

JIMMY PATRONIS



FLORIDA'S CHIEF FINANCIAL OFFICER DEPARTMENT OF FINANCIAL SERVICES

2019 RESULTS & ACCOMPLISHMENTS REPORT

Division of Workers' Compensation



Prepared by:
Division of Workers' Compensation
Department of Financial Services
www.MyFloridaCFO.com/Division/WC/



Mission Statements

Department of Financial Services

To safeguard the integrity of the transactions entrusted to the Department of Financial Services and to ensure that every program within the Department delivers value to the citizens of Florida by continually improving the efficiency and cost effectiveness of internal management processes and regularly validating the value equation with our customers.

Division of Workers' Compensation

To actively ensure the self-execution of the workers' compensation system by educating system participants of their rights and responsibilities; by leveraging data to deliver exceptional value; and by holding participants accountable for fulfilling their obligations.



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Introduction

Chapter 440 is Florida's Workers' Compensation Law, and it enumerates an extensive list of duties performed by the Division of Workers' Compensation (DWC). While the Division is not responsible for adjusting claims, we assist injured workers, employers, health care providers, and insurers in following the Florida workers' compensation rules and laws.

The Division reviews its processes with an eye toward improvement at each level, using numerous measures and outcomes that reflect Florida's workers' compensation system and our mission. The following report features many of these measures and outcomes, including notable highlights such as:

- Approximately 365,000 customer interactions or touch-points with injured workers, employers, carriers, and health care providers afford the Division the opportunity to disseminate important workers' compensation system information.
- Providing Insurer Regulatory Reports (IRR) to all carriers audited during the year, enabling those carriers to compare their current and past claims-handling results with the industry averages, and allowing them to identify areas of performance excellence and opportunities for improvement.
- Secured over \$2,801,000 of additional benefit payments for injured workers.
- Over 76% of injured workers, who have lost more than 7 days of work due to a work-related injury, were successfully contacted and assisted with any claim disputes which limited unnecessary litigation.
- Due to training and triage efforts and the commitment by reporting entities, data acceptance rates increased more than 6% since FY 2014/15.
- Enhanced its web-based system permitting carriers and self-insured employers to pay their assessments more accurately and timely, meet their reporting obligations, and systematically account for revenues received by the Division.
- Ensure Florida employers compete on a level playing field and comply with the workers' compensation coverage laws through various compliance and educational activities.

The ultimate purpose of this publication is to provide insight into the unique aspects of the Florida workers' compensation system. We hope you find the data informative and beneficial.

If you would like to provide us with any feedback, please email us at: Workers.CompService@myfloridacfo.com

Medical Data Results

Medical data is summarized on a calendar basis. In 2018, the medical payments across nine categories of medical care providers totaled \$1,632,638,495. Within 12 months of injury, the total payments to these providers was \$944,400,126.

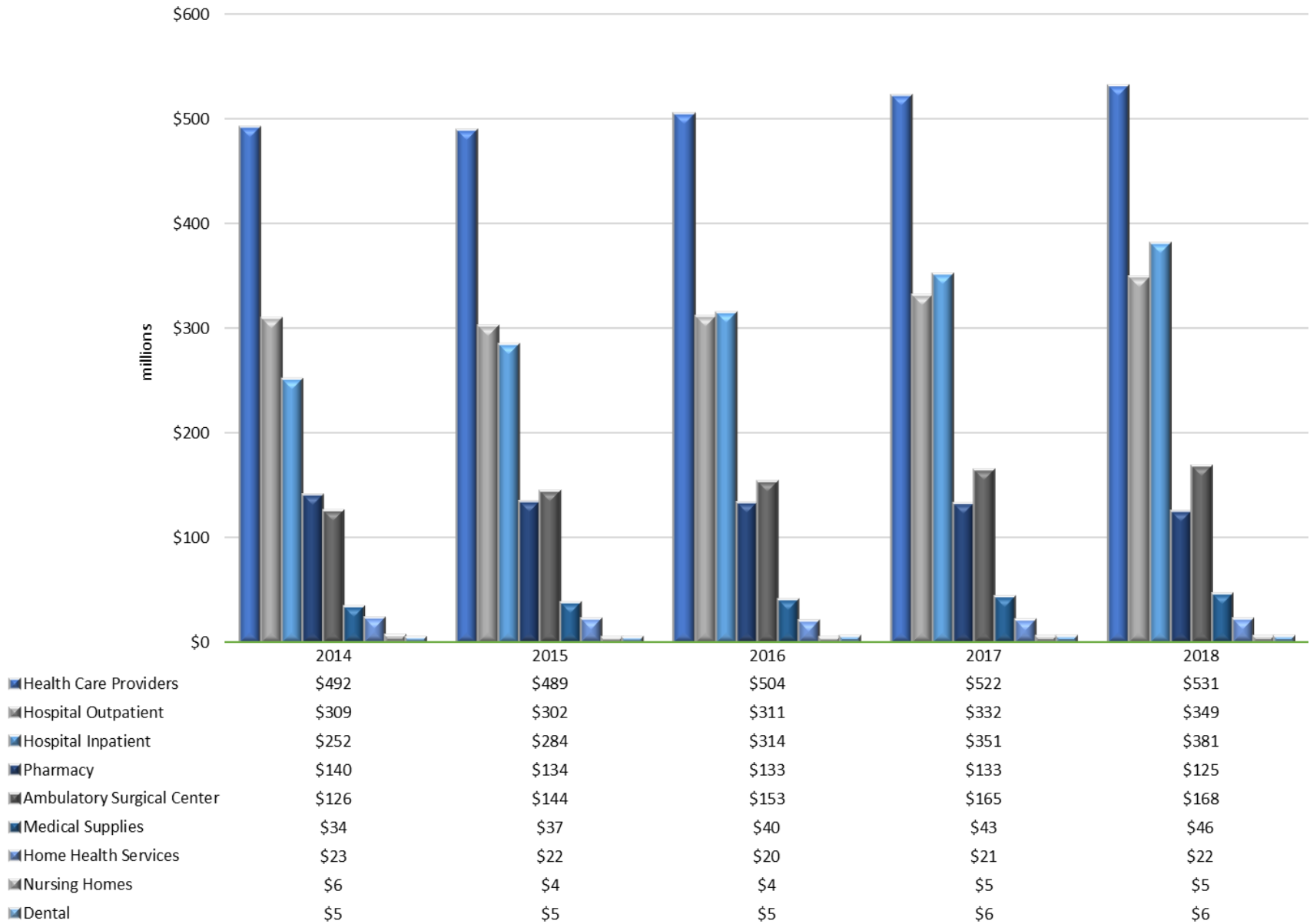
The Division of Workers' Compensation receives over 3.8 million medical bill records each year via electronic submission, which is the largest volume of Division received electronic data. Reporting of medical data begins with a work-related injury that required medical care from a physician, hospital, ambulatory surgical center (ASC), pharmacy, or other health care provider. The providers then submit medical bills to the applicable claim administrator for services rendered using the applicable medical claim forms (or electronic equivalents). The claim administrator or contracted medical bill review vendor adjudicates the medical bill.

When medical bills are received, the Division screens them by applying hundreds of edits which reject bills that do not meet Division requirements. The submitter is notified immediately if the submitted bill failed the edits and was subsequently rejected. Rejected medical bills are not considered filed timely until corrected, re-submitted, and accepted by the Division. 95.6% of all medical bills reported are accepted by the Division.

Medical bill reimbursement amounts are based on the agreed upon contract price or the maximum reimbursement allowance approved by the Three-Member Panel which are contained in reimbursement manuals adopted by the Division.

