



Ohio Self-Insured Managed Care Programs

Qualified Health Plan (QHP) / Policy Rule 4123-19-03(k)

Fast facts

- › Monopolistic state
- › Governing body is the Ohio Bureau of Workers' Compensation (BWC)
- › Changes to plans must be filed 30 days in advance of the change
- › Genex will assist the self insured employer by providing the required components of the program
- › Programs for self-insured employers:
 - Qualified Health Plan (QHP)
 - Policy Rule 4123-19-03(k)
- › QHP optional for employers who received their state authorized self insured status as of 11/14/03
- › Certification is for three years
- › Employer initiated and driven by the employer
- › Employers can contract with any vendor they choose to supply components of their plan
- › All new self-insured employers must meet the SI rule 4123-19-03(k) or implement a QHP

Certified managed care helps bring a cooperative team approach to the delivery of health care in the workers' compensation environment. Partnering with Genex leverages the benefits of an MCP while utilizing our proven expertise in disability management. Genex programs are designed to meet all of the criteria of Administrative Rules. Let us work with you to enhance your current program — and realize the many benefits to employees, employers, and payers.

Employee benefits

- › Immediate, toll-free access
- › Choice of occupationally focused physicians
- › Case managers who provide understanding of treatment and recovery options
- › Alternative Dispute Resolution (ADR)
- › Goal of return to work

Employer benefits

- › Immediate notification of injury or case/claim
- › Occupationally focused network
- › Highly skilled case managers who continually monitor cases and provide ongoing communication
- › Alternative Dispute Resolution (ADR) with a goal of increased employee satisfaction
- › Structured return-to-work programs

Payer benefits

- › Timely reporting
- › Early case intervention when needed
- › Internally developed guidelines to assure that the right resources are deployed at the right time
- › Proactive communication between the Genex team of clinical experts and payer's staff



Plan administrator

- › Kimberly Hudson
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For over 35 years, Genex has helped customers manage disability and lost productivity costs through a full portfolio of consumer-focused managed care services. Our expertise is the result of a unique blend of clinical, informational, and technological knowledge that helps us optimize the outcome of each case —outcomes that are further enhanced by managing worksite injuries in a managed care environment.

Legislation

The Qualified Health Plan (QHP) was established for use with the passing of House Bill 107 on July 20, 1993. Self-insured policy rule 4123-19-03(k) effective November 14, 2003 made the QHP optional for self-insured employers.

Required components

Qualified Health Plan (QHP)

- › Alternative Dispute Resolution (ADR) process
- › Peer review process
- › Utilization review process
- › Change process for dissatisfied employees
- › Network of selectively contracted providers
- › Injury reporting mechanism
- › Quality assurance
- › Standardized data reporting
- › Financial incentives to reduce costs and ensure proper utilization
- › Employee and provider education

Policy Rule 4123-19-03(k)

- › Employer must provide list of health care providers
- › Employer will provide a plan for medical management of the claims
- › Employer will document process to handle authorization and denial of medical treatment
- › Employer will provide a procedure on how they will provide timely and accurate reporting upon request from the BWC

Responsibilities

- › It is important to note that self-insured employers wanting to participate in the QHP or meeting the requirements of Policy Rule 4123-19-03(k) must work directly with the Ohio BWC. Genex is available for any consultative services needed, but the Ohio BWC only recognizes the self-insured employer.