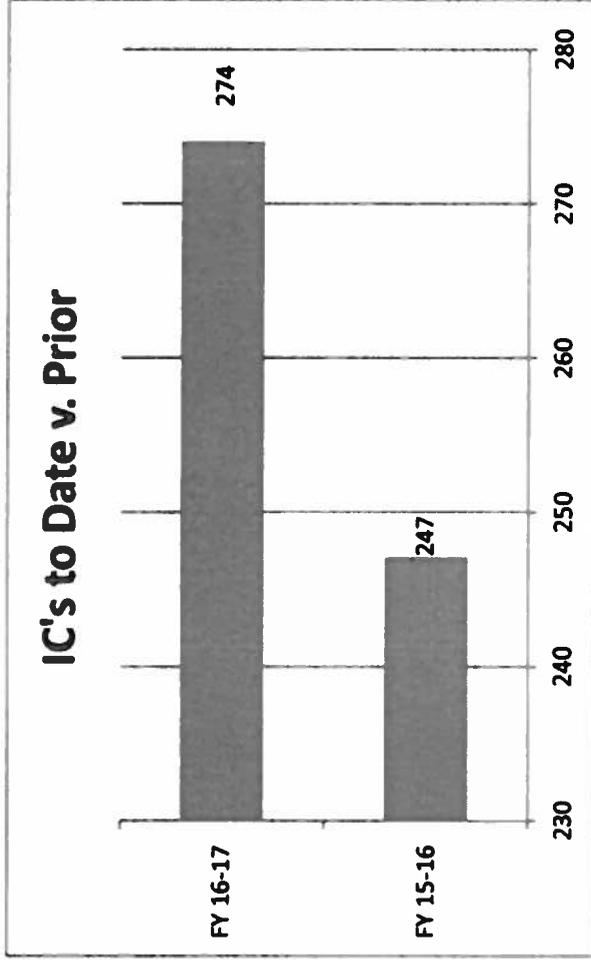
	District 1 Greenville			District 2 Anderson			District 3 Orangeburg			District 4 Charleston			District 5 Florence			District 6 Spartanburg			District 7 Richland			
	16-17	15-16	14-15	16-17	15-16	14-15	16-17	15-16	14-15	16-17	15-16	14-15	16-17	15-16	14-15	16-17	15-16	14-15	16-17	15-16	14-15	
	98	107	103	82	90	92	108	118	119	158	181	140	131	144	145	92	130	116	149	166	141	
Jul																						
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Oct																						
Nov																						
Dec																						
Jan																						
Feb																						
Mar																						
Apr																						
May																						
Jun																						
<b>Totals</b>	<b>98</b>	<b>1211</b>	<b>1164</b>	<b>82</b>	<b>1088</b>	<b>975</b>	<b>108</b>	<b>1319</b>	<b>1308</b>	<b>158</b>	<b>1960</b>	<b>1765</b>	<b>131</b>	<b>1677</b>	<b>1610</b>	<b>92</b>	<b>1311</b>	<b>1214</b>	<b>149</b>	<b>1819</b>	<b>1732</b>	