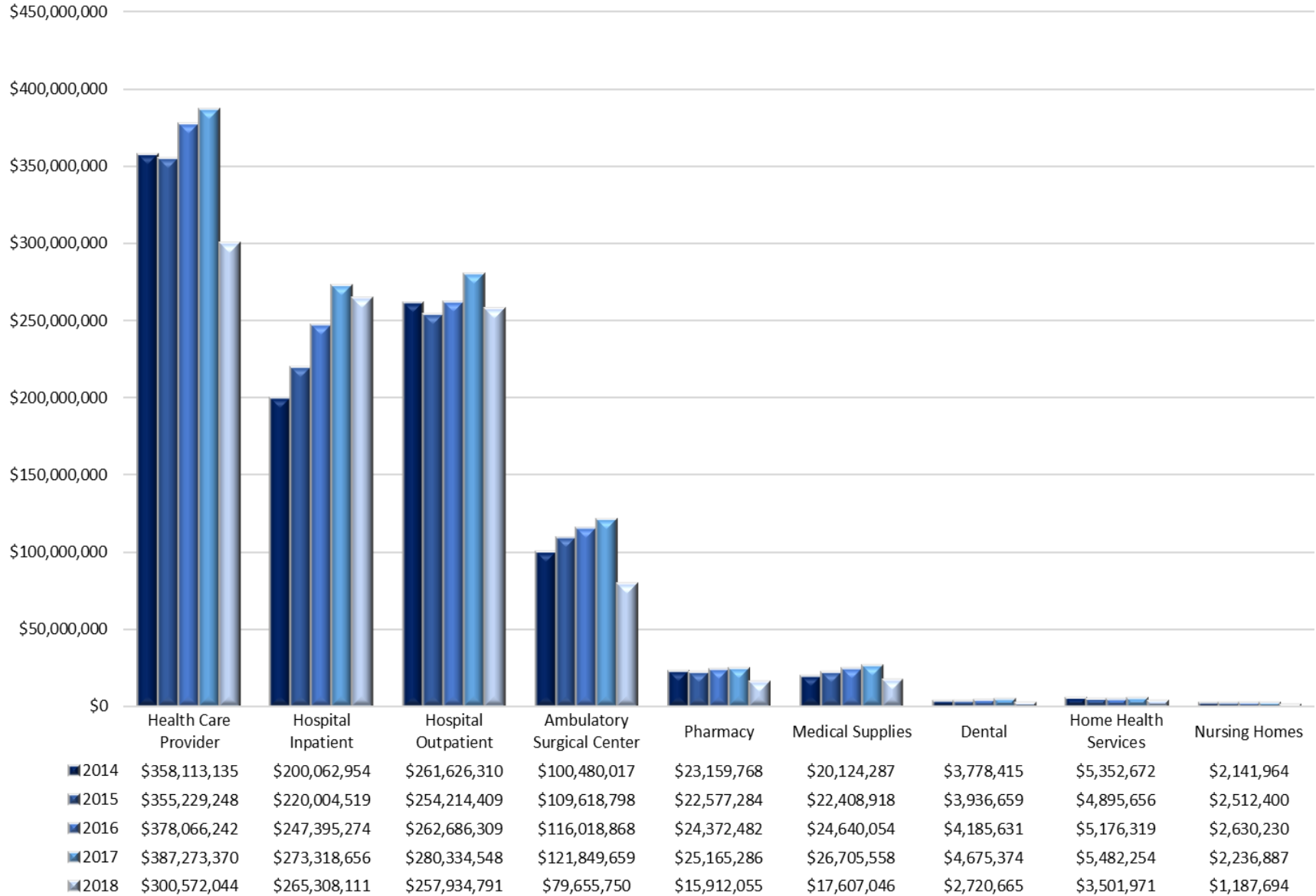
The following charts pertain to both lost-time and medical only claims. Data aggregation is by calendar year for the date of service, rather than for the year of the injury. The data for each year is restricted to medical bills received and accepted by the Division no later than six months after the end of that year. Payment totals may differ in comparison to the Division's previous yearly reports due to payment disputes being resolved or updates to previously submitted medical bill data.

