

**Agency Programs/Activities: Inventory and Key Data  
Workers' Compensation Board**

Relation to Core Mission (H/M/L)	Program/Activity	Spending Category (SO, ATL, CAP)	3/31/09 FTEs (All Funds)	General Fund Disbursements (\$000s)				State Special Revenue Funds Disbursements (\$000s)				Capital Projects Funds Disbursements (\$000s)			
				2006-07 Actual	2007-08 Actual	2008-09 Plan	2009-10 Projected	2006-07 Actual	2007-08 Actual	2008-09 Plan	2009-10 Projected	2006-07 Actual	2007-08 Actual	2008-09 Plan	2009-10 Projected
High	Adjudication of Claims	SO	420					50,225	50,719	51,387	52,782				
High	Case Preparation	SO	530					66,369	65,210	64,873	65,852				
High	Payment of Claims	SO	52					6,218	6,280	6,400	6,535				
High	Appeals	SO	97					11,600	11,714	11,846	12,190				
High	Compliance	SO	183					19,133	19,925	22,358	22,998				
Medium	Arbitration & Redetermination	SO	23					2,750	2,777	2,815	2,890				
Medium	Customer Service	SO	116					11,480	12,801	14,220	14,578				
Medium	Self Insurance	SO	50					6,447	13,485	13,870	14,839				
Low	Revenue Efforts	SO	26					3,109	3,140	3,182	3,267				
Low	Data Collection	SO	36					4,305	4,347	4,442	4,524				
Low	Outreach	SO	6					718	725	747	754				
	<b>Total</b>		<b>1539</b>					<b>182,354</b>	<b>191,123</b>	<b>196,140</b>	<b>201,209</b>				

**NYS Workers Compensation Board  
PROGRAM INFORMATION SHEET**

**Program:** Adjudication of Claims

**Mandate:**

All of the provisions of the WCL are utilized in the application of this program's statutory authority, especially as set forth in Section 141 through Section 150 of the WCL.

**Mandated Funding Level:**

There is no specific mandated funding requirement; however, the tasks associated with this program are funded through WC and DB assessments against insurance carriers, self insured employers and political subdivisions that are not related to the General Fund.

**Brief Description/History/Background:**

The Adjudication efforts encompass a wide variety of program efforts and include resolution of issues in a claim at a hearing, either in person or via video; resolution of issues in a claim informally through desk decisions; issue reserved decisions in complex cases, or cases with medical testimony; conduct hearings on issues related to the Uninsured Employers Fund and the other Special Funds contained in the WCL; negotiate Section 32 (lump sum) agreements with concerned parties of interest; travel to locations throughout the State in order to conduct hearings, conciliation meetings; review administrative determinations and desk decisions for unrepresented claimants; maintain the official record of hearings via verbatim reporting/transcripts; and coordinate the scheduling of hearings and conciliations in conformity with the criteria established related to the type of case, severity of issues, and availability of all parties of interest. The recently enacted WC reform legislation requires the Board to streamline it's adjudication process

**Issues:**

The largest issue in this program related to the resolution of the large volume of casework that comes before the Board. Over 300,000 cases were resolved during the past year, and it is the Board's commitment to ensuring that the impact and requirements of the recent WC reform legislation are met. The outgrowth of one of the task forces created by the reform legislation requires the accelerated resolution of controverted cases, which will mandate that these cases should be fully resolved within 90 days - this creates a wide range of process and review changes, especially as they relate to indexing/setting up a case that are under development currently.

**Population Served:**

Injured workers, employers, insurance carriers, health care providers, attorneys, licensed representatives and other stakeholders in the workers' compensation system

**Performance Measures:**

There are a wide variety of performance measurements that are available to Board and program managers to review the workflow and outcomes of the issues related to adjudication. These reports are based upon case volume, or timeliness or quantity.

**NYS Workers Compensation Board  
PROGRAM INFORMATION SHEET**

**Program:** Case Preparation

**Mandate:**

All of the provisions of the WCL are utilized in the application of this program's statutory authority, with specific authority provided under Section 142.

**Mandated Funding Level:**

There is no specific mandated funding requirement; however, the tasks associated with this program are funded through WC and DB assessments against insurance carriers, self insured employers and political subdivisions that are not related to the General Fund.