### Pleadings Assigned by District Year to Date



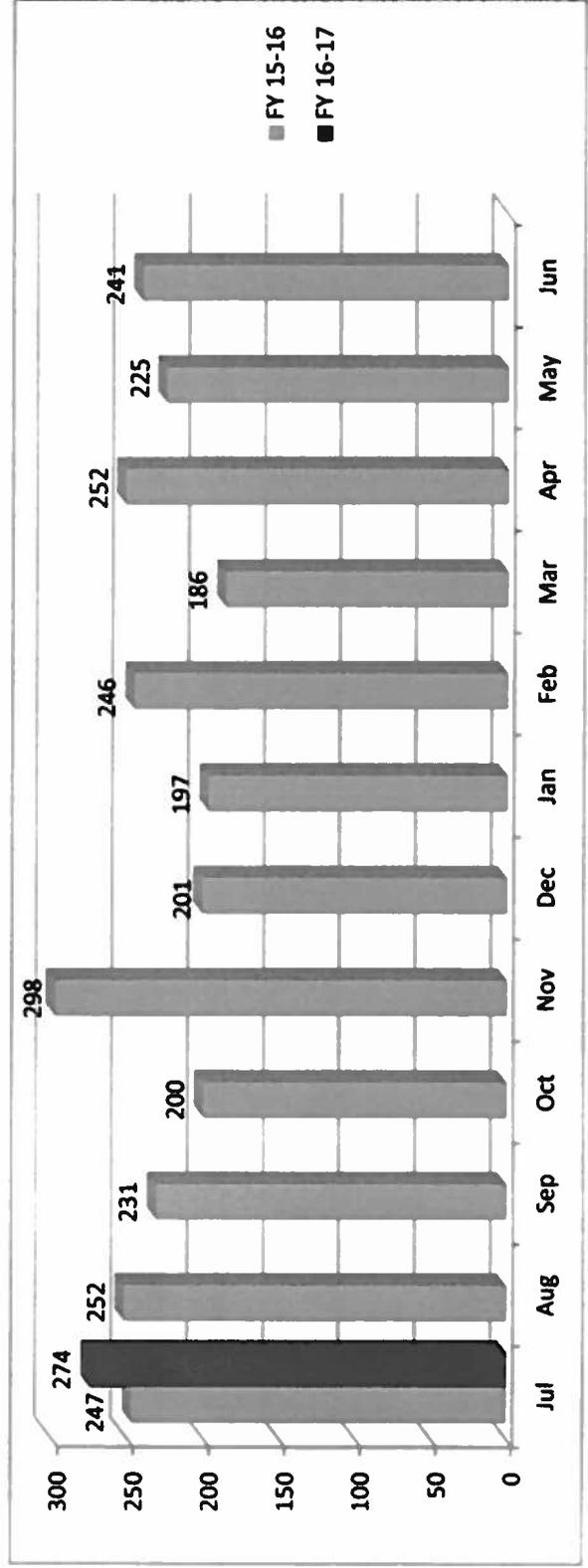
**Informal Conf. Conducted**

	FY 15-16	FY 16-17
Jul	247	274
Aug	252	
Sep	231	
Oct	200	
Nov	298	
Dec	201	
Jan	197	
Feb	246	
Mar	186	
Apr	252	
May	225	
Jun	241	
<b>Total</b>	<b>2776</b>	<b>274</b>