Medical Payment Distribution Amounts

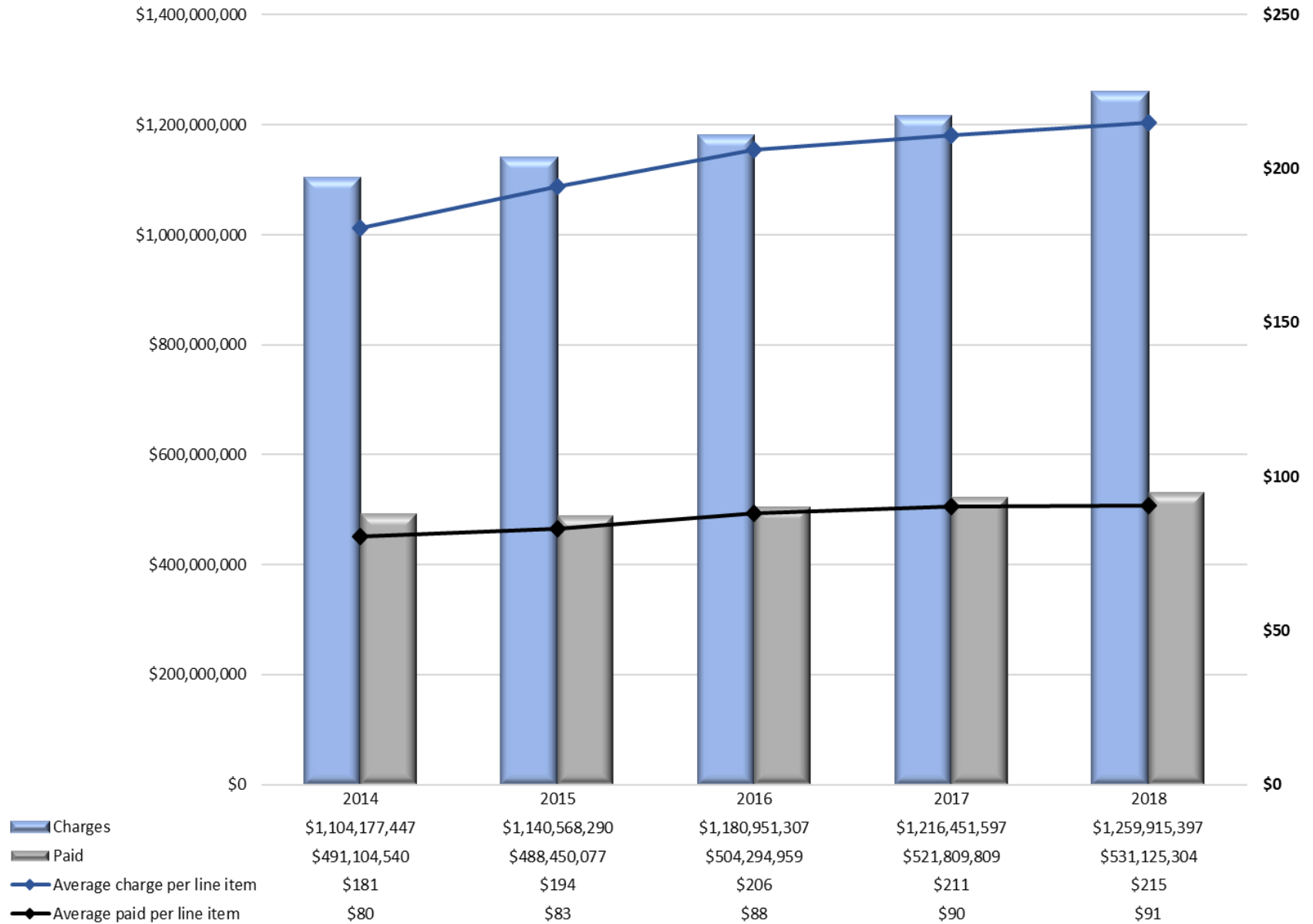


Total Medical Paid* for Services Provided within 12 Months of Injury

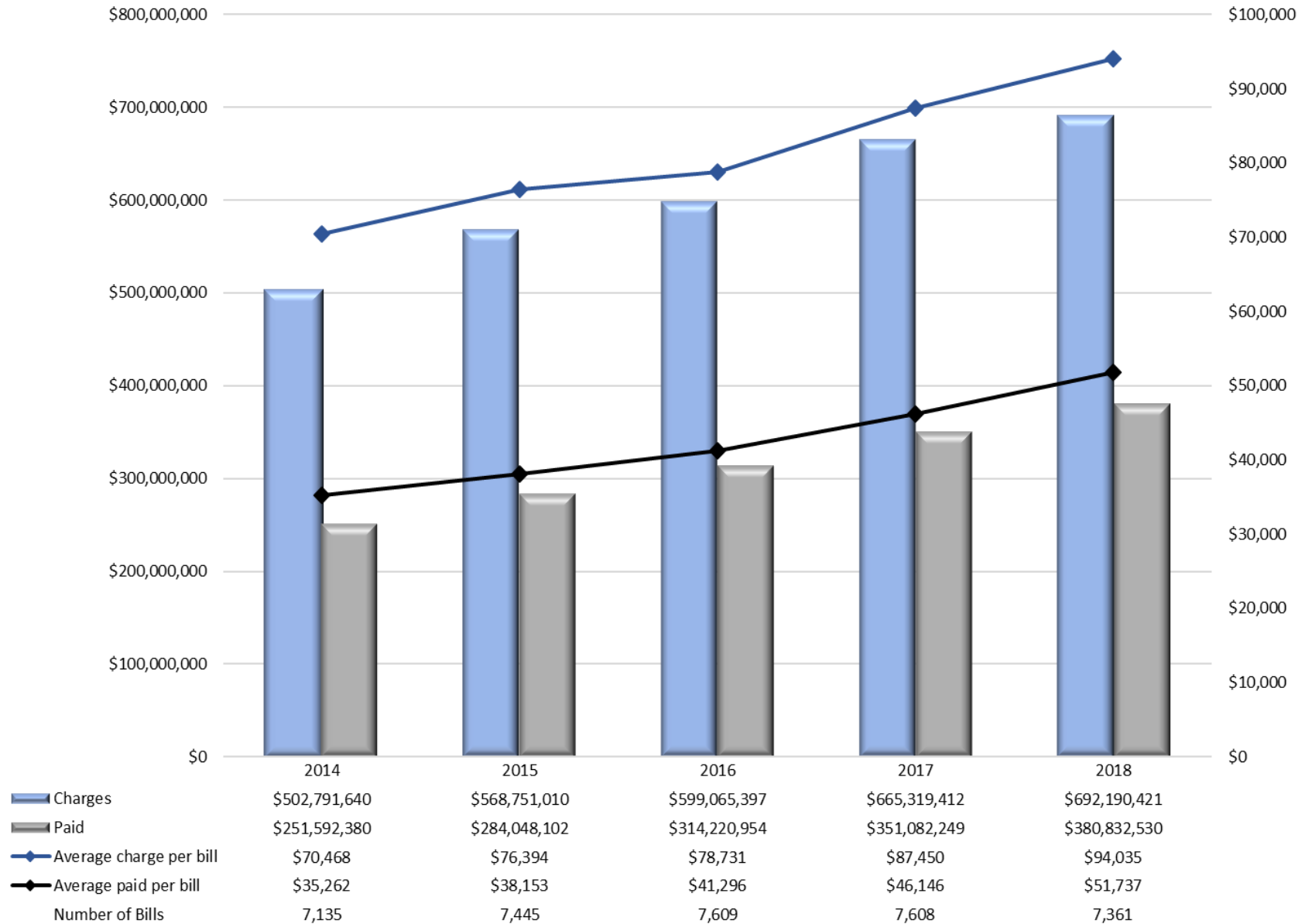
*Excludes Bills received beyond 6 months of end of calendar year of service.



