

**SISC I
WORKERS' COMPENSATION
BOARD OF DIRECTORS MEETING
April 16, 2015
9:00 A.M
A G E N D A**

I. CONSENT AGENDA

A. Approval of Minutes for March 2015 Board of Directors Meeting Nick Kouklis

B. Report of Claims for the Month of March 2015 in the Amount of \$1,500,875.32 and Bakersfield City Claims in the Amount of \$219,623.10 and Ratification of Payment of this Amount Nick Kouklis

Moved _____ 2nd _____

Yes _____ No _____ Abstain _____ Roll Call Vote _____

II. PUBLIC COMMENT

III. CLOSED SESSION – WORKERS’ COMPENSATION LIABILITY CLAIMS

The board may be required to adjourn to closed session for discussion of matters regarding a claim for the payment of tort liability losses, public liability losses, or workers’ compensation liability, authorized by Government Code 54956.95.

District	File No.	Claimant
NO SPECIAL CASES		

IV. RECONVENE TO OPEN SESSION

A. Reports from Closed Session, if Required

V. ACTION ITEMS

A. Financial Report - Presentation of Financial Statements for the Month of March 2015 Will Be Submitted for Approval

Kim Sloan

Moved _____ 2nd _____

Yes _____ No _____ Abstain _____ Roll Call Vote _____

VI. INFORMATION AND DISCUSSION ITEMS

A. Update on the Work Group/Gatekeeper Network

Maria Navarro

B. SISC I Risk Management Services Report

Christian Hootman

C. List of Special Cases Not Requiring Board Approval

Nick Kouklis

D. Board Member Election Update

Nick Kouklis

E. Comments from the Board of Directors Will Be Heard

F. Next Meeting:

Thursday, May 21, 2015

9:00 a.m.

SISC Board Room – Larry E. Reider Education Center

2000 K Street, Bakersfield, CA 93301

G. Adjournment

Moved _____ 2nd _____

Yes _____ No _____ Abstain _____ Roll Call Vote _____

Any materials required by law to be made available to the public prior to a meeting of the Governing Board of the SISC I JPA can be inspected at the following address during normal business hours at

2000 K Street, Bakersfield, Ca. 93301

For information regarding how, to whom, and when a request for disability-related modification or accommodation, including auxiliary aids or services, may be made by a person with a disability who requires a modification or accommodation to participate in the public meeting, please contact Kristy Comstock at 661-636-4682 or krcomstock@kern.org

*The number of Board Members needed to form a quorum for this meeting is six

Workers' Compensation Terminology

1. **All alleged claims are questioned and reviewed. They are then classified as either:**
 - a. **Admitted** - This means the claim is not being disputed and is accepted as a work related injury or illness.
 - b. **Alleged Injury** - this means the claim is questioned further to determine compensability. The claim is then either accepted (admitted) or denied in full, depending on the outcome of the workers' compensation process pursuant to the laws of the state.
2. **AME** – Agreed Medical Examiner
3. **AOE/COE** - Injury Arises Out of Employment/Course of Employment.
4. **Apportionment** - A portion of permanent disability (P.D.) that is due to a pre-existing condition, whether industrial or non-industrial, may be subtracted from the total amount of the permanent disability. Therefore, the total amount is "apportioned" between the injuries or conditions.
5. **Confidence Level** – The statistical certainty that an actuary believes funding will be sufficient. For example, an 80% confidence level means that the actuary believes funding will be sufficient in eight years out of ten.
6. **Expected Confidence Level** – This corresponds to approximately a 55% confidence level. Amounts above expected are prudent.
7. **Permanent and Stationary (P&S)** - the condition that is achieved once an individual's condition has stabilized and further medical treatment is not expected to produce further improvement. (As good as the person is going to get.)
8. **Qualified Injured Worker (QIW)** - When an injured worker is precluded (medically) from performing their usual and customary job duties, or the duties they were performing at the time of injury, they are considered a QIW for purposes of rehabilitation.
9. **The seven areas of payment:**
 1. **Medical** - Treatment to cure or relieve the effects of the injury.
 2. **Temporary Disability (TD)** - To compensate the injured worker for lost wages.
 3. **Permanent Disability (PD)** - To compensate the injured worker for the reduced ability to compete in the open labor market. The PD may or may not interfere with that individual's ability to perform their usual work activities.
 4. **Vocational Rehabilitation (Voc Rehab)** - In the past one of the most costly of the benefits. However, new legislation has now placed a ceiling of \$16,000.
 5. **Death**
 6. **Medical/Legal** - Costs to determine or resolve compensability and/or level of permanent disability.
 7. **Legal** - Cost for outside counsel to handle litigated cases.
10. **Thomas Finding** - The finding that the Workers' Compensation Appeals Board (WCAB) judge is required to make in order to settle an injured worker's right to future vocational rehabilitation benefits. The finding must be that good faith issues exist, which if resolved against the applicant would deny the applicant entitlement to all workers' compensation benefits.
11. **Three Types of Findings and Awards (F&A)**
 1. When the parties can't agree, the case is then tried and the judge issues the **Findings and Award**.
 2. **Stipulation with Request for Award (Stips)** - All parties agree and stipulate to the period of temporary disability (T.D.), any permanent disability (P.D.), and if there is, or is not, the need for future medical treatment. The claimant has the right to reopen this case within five years from the date of injury if he/she experiences any "new and further" disability that is directly related to the original injury.
 3. **Compromise and Release (C&R)** - All parties agree to a settlement amount and a lump sum payment is made. A C&R may close all issues or may leave open certain agreed-upon issues.
12. **Rodgers Finding** - includes any and all compensable consequences of the injury claimed herein including, but not limited to, liability for injuries to the same parts of the body as claimed herein occurring during the rehabilitation process which are the compensable consequences of the injury claimed herein.
13. **Additional Terminology**

ACOEM – American College of Occupational and Environmental Medicine - These are the medical guidelines used to establish appropriate medical diagnostics and treatment, and are presumed on the extent and scope of medical treatment regardless of the Date of Injury (DOI).

AMA – American Medical Association - sets forth the medical evaluation protocols and rating procedures to determine the extent of an individual's impairments.

DRE – Diagnosis-Related Estimate - One of two methods a physician uses to determine spinal impairment. It is the preferred method over Range of Motion (ROM).

DFEC- Diminished Future Earning Capacity -A component of the 2005 Permanent Disability Rating Schedule (PDRS), used in calculating the level of permanent disability sustained due to an industrial injury, taking into consideration one's resulting diminished future earning capacity.

MMI – Maximal Medical Improvement – Formerly known as Permanent and Stationary; defined as the point in time when the injured workers' condition is well stabilized and unlikely to change substantially in the next year with or without medical treatment.

MPN- Medical Provider Network- is a group of health care providers set up by an insurer or self-insured employer and approved by DWC's administrative director to treat workers injured on the job.

WPI – Whole Person Impairment – A loss, or loss of use, or derangement of any body part, organ system, or organ function. Impairment is considered permanent when it has reached Maximum Medical Improvement (MMI)