**FY 15-16**    **FY 16-17**  
**247**            **274**

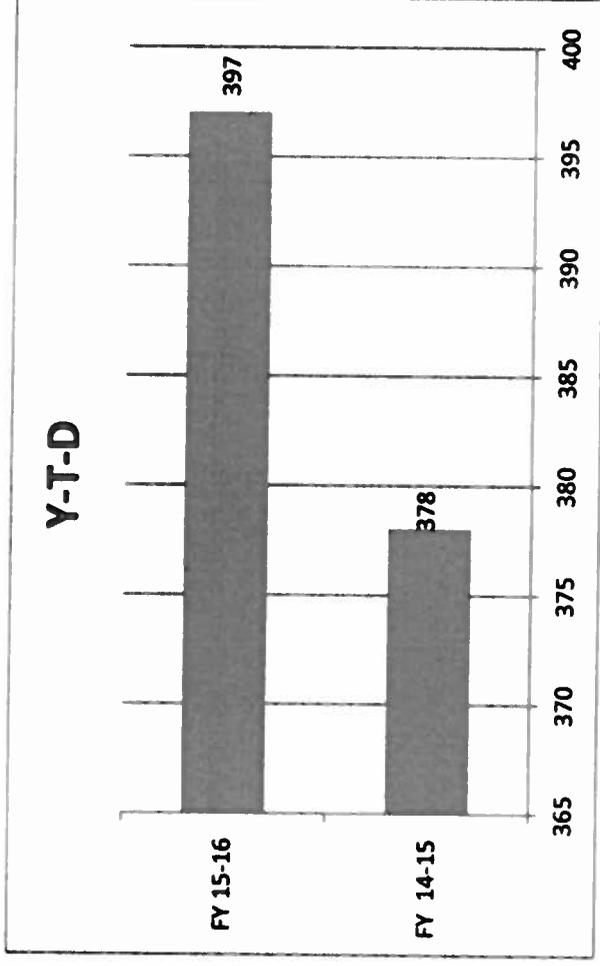
**Y-T-D**



**Informal Conf. Requested**

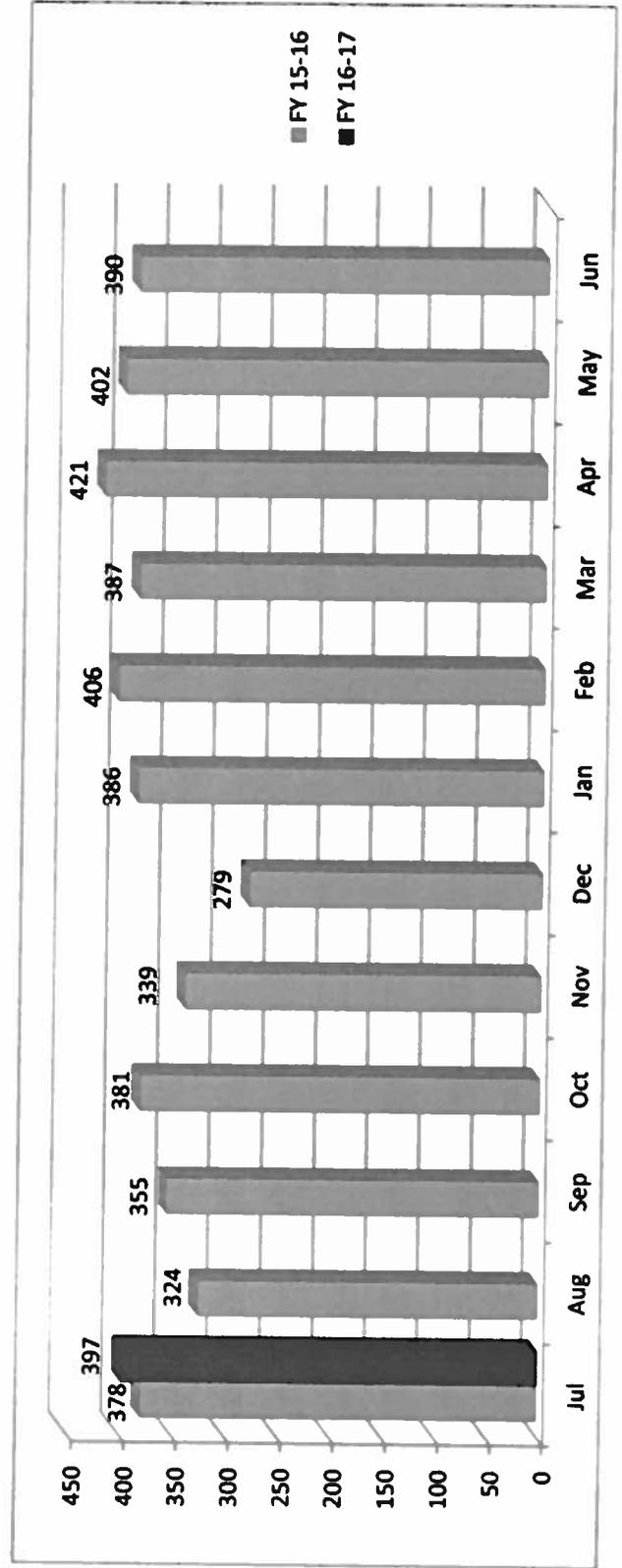
FY 15-16    FY 16-17

Jul	378	397
Aug	324	
Sep	355	
Oct	381	
Nov	339	
Dec	279	
Jan	386	
Feb	406	
Mar	387	
Apr	421	
May	402	
Jun	390	
<b>Total</b>	<b>4448</b>	<b>397</b>



FY 14-15    FY 15-16

Y-T-D	378	397
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## *Workers' Compensation Commission*

### **Executive Director's Report Gary M. Cannon**

**August 11, 2016**

#### **Financial Administration**

Loretta Dykes began employment on August 1 as the Commission's Fiscal Technician. With the change in personnel in the financial/budgeting/procurement area of the agency it has been necessary for me to allocate more time to these functions. This includes, but is not limited to the completion of the FY Financial Closing Packages, approving invoices and travel reimbursements requests, reviewing daily deposit reports, learning the State's financial/accounting/budget reporting system (SCEIS) in order to assist Ms. Dykes orientation to our financial and budgeting systems and completing year end reports for procurement activities during the year. As Ms. Dykes becomes more familiar with her duties and responsibilities less of my time will be required to be participating in the day to day details of these functions.

#### **Office Renovations**

The majority of Phase III is complete. Phase IV is underway. It is on schedule for completion by August 31.

#### **Personnel**

##### Attorney I

Recruiting began on August 2 for the Attorney I position. The closing date for accepting applications for the position is Tuesday, August 16.

##### IT Consultant I

Recruiting began on August 2 for the IT Consultant I position. The closing date for accepting applications for the position is Tuesday, August 23.

##### IT Business Analyst III

On Wednesday, August 3, Amanda Underhill, Business analyst III, tendered her resignation from the Commission effective September 1. Recruiting began on August 5. The closing date for accepting applications for the position is Friday, August 19.

### **Meetings/Activities**

The Executive Director participated in the following meetings/activities:

- Meetings with appropriate staff to discuss personnel changes on July 19, July 20, August 1, and August 3
- July 20 – Division of State Human Resources Advisory Meeting
- July 20 – Participated in IAIABC Executive Committee teleconference
- July 25-29 – Southern Association of Workers' Compensation Administrators Annual Meeting, Destin, Florida
- August 1 – Meeting/conference call to discuss proposed medical fee schedule
- August 2 – Meeting to discuss Compliance fines
- August 8 – Meeting to review SCEIS financial reporting systems
- August 8 – Meeting/conference call to discuss updates to medical fee schedule
- August 8 – Meeting to discuss Form 16A
- August 9 – Met with representative of CBRE regarding Subordination, Non-Disturbance and Attornment Agreement (SNDA)
- August 9 – Participated in IAIABC Executive Committee teleconference
- August 9 – Participated in IAIABC Regulation Committee teleconference
- August 10 – Meeting with outside legal counsel to discuss legal matter

### **Constituent /Public Information Services**

For the period July 13, 2016 through August 9, 2016 the Executive Director's Office and the General Counsel's office had 456 contacts with various system constituents and stakeholders. The contacts included telephone communications; electronic and personal contacts with claimants or constituents, state agencies, federal agencies, attorneys, service providers, business partners; and letters with congressional offices.

### **SCWCC Stakeholder Electronic Distribution List**

For the period July 13, 2016 through August 9, 2016, we added 16 individuals to the distribution list. A total of 643 individuals currently receive notifications from the Commission.

### **SC Vocational Rehabilitation Department (SCVRD)**

SCVRD reported six (6) referrals for the month of July in the following counties: Abbeville, Anderson, Greenville, and Lexington.