Total Charges and Total Paid for Health Care Provider Services

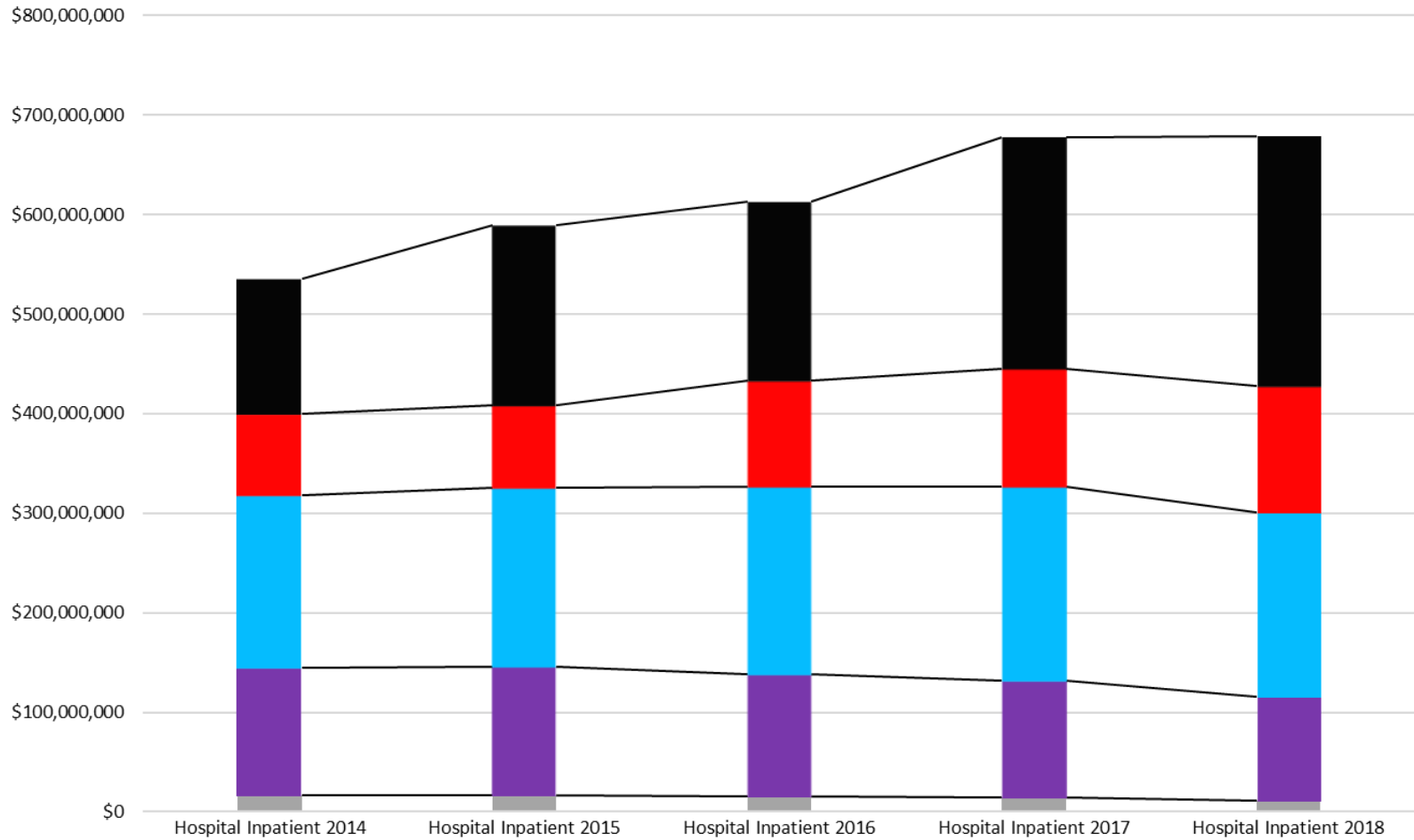


Total Charges and Total Paid for Hospital Inpatient Services



Hospital Inpatient by Amount Charged*

*Excluding the Cost of Implants

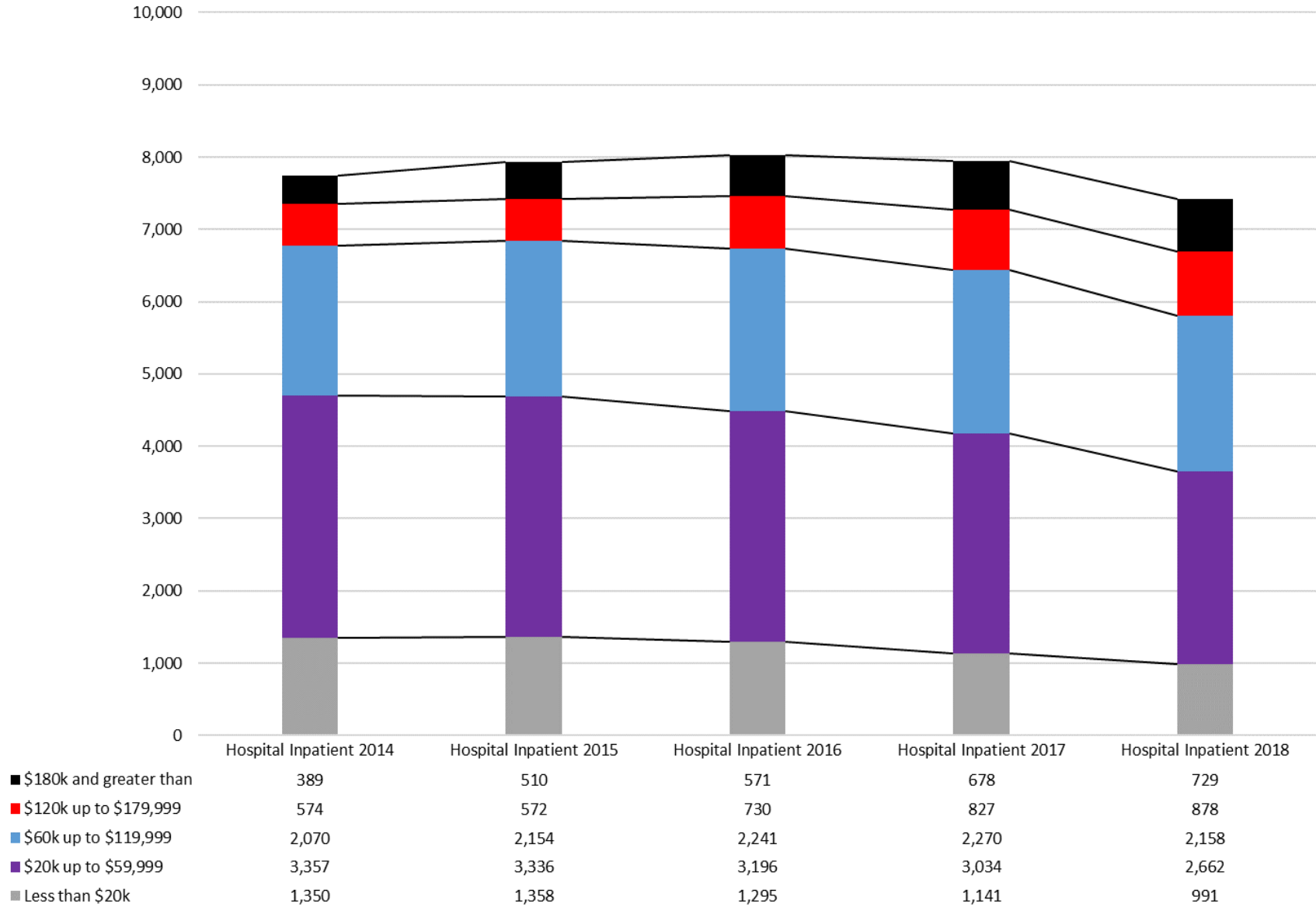


	Hospital Inpatient 2014	Hospital Inpatient 2015	Hospital Inpatient 2016	Hospital Inpatient 2017	Hospital Inpatient 2018
■ \$180k and greater than	\$135,384,608	\$181,296,198	\$179,799,468	\$232,066,112	\$250,586,167
■ \$120k up to \$179,999	\$82,609,557	\$82,372,103	\$106,010,509	\$118,513,203	\$127,760,594
■ \$60k up to \$119,999	\$172,704,748	\$179,337,039	\$188,214,432	\$195,210,030	\$184,612,084
■ \$20k up to \$59,999	\$128,715,681	\$129,558,676	\$122,870,960	\$117,464,878	\$104,290,921
■ Less than \$20k	\$16,300,500	\$16,700,889	\$15,909,115	\$14,164,367	\$11,556,311

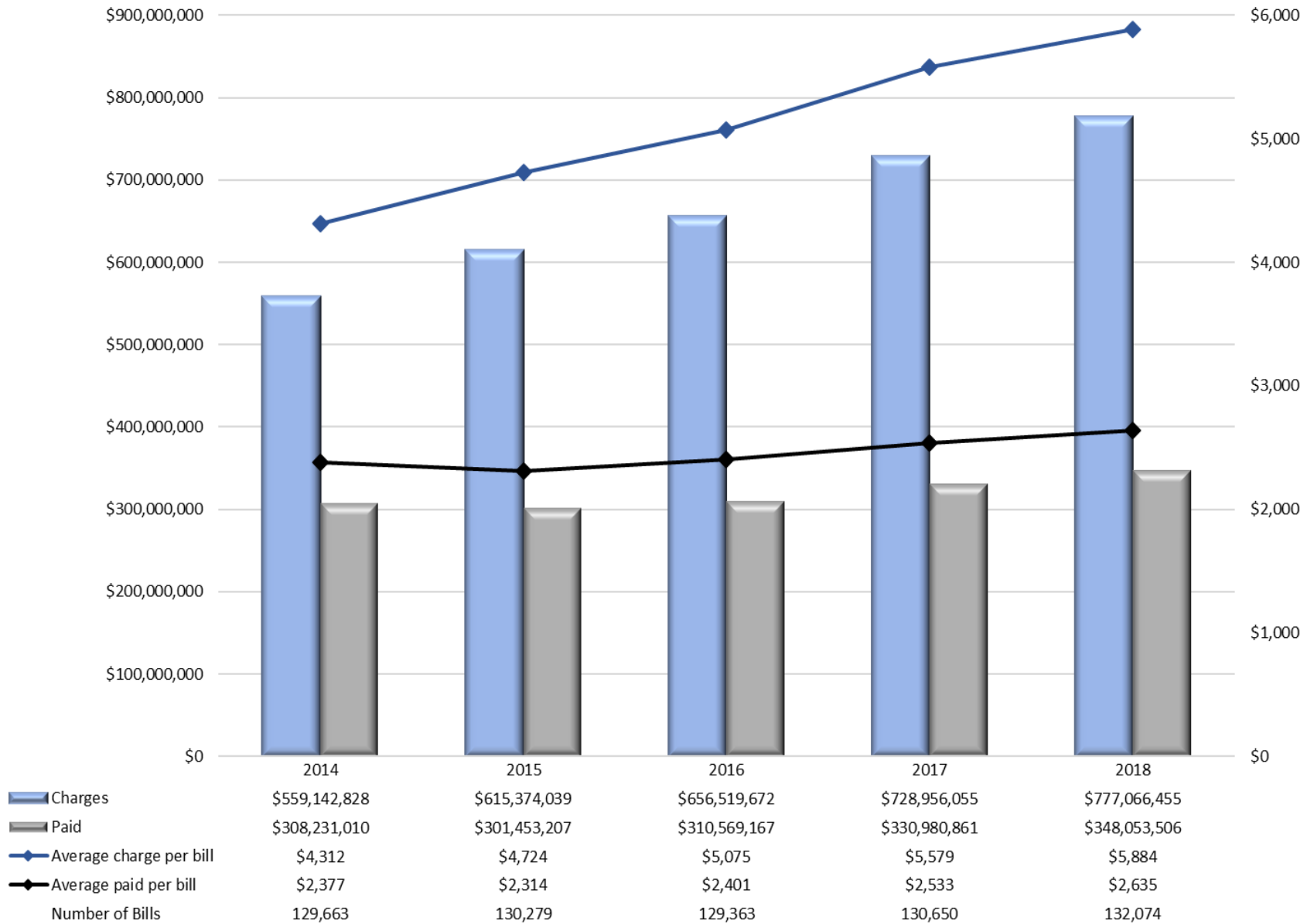
The charged amounts are higher than the charged amounts on the chart titled "Total Charges and Total Paid for Hospital Inpatient Services" due to a longer development period used to evaluate the data.