**Brief Description/History/Background:**

The primary function related to this program requires processing and managing injured workers' cases through the workers' compensation system. The staff establish claimants' cases, perform case maintenance and assemble needed documentation of facts; and resolve uncontroverted issues relating to a case including the review of all documentation, case analysis, requesting needed documentation, outreach to parties and determining the best path to issue resolution - administrative determination, conciliation or a hearing before a WC Law Judge.

**Issues:**

There are multiple issues related to case preparation that are the direct result of the WC reform legislation that alters the way that this activity is performed by Board staff. This issue overlays the already huge volume of information that is collected (more than 1 million pieces of mail per month) for the voluminous caseload handled by the Board. The outgrowth of one of the task forces created by the reform legislation requires the accelerated resolution of controverted cases, which will mandate that these cases should be fully resolved within 90 days - this creates a wide range of process and review changes that are under development currently. One of the most significant areas is the change in the way that the Board will index/establish a claim - this is expected to occur in September 2008.

**Population Served:**

Injured workers, employers, insurance carriers, health care providers, attorneys, licensed representatives and other stakeholders in the workers' compensation system

**Performance Measures:**

There are a wide variety of performance measurements that are available to Board and program managers to review the workflow and outcomes of the issues related to case preparation. These reports are based upon case volume, or timeliness or quantity.

**NYS Workers Compensation Board  
PROGRAM INFORMATION SHEET**

**Program:** Payment of Claims

**Mandate:**

Various Sections of WCL including Section 15(8), Section 25-a, Section 26-a, Section 50(5) and Section 214

**Mandated Funding Level:**

There is no specific mandated funding requirement; however, the tasks associated with this program are funded through WC and DB assessments against insurance carriers, self insured employers and political subdivisions that are not related to the General Fund.

**Brief Description/History/Background:**

Payments are made to claimants and health providers, and reimbursement to carriers from various Special Funds based upon the law Section listed above. The types of payments made are unique to the Special Fund (listed above) that was created for each category of payment in order to ensure that claimants are not left without benefits. These payments include: cases that have been reopened subsequent to a certain amount of time having passed; cases where an employee with a permanent physical impairment is subsequently reinjured; cases where the employer failed to provide proper coverage; cases where payments are required to the disabled unemployed; or cases when a self insured employer goes into default. Many of the funds have been established for many years, for example, the Special Fund for Reopened Cases was established in 1933.

**Issues:**

The close out of the Special Disability Fund under Section 15(8) has been started as part of the Reform Legislation enacted in March 2007. This Fund provides for reimbursement to carriers for cases that are classified as "second injury" cases. Efforts continue with identifying and establishing the proper mechanisms to close out this Fund.

**Population Served:**

Injured workers, employers, insurance carriers, health care providers, attorneys, licensed representatives and other stakeholders in the workers' compensation system

**Performance Measures:**

There are some reports that are available to program managers to review the workflow related to these activities. These reports are based upon quantity and timeliness.

**NYS Workers Compensation Board  
PROGRAM INFORMATION SHEET**

**Program:** Appeals

**Mandate:**

Under various sections of WCL, claimants, carriers and Health Providers have the right to appeal. These include Section 23, Section 42, and Section 224, as well as Section 46 of the Volunteer Firefighter Law and Volunteer Ambulance Worker Law.

**Mandated Funding Level:**

There is no specific mandated funding requirement; however, the tasks associated with this program are funded through WC and DB assessments against insurance carriers, self insured employers and political subdivisions that are not related to the General Fund.

**Brief Description/History/Background:**

The Board was established in 1914. As part of its mandate, it is to decide whether to make an award for a workers' compensation or disability benefit case. As part of the law, claimants, carriers and health providers have the right to appeal that decision. These appeals may be filed under the Workers Compensation Law, Volunteer Ambulance Worker Law or the Volunteer Firefighter Benefit Law. These requests are reviewed and researched, and prepared for submission to the panel of Board Commissioners for their review and final determination on the request.

**Issues:**

The target of the program is the reduction of its inventory to 90 days while maintaining the quality of the decision.

**Population Served:**

Injured workers, employers, insurance carriers, health care providers, attorneys, licensed representatives and other stakeholders in the workers' compensation system

**Performance Measures:**

There are a variety of performance measurements that are available to Board and program managers to review the workflow and outcomes of the issues related to this area. These reports are based upon case volume, or timeliness or quantity.