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## *Workers' Compensation Commission*

**TO: Commissioners**

**FROM: Gary M. Cannon**

**DATE: August 12, 2016**

**RE: Financial Report FY2016**

In light of the recent changes in personnel we were unable to provide you with the identical analysis with charts and graphs as provided in previous reports.

The General Appropriations Fund completed the fiscal year with "0" balance. All funds received by General Appropriations were expended. The Earmarked Fund completed the fiscal year with a positive balance of \$13,458.

In the Earmarked Fund the Commission budgeted \$2.428 million in general operating revenues and received \$2.475 million 2% overall increase. As a result of the collections we were required to utilize \$1.049 million of fund balance to match the \$5.5 million of budgeted expenditures. The Violation Fees realized a 4% increase of actual over budgeted. The largest percent increase, 1,334% of actual to budget, is shown in Other revenues. This total includes \$15,221.51 in unclaimed funds received from the Secretary of State's Office.

Expenditures in the General Appropriations revealed no surprises when comparing actual to budget. We expended 100% of the amount budgeted.

Total expenditures in the Earmarked Fund reflect a \$13,158 balance when comparing actual versus budget. The individual line items in Other Operating Expenses reflect zero budget and the actual expenditures. The Total line item in Other Operating Expenditures reflects the total and actual year to date expenditures.

The detailed supporting documentation will be distributed at the Business Meeting.

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## *Workers' Compensation Commission*

**TO: Commissioners**

**FROM: Gary M. Cannon**

**DATE: August 12, 2016**

**RE: Medical Services Provider Manual 2016**

At the July 15 Business Meeting the Commission received the first draft of the proposed Medical Services Provider Manual (Fee Schedule) for 2016 prepared by Optum 360. The Maximum Allowable Payments (MAP) contained in the Fee Schedule were calculated using the 2016 CPT codes developed by the American Medical Association and the 2016 Resource Based Relative Values (RBRVS) issued by the Center for Medicare/Medicaid (CMS) and a \$50 Conversion Factor. Additionally, the proposed rates were calculated in compliance with Act 183 enacted by the General Assembly in 2015, which placed statutory limitations in the change in the value of each CPT with no increase or decrease greater than 10%. The average overall increase was 2.58%.

The proposed Fee Schedule included changes in the Drug Screening services to use seven new HCPCS codes (three for screening and four for definitive drug testing) in the G section of HCPCS; a recommendation to consider the concept of establishing a MAP for Independent Medical Examinations (IME) based on the number of body parts with the maximum amount being \$1,500 for four body parts; a recommendation the MAP for the Nurse Case Managers fees utilize a modifier of 52 at 80% for services less than 30 minutes; and a recommendation for Physical Therapists fees be calculated using the Multiple Procedure Rule as required by CMS.

Subsequently, the consultants received 2014 Utilization Data for South Carolina from NCCI and calculated the impact on the overall cost to the eight categories utilizing the 2014 Utilization Data. Based on their analysis using the 2016 Proposed Fee Schedule the total dollars decrease is .50% and a Conversion Factor of \$50.45. A summary of the analysis is contained in the attached letter dated August 11 from Optum 360.

On July 19, the Commission published the proposed rates and requested stakeholder comment by July 29. The Commission received comments from four stakeholders. They are attached. The SC Orthopaedic Association (SCOA) opposed the proposal to reestablish a MAP for an IME. Coventry proposed alternative solutions to billing IMEs with specific number of body parts and clarifying the rule for the Functional Capacity Assessment Calculation. The American Association of Preferred Provider Organizations (AAPPO) "strongly" encouraged the

Commission to withdraw the proposal to apply the Multiple Procedure Rule provision to therapy services. The Injured Workers Advocate Association opposed reestablishing a MAP for IMEs.

Upon careful consideration of the stakeholder comments, staff recommends the Commission adopt the proposed Fee Schedule as recommended with a \$50 Conversion Factor and the exclusion of a MAP for an IME. A MAP for an IME should not be reestablished at this time. The IME fee should remain rated as Individual Consideration.



August 11, 2016

Gary M. Cannon  
Executive Director  
SC Workers' Compensation Commission

Dear Mr. Cannon,

At the request of the State of South Carolina, Workers' Compensation Commission, OptumInsight performed an analysis to update and compare the current SC 2015 fee schedule to a proposed fee schedule using 2016 RBRVS and Optum's Essential RBRVS gapfills. The National Council on Compensation Insurance, Inc. (NCCI) provided summary bill information for calendar year 2014 for the state of South Carolina for services corresponding to the current professional fee schedule. The NCCI data was used to determine the number of occurrences per procedure code to calculate a fee schedule neutral conversion factor.

The following bullets outline several validation steps made with the NCCI data. The initial NCCI data did not include the entire HCPCS section so that section has not been analyzed at this time.