Number of Hospital Inpatient Bills by Amount Charged*

*Excluding the Cost of Implants

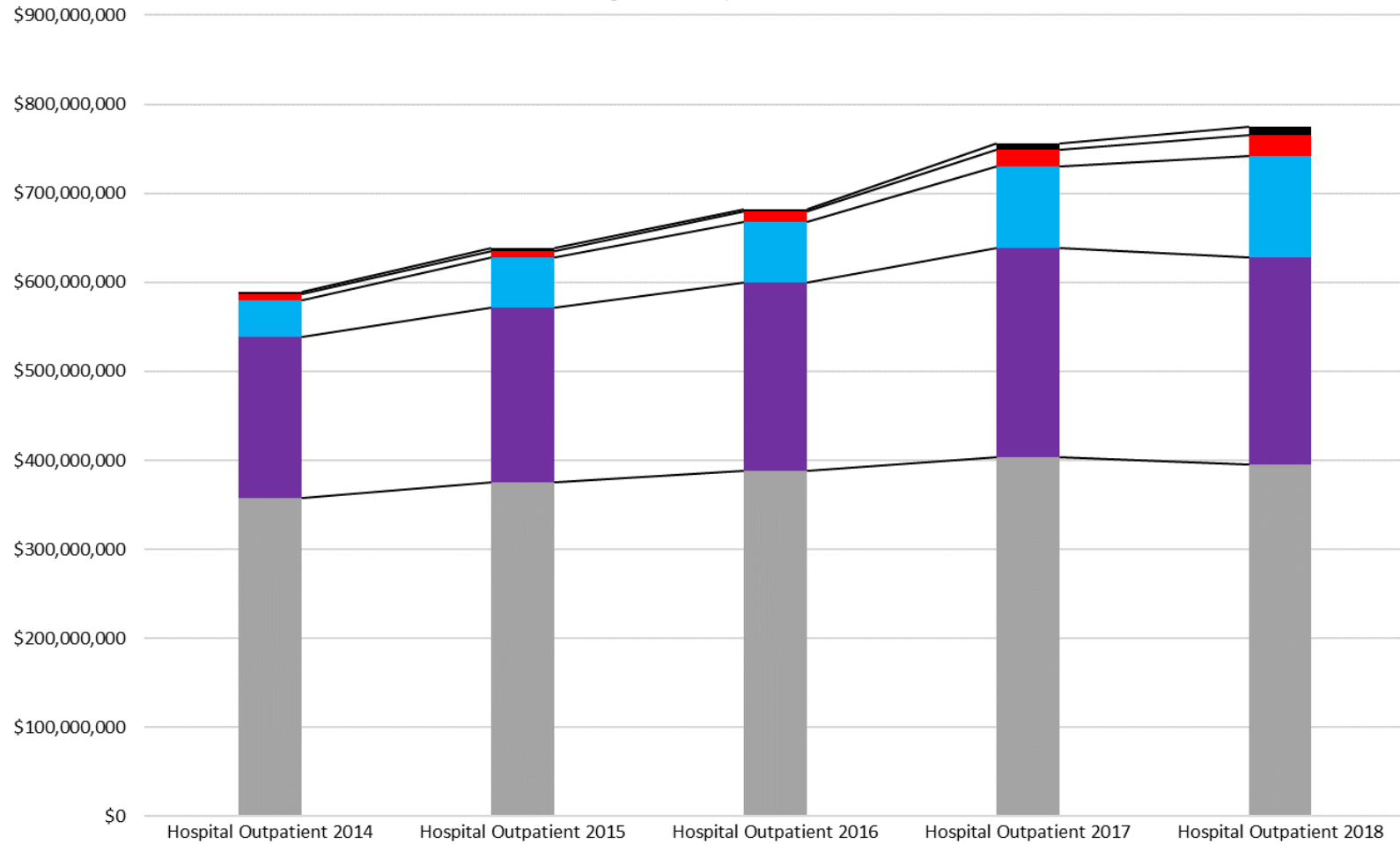


Total Charges and Total Paid for Hospital Outpatient Services



Hospital Outpatient by Amount Charged*

*Excluding the Cost of Implants

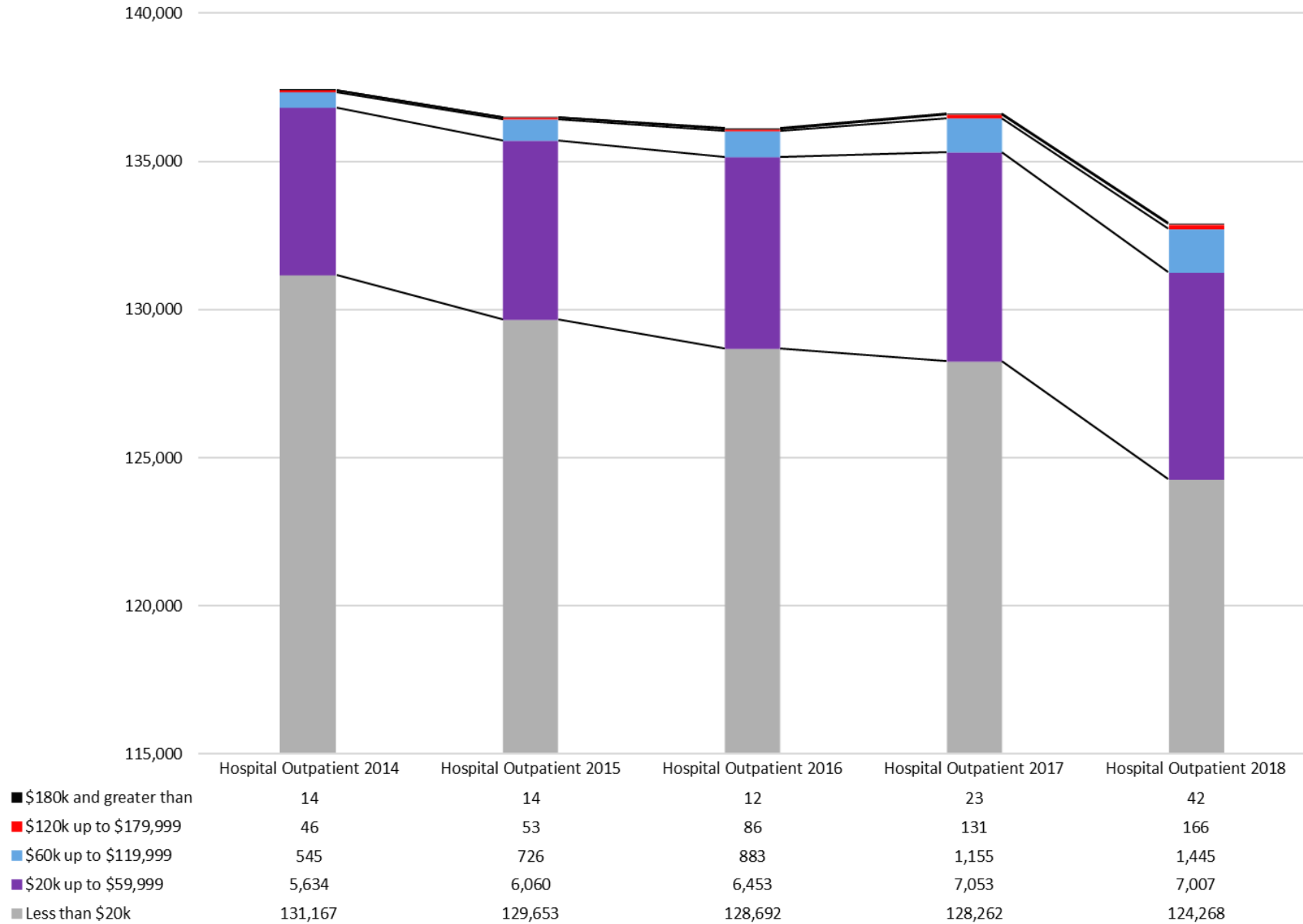


	Hospital Outpatient 2014	Hospital Outpatient 2015	Hospital Outpatient 2016	Hospital Outpatient 2017	Hospital Outpatient 2018
■ \$180k and greater than	\$2,921,624	\$2,962,496	\$2,526,230	\$6,375,763	\$9,588,957
■ \$120k up to \$179,999	\$6,471,839	\$7,572,307	\$12,001,345	\$18,740,751	\$23,144,343
■ \$60k up to \$119,999	\$41,081,113	\$56,596,612	\$67,747,541	\$92,599,405	\$114,615,371
■ \$20k up to \$59,999	\$181,423,033	\$195,737,553	\$212,129,682	\$234,644,624	\$232,274,021
■ Less than \$20k	\$357,630,942	\$375,536,178	\$387,913,444	\$403,334,041	\$395,564,715

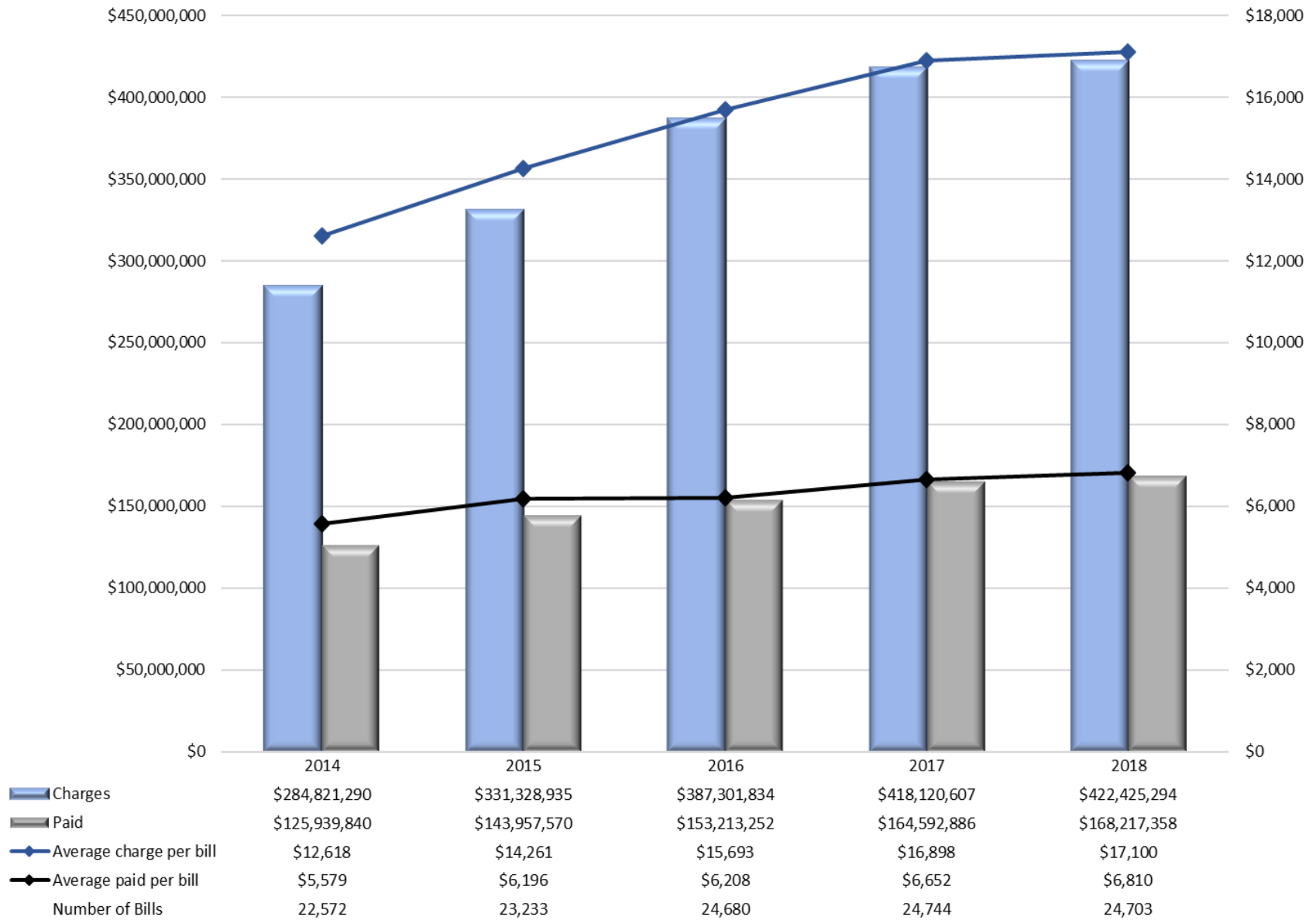
The charged amounts are higher than the charged amounts on the chart titled "Total Charges and Total Paid for Hospital Outpatient Services" due to a longer development period used to evaluate the data.