**NYS Workers Compensation Board  
PROGRAM INFORMATION SHEET**

**Program:** Compliance

**Mandate:**

There are various sections of the workers' compensation law that require compliance. These include Section 26-a, Section 52, Section 131, Section 141, Section 213 and Section 220. In addition Section 136 of WCL, created the Fraud Inspector General office and the Internal Control Act under Article 45 of the Executive Law.

**Mandated Funding Level:**

There is no specific mandated funding requirement; however, the tasks associated with this program are funded through WC and DB assessments against insurance carriers, self insured employers and political subdivisions that are not related to the General Fund.

**Brief Description/History/Background:**

Part of the agency's mandate is to ensure compliance with the workers compensation law which was enacted in 1914. Over the years different sections of the law have been modified to provide stronger enforcement tools to achieve that goal. This includes the establishment of the Fraud Inspector General Office in 1996 and on a Statewide basis, the Internal Control Act was enacted in 1987 to provide reasonable controls over state operations. The Board maintains accountability and compliance with the laws and regulations by consistently assessing various functions and control systems. Such activities include the detection and investigation of non-compliant employers, stop work orders and the investigation of uninsured claims for workers' compensation and disability benefits. The detection of fraud during the conduct of these investigations may result in the filing and settlement of civil judgments for all debt owed to the Board under applicable sections of law. Compliance notices and penalties are sent to employers and carriers in observance of statutory requirements. Statutory requirements are enforced for medical providers in the treatment of injured workers, as well.

**Issues:**

The enacted 03/07 reform legislation and subsequent legislation empowered the agency to use stronger tools to encourage enforcement. These include the enforcement of "stop work orders", new felony and investigator subpoena powers; and assuring the availability of qualified health providers; continued authorization, monitoring and disciplining of medical professionals to ensure proper medical treatment is provided for the injured worker. Some of those initiatives have not been fully implemented.

**Population Served:**

Injured workers, employers, insurance carriers, health care providers, attorneys, licensed representatives and other stakeholders in the workers' compensation system.

**Performance Measures:**

There are some reports that are available to program managers to review the workflow and outcomes of the issues related to these activities. These reports are based upon case volume, or timeliness or quantity.

**NYS Workers Compensation Board  
PROGRAM INFORMATION SHEET**

**Program:** Arbitration and Redetermination

**Mandate:**

Under various section of WCL, claimants, carriers and Health Providers have the right to appeal. These include Section 13, Section 52.5 and 52.1(d), Section 213, and Section 220.

**Mandated Funding Level:**

There is no specific mandated funding requirement; however, the tasks associated with this program are funded through WC and DB assessments against insurance carriers, self insured employers and political subdivisions that are not related to the General Fund.

**Brief Description/History/Background:**

The Board provides administrative review of civil penalties imposed under the WCL. When questions are raised concerning the determination of an employers noncompliance, they are addressed as part of the review and redetermination process. As a result of this process, penalties and civil judgments can be imposed by the Board in order to collect debts owed to the Board. When there is a disagreement concerning medical billings, they can be resolved through the Administrative Award process or an arbitration hearing.

**Issues:**

Automation of some of these functions within the employer database would increase efficiency, in particular the new penalties issued under 52.1(d) and Section 131.3.

**Population Served:**

Injured workers, employers, insurance carriers, health care providers, attorneys, licensed representatives and other stakeholders in the workers' compensation system

**Performance Measures:**

There are a variety of performance measurements that are available to Board and program managers to review the workflow and issues related to arbitration. These reports are based upon timeliness or quantity.

**NYS Workers Compensation Board  
PROGRAM INFORMATION SHEET**

**Program:** Customer Service

**Mandate:**

The Board provides Ombudsman services to injured workers and business entities (WCL Sec. 13-h). This area also provides support for understanding all sections of the WCL.

**Mandated Funding Level:**

There is no specific mandated funding requirement; however, the tasks associated with this program are funded through WC and DB assessments against insurance carriers, self insured employers and political subdivisions that are not related to the General Fund.