- Original data contained ~ 3.5 million occurrences (units) – (includes CPT and Anesthesia records)
- Anesthesia data contained ~ 1.9 million occurrences (units/minutes), this data has been separated from the CPT codes and not analyzed
- Records that contained units or charges less than or equal to zero were excluded from the database
- Records containing modifiers that could duplicate occurrences were removed from the database (i.e., assistant surgeon modifiers 80-82, AS and co-surgeons modifier 62)
- Because procedure frequency was the focus all other modifiers were assumed valid and treated as 'blank' except for modifiers equal to 26, TC or 27. These three modifiers were retained as the fee schedule has specific fees for the professional and technical splits. The few occurrences of modifier 27 were changed to TC.

### **Project**

1. Optum provided an analysis of the 2015 Medical Services Provider fee schedule based on the 2015 RBRVS (gpci – adjusted), Optum's Essential RBRVS, +/- 9.5% caps and a conversion factor of \$50 to a proposed 2016 fee schedule using 2016 RBRVS (gpci – adjusted), Optum's Essential RBRVS gapfills, +/- 9.5% caps and a conversion factor \$50.

2. Due to rounding issues, some records even when capped exceed +/- 10%, these records were truncated accordingly. Also, due to caps and rounding, records that have global, professional (26) and technical (TC) components were adjusted so the TC equaled the global value minus the 26 component value. This did lead to some percent changes on the TC record to exceed +/- 10%.

3. Optum ran an analysis to calculate a conversion factor for the proposed 2016 fee schedule. The analysis showed that the overall conversion factor is \$50.45.

4. Once approved, Optum will create a final fee schedule deliverable that will include: non-facility and facility place of service fees with corresponding professional and technical components (where appropriate), CMS follow-up days and CMS assistant surgery indicators.

**Summary**

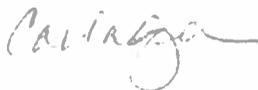
Category	Frequency	Total Current FS \$\$	Total Proposed FS \$\$	Tot freq %	ave freq % diff	% diff
evaluation & management	224,962	26,098,927	26,092,996	47.11	0.02%	-0.02%
laboratory/pathology	51,887	1,143,172	1,233,877	4651.90	8.97%	7.93%
medicine	27,343	1,919,738	1,944,413	454.65	1.66%	1.29%
physical therapy	906,004	38,568,990	38,739,299	2363.37	0.26%	0.44%
radiology	83,890	8,223,713	7,812,482	-1012.02	-1.21%	-5.00%
special reports	10,037	587,646	630,636	744.40	7.42%	7.32%
surgery	62,609	20,865,886	20,468,812	-1652.88	-2.64%	-1.90%
<b>Grand Total</b>	<b>1,366,732</b>	<b>97,408,071</b>	<b>96,922,514</b>	<b>5,597</b>	<b>0.41%</b>	<b>-0.50%</b>

Category	Frequency	Total Current FS \$\$	Total Proposed FS \$\$	Total 2016 RLV gpcl	CF Current	CF Proposed
evaluation & management	224,962	26,098,927	26,092,996	521,864	50.01	50.00
laboratory/pathology	51,887	1,143,172	1,233,877	25,331	45.13	48.71
medicine	27,342	1,919,717	1,944,392	39,245	48.92	49.54
physical therapy	906,004	38,568,990	38,739,299	781,439	49.36	49.57
radiology	83,890	8,223,713	7,812,482	145,068	56.69	53.85
special reports	1,683	105,121	106,361	2,127	49.42	50.00
surgery	62,609	20,865,886	20,468,812	395,640	52.74	51.74
<b>Grand Total</b>	<b>1,358,377</b>	<b>96,925,525</b>	<b>96,398,218</b>	<b>1,910,713</b>	<b>50.73</b>	<b>50.45</b>

Based on the analysis outlined above and comparing where the procedure code/modifier fee is greater than zero in both the current and proposed schedules, the total dollars decrease by **-0.50%** for the proposed 2016 fee schedule. The frequency weighted average percent difference is **0.41%**

There are some newly valued codes since 2015 that will now be valued for 2016.

Sincerely,



Carla Gee  
 VP/GM – Workers’ Compensation, Provider Data  
 and Network Solutions

# S.C. Orthopaedic Association



July 28, 2018

Mr. Gary Cannon  
Executive Director  
Workers' Compensation Commission  
1333 Main Street  
Post Office Box 1715  
Columbia, South Carolina 29202

Dear Commissioners,

The South Carolina Orthopaedic Association (SCOA) appreciates the opportunity to comment on the proposed update to the Medical Services Provider Manual. We also appreciate the Commission's commitment to providing this update annually. Overall, SCOA considers the proposed changes to be reasonable; however, we do not support the proposal to reestablish a Maximum Allowable Payment (MAP) for Independent Medical Examinations (IMEs).

The hallmark of a well functioning Workers Compensation system is the ability to avoid unnecessary delays in returning injured workers to function. While we did not advocate for the elimination of the MAP for IMEs originally, we were supportive in light of reports from other stakeholders that finding qualified experts to perform IMEs had become increasingly difficult. Enabling carriers and physicians the ability to negotiate a rate of service is the best way to ensure an adequate supply of physicians willing and able to provide that service.

To our knowledge, the stakeholder community has not rallied to express concern with the current policy. Reestablishing a MAP after several years of not having one is likely to create frustration among providers and could cause them to reduce the number of IMEs they will accept. Many providers establish contracted IMEs rates with payers and networks, so there is a mechanism in the market that can avoid individual negotiation for each evaluation which accelerates provision of these services.