Number of Hospital Outpatient Bills by Amount Charged*

*Excluding the Cost of Implants

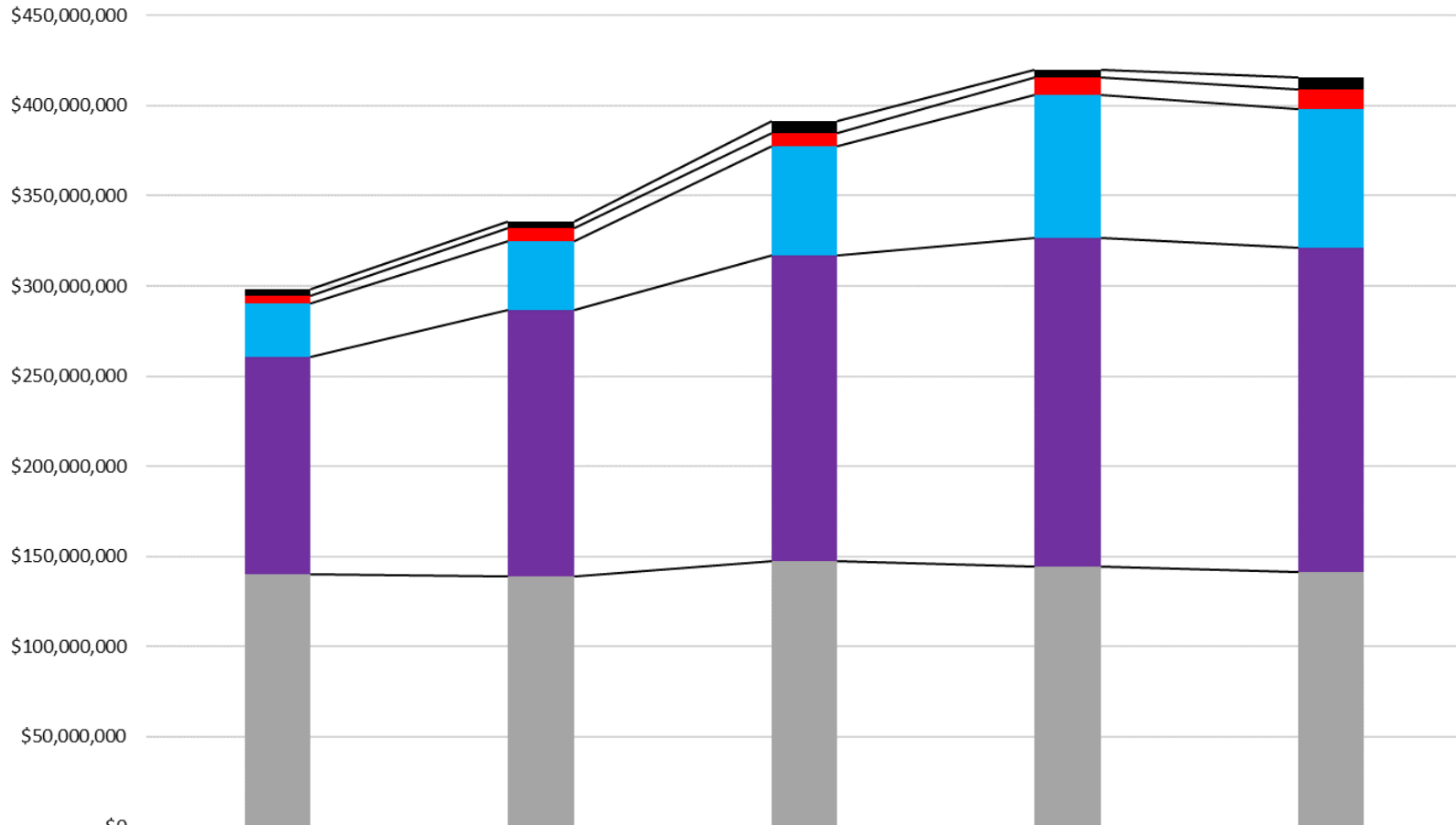


Total Charges and Total Paid for Ambulatory Surgical Center Services (ASC)



