

<b>Workers' Compensation Information Systems (WCIS)</b>	<b>RULEMAKING COMMENTS 15 DAY COMMENT PERIOD</b>	<b>NAME OF PERSON/ AFFILIATION</b>	<b>RESPONSE</b>	<b>ACTION</b>
General Comment	Commenter has reviewed the proposed revisions to the regulations and has no comments as this time.	Peggy Thill Claims Operations Manager State Compensation Insurance Fund (SCIF) September 18, 2014 Written Comment	Acknowledged.	None.
CA EDI Implementation Guide – Version 2.0 – Lien Bills Data Element Requirement Table DN0760 – Page 73	<p>Commenter recommends replacing “NA” with “MC” for original lien settlement bills to conform to the IAIABC Workers’ Compensation Medical Bill Data Reporting Implementation Guide Release 2.0 requirement for DN076.</p> <p>Commenter notes that currently, on Page 73, the Guide indicates the DN076 is not applicable (NA) when reporting an original lien settlement bill, but in the Business Condition/Mandatory Trigger section states “Required when reporting bill adjudication action related to medical bill(s) previously paid.”</p> <p>Commenter notes that the IAIABC reporting requirement states:</p>	Stacy Jones Senior Research Associate California Workers’ Compensation institute (CWCI) September 19, 2014 Written Comment	Agree.	On the California Medical Implementation Guide, Lien Bills Data Element Requirement Table, for DN 0760- Prior Actual Amount Paid, for original bills change the “NA” to “MC”.

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	<p>“DN0760 (Prior Actual Amount Paid) will be populated with the total amount the insurer or claim administrator previously paid for all medical bills contained in the aggregate or summary record.”</p> <p>Commenter opines that if the data element is not applicable to original lien settlement bills then the conditional language should be removed.</p>			
<p>CA EDI Implementation Guide – Version 2.0 - Lien Bills Data Element Requirement Table DN0729 – Pages 72 and 73</p>	<p>Commenter recommends that the Division include an explanation of the deletion of DN0729 and the related California jurisdiction codes that were previously required for reporting lien settlements in the Final Statement of Reasons.</p> <p>Commenter notes that the IAIABC workers' Compensation Medical Bill Data Reporting Implementation Guide Release 2.0 identifies three Lump Sum Payment/Settlement codes (SP, SF and AW), which serve as replacements for the jurisdictional codes (MDS10, MDO10, MDS11, MDO11, MDS21, MDO21) currently required for WCIS</p>	<p>Stacy Jones Senior Research Associate California Workers' Compensation institute (CWCI) September 19, 2014 Written Comment</p>	<p>IAIABC Medical Bill Reporting Implementation Guide Release 2.0 recommends only reporting bill level information, for settlements or awards where payments for multiple bills or multiple lines are aggregated to a single amount. Due to this standard, DWC is not requiring reporting of line level information for lien bills. This eliminates the reporting of Jurisdictional codes (MDS10, MDO10, MDS11, MDO11, MDS21, MDO21) which were being reported at</p>	<p>None taken.</p>

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	reporting. Commenter opines that an explanation regarding the change in reporting requirement would serve to highlight programming changes that may be required to capture information in a different manner for WCIS reporting purposes.		<p>the line level CA Medical Bill Payment Records version 1.1.</p> <p>In most cases, trading partners will use "SF" rather than "SP," or "AW." IAIABC uses all three codes because there are some jurisdictions that have partial settlements. Because we need to be consistent with the new IAIABC Guide and protocols, we are adopting this framework. California trading partners will generally use "SF" or "AW" to report a settlement or award, as appropriate.</p>	
CA EDI Implementation Guide – Version 2.0 - Lien Bills Data Element Requirement Table – Pages 72 and 73	<p>Commenter notes that the revised guide eliminates the need to collect line-level elements (DN0574, DN0729) for bundled lien bill payments. Commenter would like to know if the WCIS will rely on the Lump Sum Payment/Settlement Code (DN0293) to determine appropriate edits for these types of bills.</p> <p>Commenter states that according to</p>	Jill Molitor Compliance Specialist Americas, Insurance LOB September 17, 2014 Written Comment	Same as above.	None taken.

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	<p>the IAIABC Guide, the valid codes for this element are the following:</p> <p>DN0293 Lump Sum Payment/Settlement Code SP = Settlement Partial SF = Settlement Full AW = Award</p> <p>Commenter would like to know how insurers will be required to determine which code is used. Will there be a crosswalk from the lump sum lien payment codes currently reported for DN0729 Jurisdiction Procedure Paid code to determine the value for DN0293? Or will the DWC provide specific definitions of the DN0293 codes (as they pertain to the different types of lump sum bundled lien bill payments) which might assist insurers in determining which code should be reported?</p>			
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