Please let our organization know if we can provide any additional information or documentation as the Committee considers this important topic.

Sincerely,

A handwritten signature in black ink, appearing to read "Scott Porter".

Scott Porter, M.D., M.B.A., F.A.C.S.  
Greenville Health System  
President, South Carolina Orthopaedic Association

# Coventry



**RECEIVED**  
JUL 29 2016  
S. C. WORKERS' COMP. COMM.  
EXECUTIVE DIRECTOR

July 29, 2016

Ms. Kim Ballentine  
SC Workers' Compensation Commission  
1333 Main Street, 5<sup>th</sup> Floor  
PO Box 1715  
Columbia, SC 29202-1715

Submitted via E-mail to: [kballentine@wcc.sc.gov](mailto:kballentine@wcc.sc.gov)

Re: Public Comments of Coventry on the Proposed Changes to the 2016 Medical Services Provider Manual

Dear Ms. Ballentine:

Thank you for the opportunity to provide feedback on the proposed changes to the 2016 Medical Services Provider Manual. After a thorough review of the rules, we would like to provide the following comments:

**I. Providers Billing for Independent Medical Examination (IME) Exams Are Unable to Specify the Number of Body Parts Examined**

**Issue:** Currently, the 2015 South Carolina Medical Fee Schedule requires billing of an IME using CPT code 99456. In the newly proposed fee schedule rule, IME pricing is based on the number of body parts examined. However, it will be difficult for a provider billing for an IME to delineate the specific number of body parts being examined, and will thus likewise be difficult for payers to determine correct reimbursement.

**Solutions:**

***Solution 1:***

Modify the proposed rules to include a specific CPT code for each number of body parts. Doing so would decrease processing time and improve billing accuracy.

***Solution 2:***

The number of body parts could be determined by indicating a number of units billed for CPT 99456.

**II. The Functional Capacity Assessment Calculation in Section 7 under "Physical Medicine" as Proposed Conflicts with the Example Provided**

**Issue:** Currently, the 2015 South Carolina Medical Fee Schedule reads as follows: "Functional Capacity Assessment - To report a functional capacity assessment (or key functional assessment) use CPT code 97750 and bill the time up to a maximum of twelve (12) units. Total payment for a functional capacity assessment must not exceed \$528.00 (12 units of 97750 X \$44.00)."

The proposed 2016 rule specifies that the value of CPT code 97750 is to be increased to \$48.00 per unit; however, the sample calculation provided shows that only one unit is to be reimbursed at \$48.00 with the subsequent 11 units to be reimbursed at \$36.00 per unit. As a result, it is unclear if CPT 97750 is proposed to be reimbursed at a rate of \$48.00 regardless of the number of units billed, or whether the first 97750 unit is to be reimbursed at \$48.00 with each additional unit reimbursed at \$36.00, with a corresponding max unit billed of 12 units (for a total of \$444.00).

**Solution:** Clarify the proposed rules to indicate whether CPT 97750 is intended to be reimbursed at a flat \$48.00 per unit, or whether the multi-tiered rules for the initial and subsequent units billed with the \$444.00 cap is intended to apply.

I thank you for your time and consideration to the aforementioned comments. Please do not hesitate to contact me if you should require any additional information and/or if you should have any questions.

Best regards always,

*Glenn L Wright*

Glenn Wright  
Senior Regulatory Business Analysis  
Coventry  
Electronic Mail: [glwright@cvt.com](mailto:glwright@cvt.com)  
Direct: (801) 360-0160

## **Ballentine, Kim**

---

**From:** Wright, Glenn <glwright@cvtv.us.com>  
**Sent:** Friday, July 29, 2016 3:48 PM  
**To:** Ballentine, Kim  
**Subject:** 2016 MSPM Comments From Coventry  
**Attachments:** SC Public Comments July29.pdf

Thank you for the opportunity to submit comments Regarding the 2016 Medical Services Provider Manual changes. Our submission is attached.

Glenn Wright  
Sr. Business Analyst; Business Consulting and Analysis  
Cell: 1.801.360.0160  
Office: 1.801.256.7138  
[glwright@cvtv.us.com](mailto:glwright@cvtv.us.com)



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# American Association of Preferred Provider Organizations



**American Association of Preferred Provider Organizations**

**July 29, 2016**

**VIA EMAIL: [kballentine@wcc.sc.gov](mailto:kballentine@wcc.sc.gov)**

**Gary Cannon**

**Executive Director of Workers' Compensation**

**State of South Carolina**

**Workers' Compensation Commission**

**1333 Main Street, 5<sup>th</sup> Floor**

**Columbia, S.C. 29202**

**RE: Comments Addressing Proposed Changes to the Medical Services Provider Manual**

**Dear Mr. Cannon:**

**Thank you for the opportunity to present comments concerning the proposed changes to the Medical Services Provider Manual, effective September 1, 2016. The American Association of Preferred Provider Organizations ("AAPPO") is the leading national association of preferred provider ("PPOs") and Workers' Compensation organizations. Through our members, we work on behalf of thousands of injured workers throughout the country, including in South Carolina. We appreciate the opportunity to provider comment to the South Carolina Workers' Compensation Commission ("WCC").**