**Brief Description/History/Background:**

The Board receives approximately one million telephone calls a year from injured workers, employers, insurance carriers, health care providers, attorneys, licensed representatives and other stakeholders in the workers' compensation system primarily through our virtual call center's efforts. Additional efforts are aimed at assisting injured workers with a variety of issues and returning them to work. In order to address the attendant issues associated with this volume of contact, the Board's goal is to provide timely, consistent and accurate information to all individuals and organizations that the Board interacts with. Additionally, the Ombudsman's Office for Injured Workers provides services to injured workers such as counseling, advocacy and liaison activities as well as assisting those injured workers return to work; whereas the Ombudsman's Office for Business assists with problems regarding insurance coverage, understanding experience modification and classification issues and compliance with the WCL.

**Issues:**

Issues are related to the impact/requirements of the WC reform legislation and the various task force findings related to the return to work mandates for vocational and rehabilitation workers. In addition to the centralized District Offices across the State, the Board provides access to Board records and proceedings through its Customer Service Centers, thereby allowing claimants and stakeholders the ability to interact with the agency more readily.

**Population Served:**

Injured workers, employers, insurance carriers, health care providers, attorneys, licensed representatives and other stakeholders in the workers' compensation system

**Performance Measures:**

There are a wide variety of performance measurements that are available to Board and program managers to review the workflow and outcomes of the issues related to this area. These reports are based upon case volume, or timeliness or quantity.



**NYS Workers Compensation Board  
PROGRAM INFORMATION SHEET**

**Program:** Self Insurance

**Mandate:**

The WCL Section 50 of the WCL requires New York State employers to provide coverage to their employees, and further states that employers may provide this coverage in one of three ways: by obtaining a policy from the State insurance Fund; by obtaining a policy from an insurance carrier; or by becoming self insured. Employers who elect to become self insured must apply to and be approved by the Office of Self Insurance (OSI). The OSI's mission is to allow for employers to become and remain self insured through their continual demonstration of their financial strength to pay their obligations under the Law.

**Mandated Funding Level:**

There is no specific mandated funding requirement; however, the tasks associated with this program are funded through WC and DB assessments against insurance carriers, self insured employers and political subdivisions that are not related to the General Fund.

**Brief Description/History/Background:**

The Office of Self Insurance is charged with regulatory oversight of the financial and compliance requirements to allow employers to self insure for workers' compensation and disability benefits in New York. These programs have been authorized in statute for decades and provide a cost beneficial alternative to the traditional insurance market for safety conscious employers who are large enough and have sufficient financial strength to demonstrate their ability to provide for their claimants. The self insurance programs include individual workers' compensation; group workers' compensation; political subdivision workers' compensation; and disability benefits. Depending upon the type of self insurer, there are various mechanisms in place to ensure that the benefits required under the Law are provided, regardless of the financial position of the self insurer. These currently include security deposits for individual self insurers (i.e., cash, letters of credit, surety bonds, securities) or dedicated trust funds for the group self

insurers. The OSI must continue to track employers after they have discontinued their self insurance programs to ensure that the benefits incurred while self insured are paid.

**Issues:**

There are several issues currently facing the self insurance program. Most significantly are: 1) recent defaults of several group self insured trusts; 2) recent legislation which requires the WCB to dramatically increase its regulatory oversight of the group self insurers; 3) redesign of the underlying security deposit system for individual self insurers and possibly group self insurers; and 4.) several lawsuits over the assessments related to the self insurers.

**Population Served:**

There are currently more than 1350 individual self insurers (450 active and 900 inactive); 83 groups (69 active and 14 inactive); 2300 self insured political subs; and more than 1100 employers that self insure for disability benefits.

**Performance Measures:**

There are some reports that are available to program managers to review the workflow related to these activities. These reports are based upon quantity and timeliness.

**NYS Workers Compensation Board  
PROGRAM INFORMATION SHEET**

**Program:** Revenue Efforts

**Mandate:**

Various Section of WCL provided for penalties for non compliance, failure to make timely payments and collection for assessments for payments from Special Funds and payment of the Board's administrative expenses. The major assessments and penalties fall under Section 15(8), Section 25, Section 26, Section 50(5), Section 52, Section 151, Section 228.

**Mandated Funding Level:**

There is no specific mandated funding requirement; however, the tasks associated with this program are funded through WC and DB assessments against insurance carriers, self insured employers and political subdivisions that are not related to the General Fund.