ASC by Amount Charged*

*Excluding the Cost of Implants

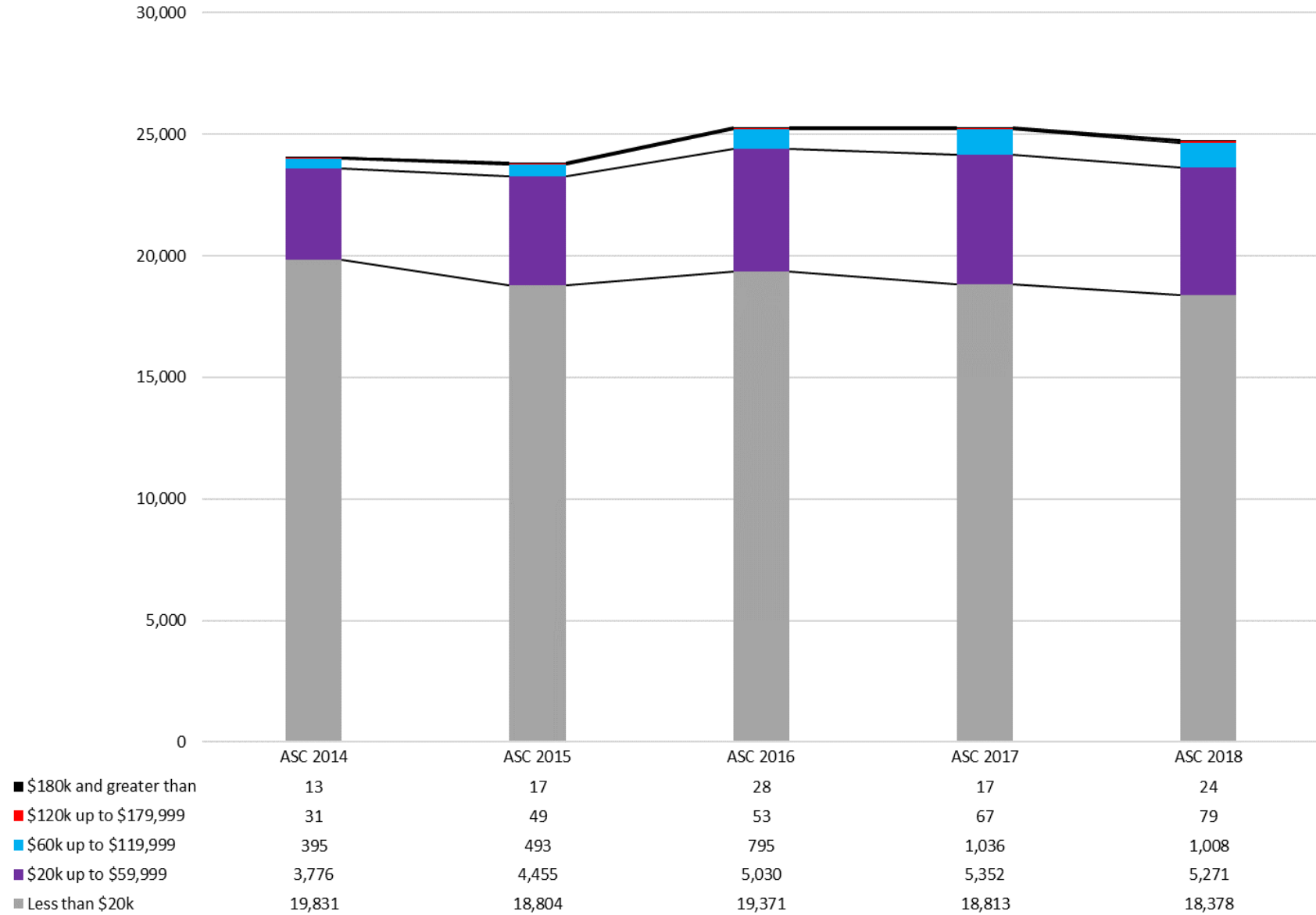


	ASC 2014	ASC 2015	ASC 2016	ASC 2017	ASC 2018
■ \$180k and greater than	\$3,397,807	\$4,150,162	\$6,460,535	\$4,175,913	\$6,257,335
■ \$120k up to \$179,999	\$4,381,952	\$7,091,243	\$7,554,780	\$9,509,072	\$11,048,886
■ \$60k up to \$119,999	\$29,715,799	\$37,861,599	\$60,684,376	\$79,371,086	\$76,786,897
■ \$20k up to \$59,999	\$120,422,963	\$147,865,473	\$169,596,257	\$182,424,803	\$180,146,792
■ Less than \$20k	\$140,056,930	\$139,012,027	\$147,272,729	\$144,330,790	\$141,250,963

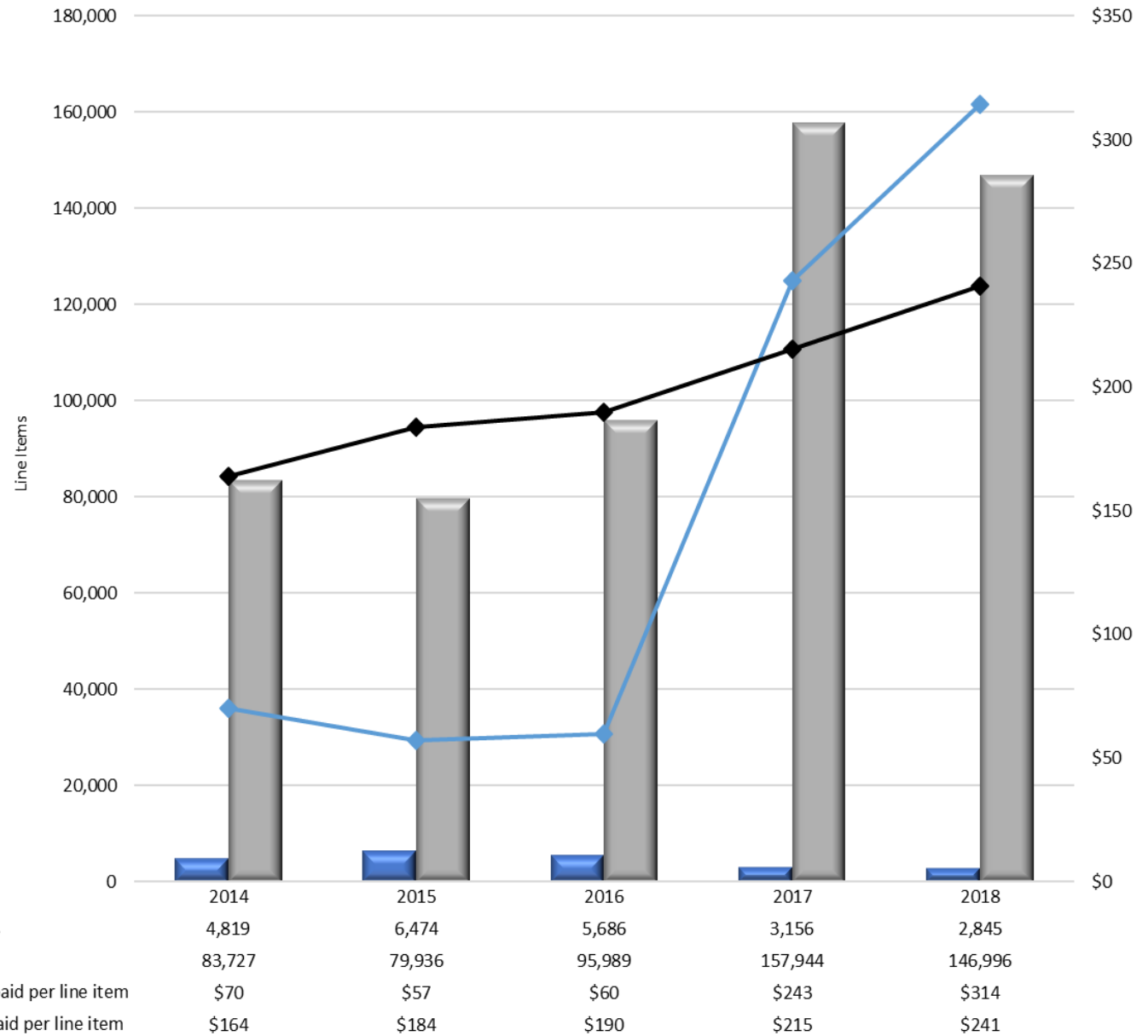
The charged amounts are higher than the charged amounts on the chart titled "Total Charges and Total Paid for Ambulatory Surgical Center Services" due to a longer development period used to evaluate the data.