**On July 19, 2016, the WCC published a notice of proposed changes to the Medical Services Provider Manual ("Proposal") that included, among other things, the application of the Medicare Multiple Procedure Payment Reduction ("MPPR") to multiple of Current Procedural Terminology ("CPT") codes used within the care of injured workers. While we appreciate the WCC's efforts to ensure timely and quality care to injured workers throughout the state, we strongly believe application of these proposed policies, especially to physical therapy providers and patients, will lead to unintended consequences for injured workers and will actually have the opposite effect of what the State is trying to achieve.**

**AAPPO is concerned that any additional and arbitrary reductions to physical therapy patients under the MPPR proposal will create significant challenges to quality care for injured workers and providers as well. The American Medical Association has already reduced the practice expense values of physical therapy codes, including those listed in the Proposal, to avoid duplication of the proposed MPPR policy for Medicare. The time spent on the pre-service and post-service activities was spread across three units of services based on the assessment that the typical therapy visit is approximately 45 minutes. The majority of CPT codes billed by physical therapists are direct one on one 15 minute timed codes. For each code billed, the therapist spends 15 minutes of time with the patient and therefore there is no overlap or duplication of the work component. The**

application of the MPPR provision within the Proposal will only lead to further duplication, likely leading to significant challenges to access care by injured workers.

In closing, we strongly encourage the Commission to withdraw the proposal to apply the MPPR provision to therapy services. We believe that if the proposed MPPR provisions are implemented, there will be significant challenges to both injured workers receiving physical therapy care in the state as well as the providers who treat them.

Thank you for your consideration.

Sincerely,

A handwritten signature in black ink, appearing to read "Julian Roberts". The signature is fluid and cursive, with a large initial "J" and "R".

**Julian Roberts**  
**President and CEO**  
**American Association of Preferred Provider Organizations (AAPPO)**  
**3774 Lavista Road, Suite 101**  
**Tucker, GA 30084**  
**o: 404/634-8911**  
**e: [jroberts@aapan.org](mailto:jroberts@aapan.org)**

**Ballentine, Kim**

---

**From:** Holden, Robert A. <RAH@stateside.com>  
**Sent:** Friday, July 29, 2016 1:59 PM  
**To:** Ballentine, Kim  
**Subject:** WCC Medical Services Provider Manual  
**Attachments:** AAPPO WCC Comments.pdf

Dear Ms. Ballentine,

Please find attached comments from AAPPO regarding the Medical Services Provider Manual. Thank you for your consideration.

**Robert A. Holden**  
Telephone: (703) 525-7466

IWA

**Ballentine, Kim**

---

**From:** Ric Davis <rdavis@christiananddavis.com>  
**Sent:** Wednesday, July 27, 2016 3:17 PM  
**To:** Ballentine, Kim  
**Cc:** Steven Goldberg; Bonnie@injuredworkersadvocates.com  
**Subject:** Re : Proposed changes to the MSPM--Comments by Injured Workers Advocates

**Gary Cannon**  
**Executive Director**  
**South Carolina Workers Compensation Commission**

**Re : Proposed changes to the MSPM--Comments by Injured Workers Advocates**

**Dear Gary,**

**On behalf of the Injured Workers Advocates, thank you for the opportunity to comment on the proposed changes to the Medical Services Provider Manual. As a member of the Executive Committee of IWA, I have been authorized to speak on behalf of IWA as to the changes proposed relating to fees for IME's as well as charges for special reports and questionnaires.**

**Specifically, IWA requests that the Commission not schedule fees for Independent Medical Exams or Specials Reports. Instead, it is proposed that the Commission retain the current practice of individual consideration and allow for negotiation between the provider and stakeholders. The reasons for opposing the proposed changes are as follows:**

**First, the proposed changes, in reality, only apply to injured workers as only injured workers case expenses are subject to approval. Insurance carriers will continue to negotiate fees regardless of what is provided by the MSPM.**

**Second, unfettered access to medical opinions is essential to the full and fair development of evidence. Scheduling fees for independent medical evaluation will unfairly have a chilling effect on the access to medical evaluations in some situations.**

**Third, unrestricted access to medical providers is important. Individual consideration of fees in light of the complexity of medical issues as well as the varying degrees of experience of the medical providers is more fair to all involved. The process is better served by permitting negotiation between the claimant's counsel and the chosen medical examiner. If medical treatment is to be provided, the treatment will be subject to the fee schedule. A one size fits all approach may well deprive an injured worker of the opportunity to secure a necessary medical opinion that could ultimately affect the medical care rendered.**

**Fourth, occasionally physicians write a letter or respond to a brief questionnaire at no charge or in an amount less than the proposed schedule. The fee schedule may well create or increase those fees that would be better left to individual negotiation and review.**

**Finally, IWA is not aware of a pattern of issues regarding cost of IME's or Special Report fees that would mandate aggressive regulatory intervention beyond the checks and balances which are already in place. Members of the claimants' bar are aware of the scrutiny of case expenses by the Commission and believe the current practice of individual consideration would continue to best serve the delivery of justice within the workers compensation system.**

Also, unrelated to the changes, members have requested that the Commission make a copy of the MSPM online.