**Brief Description/History/Background:**

The Workers' Compensation Program started in 1914, the Disability Benefits program started in 1950. Many of these penalties were added, amended and changed over time. The revenue from these assessments and penalties go to fund the Board's various Special Funds, Board's administrative expenses, some funding for programs at DOL and DOH as well as some revenue to the General Fund.

**Issues:**

The method of assessments under some of the law Sections may be reviewed as part of a task force expected to be established in 9/08 as part of the recent legislation enacted in 06/08 related primarily for Self Insurance.

**Population Served:**

Injured workers, employers, insurance carriers, health care providers, attorneys, licensed representatives and other stakeholders in the workers' compensation system

**Performance Measures:**

There are some reports that are available to program managers to review the receipt for funds related to the different areas. These reports are based upon quantity and timeliness.

**NYS Workers Compensation Board  
PROGRAM INFORMATION SHEET**

**Program:** Data Collection

**Mandate:**

Section 35 for WCL authorizes the Board to collect statistics for claimants who have been awarded permanent partial disability. Following the Reform legislation in 03/07, a letter from former Gov. Spitzer established the Task force Data Collection Committee to review and identify the need for better data collection. The task force report to the Governor released by the Insurance Department in 03/08 identified those needs.

**Mandated Funding Level:**

There is no specific mandated funding requirement; however, the tasks associated with this program are funded through WC and DB assessments against insurance carriers, self insured employers and political subdivisions that are not related to the General Fund.

**Brief Description/History/Background:**

Data has been collected in various formats by various organization for many years, however, it was not centralized in one area. This makes it difficult to measure any changes or project what the impact would be if there is a change. To address that issue the situation was reviewed and a report issued to the Governor in 03/08 was prepared and released. This area also provides support/development of measures for other functional areas so they can measure performance.

**Issues:**

As part of the Report to the Governor several issues related to data collection were identified. To meet those goals, a data warehouse need to be developed. This effort cannot go forward without substantial funding.

**Population Served:**

WCB managers, government entities and other interested stakeholders

**Performance Measures:**

There are reports that measure quantity and timeliness of the activities related to the services provided by these units

**NYS Workers Compensation Board  
PROGRAM INFORMATION SHEET**

**Program:** Outreach

**Mandate:**  
None

**Mandated Funding Level:**

There is no specific mandated funding requirement; however, the tasks associated with this program are funded through WC and DB assessments against insurance carriers, self insured employers and political subdivisions that are not related to the General Fund.

**Brief Description/History/Background:**

Educational outreach is provided to the medical community to improve the delivery of WC health care programs. The provider community consists of a vast web of health care professionals and specialists. Knowledge and understanding of these complex laws is imperative in order to operate efficiently within this service arena. Proactive community outreach efforts ensure that qualified health care providers are fully equipped to treat injured workers. As part of the recent reform legislation a task force was created to establish medical guidelines for the treatment of worker compensation cases. This new requirement will mandate that the Board provide appropriate training to the medical community in order to comply with the law.

Outreach is provided to injured workers by presenting and promoting occupational illness and injury prevention information to injured worker advocacy groups, labor groups, and volunteer firefighter and fire-police and ambulance worker organizations. These efforts also include assisting claimants regarding their workers compensation claims and helping them in navigating the unique legal system handling their claims. Through the agency's website, information is provided related to the various resources available for injured worker and informational pamphlets are also made available. A major outreach initiative that was recently done was to provide information to anyone who may have been exposed during the 9/11/01 World Trade Center tragedy.

Outreach is provided to employers to help educate them on the various aspects of the WCL. This effort is in the form of presentations to different classes of employers. Additionally, outreach is also conducted to employers, insurance carriers, health providers and affected stakeholders regarding the implementation of new legislation, ultimately assisting in the business and technical process development. Efforts are active through a variety of options in addition to formal seminar presentations, for example, the WCB web site provides visitors with an array of resources and "go to" points within the agency.

**Issues:**

Frequent legislative updates require the Board to reach out to a large population of providers, labor and injured worker groups, and business entities.

**Population Served:**

Injured workers, employers, insurance carriers, health care providers, attorneys, licensed representatives and other stakeholders in the workers' compensation system

**Performance Measures:**

The managerial staff reviews key metrics reported on a monthly basis regarding the Board's outreach efforts to ensure that those parties/stakeholders that are involved in the workers compensation system are being served.