Thank you for the opportunity to comment. If additional information or comment is needed, please let us know.



**Ric Davis**

**1007 East Washington Street**

**Greenville, SC 29601**

**Phone: 864-232-7363**

**Fax: 864-370-3731**

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# Concentra

**Ballentine, Kim**

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**From:** Gilbert, Greg <Greg\_Gilbert@concentra.com>  
**Sent:** Monday, August 01, 2016 3:03 PM  
**To:** Ballentine, Kim  
**Subject:** Medical Fee Schedule

I know the deadline was Friday for comments but hopefully you will take these:

On the PT multiple procedure rule, you should consider adding more detail to be clear on what procedure should be paid at 100% of the MFS before the MPR is applied. Most states that use a MPR, will state the highest priced code on the bill, not the one that is listed first, would be paid at 100%.

Please let me know if you have any questions.

Regards,

**Greg Gilbert**  
SVP of Reimbursement and Government Relations  
Concentra  
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**DRAFT**

# Commission 2017 Calendar

**DRAFT**

## JANUARY

- 2 – New Year's Day (observance)
- 9 – Commission Business Meeting
- 10 – Commission Appellate Panel Hearings
- 13, 14, 15 – IWA Paralegal Conference, Greenville Marriott, Greenville
- 16 – Martin Luther King Day

JANUARY						
S	M	T	W	Th	F	S
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	7	8	9*	10*	11	12
13*	14*	15*	16*	17	18	19
20	21	22	23	24	25	26
27	28	29	30	31		

## FEBRUARY

FEBRUARY						
S	M	T	W	Th	F	S
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12	13*	14*	15	16	17	18
19	20*	21	22	23	24	25
26*	27*	28*				

## FEBRUARY

- 13 – Commission Business Meeting
- 14 – Commission Appellate Panel Hearings
- 20 – President's Day
- 26, 27, 28 – SCWCEA Medical Seminar (Myrtle Beach)

## MARCH

- 20 – Commission Business Meeting
- 21 – Commission Appellate Panel Hearings

MARCH						
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## APRIL

APRIL						
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23	24	25	26	27	28*	29
30						

## APRIL

- 5, 6, 7 – SC Self-Insurers Conf, Hilton Myrtle Beach Resort
- 17 – Commission Business Meeting
- 18 – Commission Appellate Panel Hearings
- 28 – IWA Spring Seminar, Hilton Columbia Center, Columbia

## MAY

- 10 – Confederate Memorial Day
- 15 – Commission Business Meeting
- 16 – Commission Appellate Panel Hearings
- 29 – Memorial Day

MAY						
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## JUNE

JUNE						
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24	25	26	27	28	29	30

## JUNE

- 19 – Commission Business Meeting
- 20 – Commission Appellate Panel Hearings

## JULY

- 4 – Independence Day Holiday
- 14, 15, 16 – SCDTAA Conference, Asheville
- 17 – Commission Business Meeting
- 18 – Commission Appellate Panel Hearings

JULY						
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30	31					

## AUGUST

AUGUST						
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13	14	15	16	17	18	19
20	21*	22*	23	24	25	26
27	28	29	30	31		

## AUGUST

- 3, 4, 5 – SCAJ Convention, Hilton Head
- 6, 7, 8, 9 – NAWCJ Judiciary College, Orlando, FL
- 21 – Commission Business Meeting
- 22 – Commission Appellate Panel Hearings

## SEPTEMBER

- 4 – Labor Day
- 18 – Commission Business Meeting
- 19 – Commission Appellate Panel Hearings

SEPTEMBER						
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## OCTOBER

OCTOBER						
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22	23	24	25	26	27	28
29	30	31				

## OCTOBER

- 8, 9, 10, 11 – SCWCEA 41<sup>st</sup> Annual Educational Conference, Marriott Grande Dunes, Myrtle Beach
- 16 – Commission Business Meeting
- 17 – Commission Appellate Panel Hearings

## NOVEMBER

- 8, 9, 10 – Injured Workers' Advocates Conference, Ritz-Carlton, Amelia Island, FL
- 10 – Veterans Day (observance)
- 13 – Commission Business Meeting
- 13 – Commissioners & AAs Ethics & APA Training
- 14, 15 – Commission Appellate Panel Hearings
- 23, 24 – Thanksgiving Holidays

NOVEMBER						
S	M	T	W	Th	F	S
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5	6	7	8*	9*	10*	11*
12	13*	14*	15*	16	17	18
19	20	21	22	23*	24*	25
26	27	28	29	30		

## DECEMBER

DECEMBER						
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17	18	19	20	21	22*	23
24	25*	26*	27	28	29	30
31						

## DECEMBER

- 11 – Commission Business Meeting
- 12 – Commission Appellate Panel Hearings
- 22 – Christmas Eve (observance)
- 25, 26 – Christmas Holidays