Number of ASC Bills by Amount Charged*

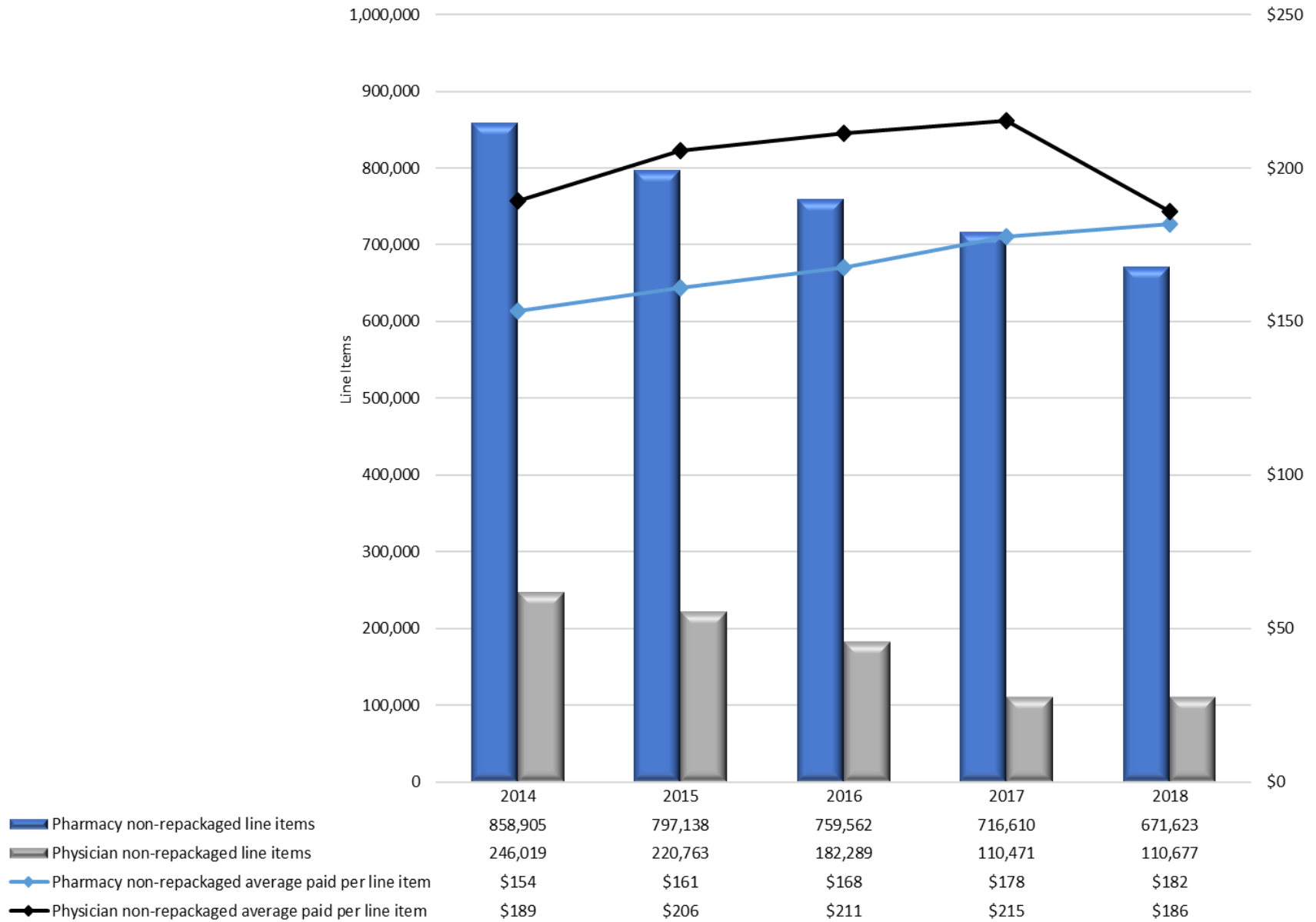
*Excluding the Cost of Implants



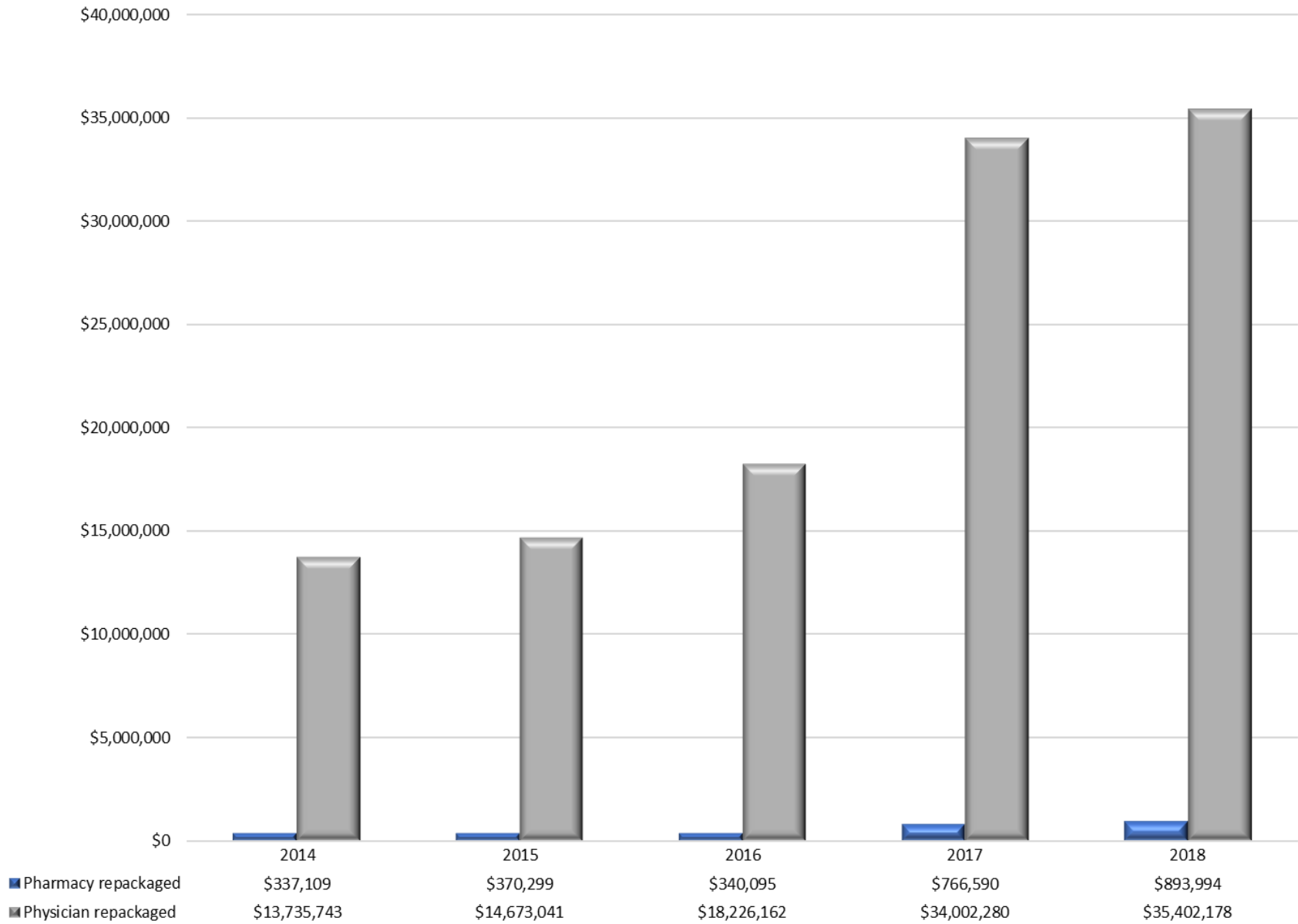
Pharmacy vs. Physician Repackaged Drugs



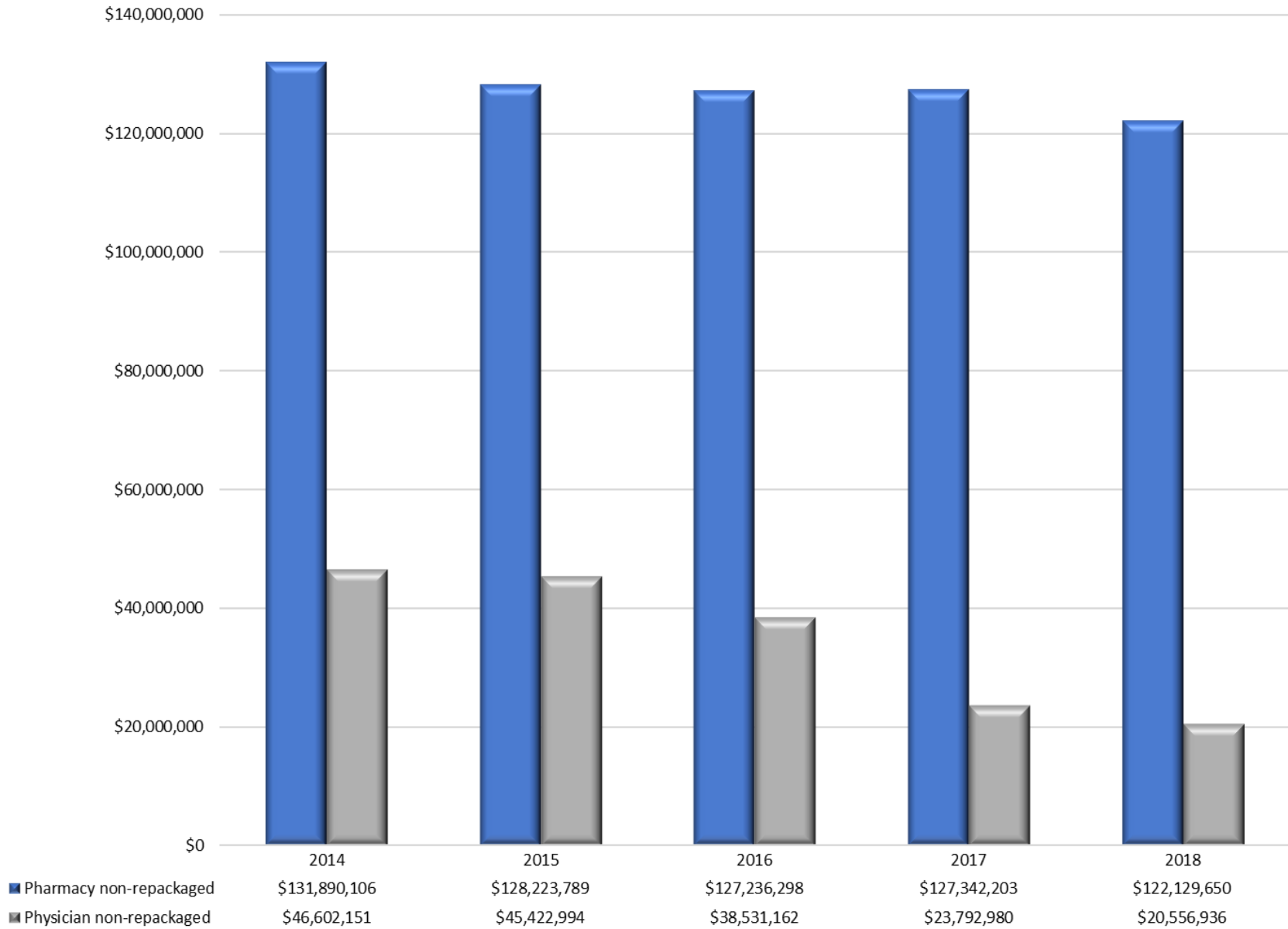
Pharmacy vs. Physician Non-Repackaged Drugs



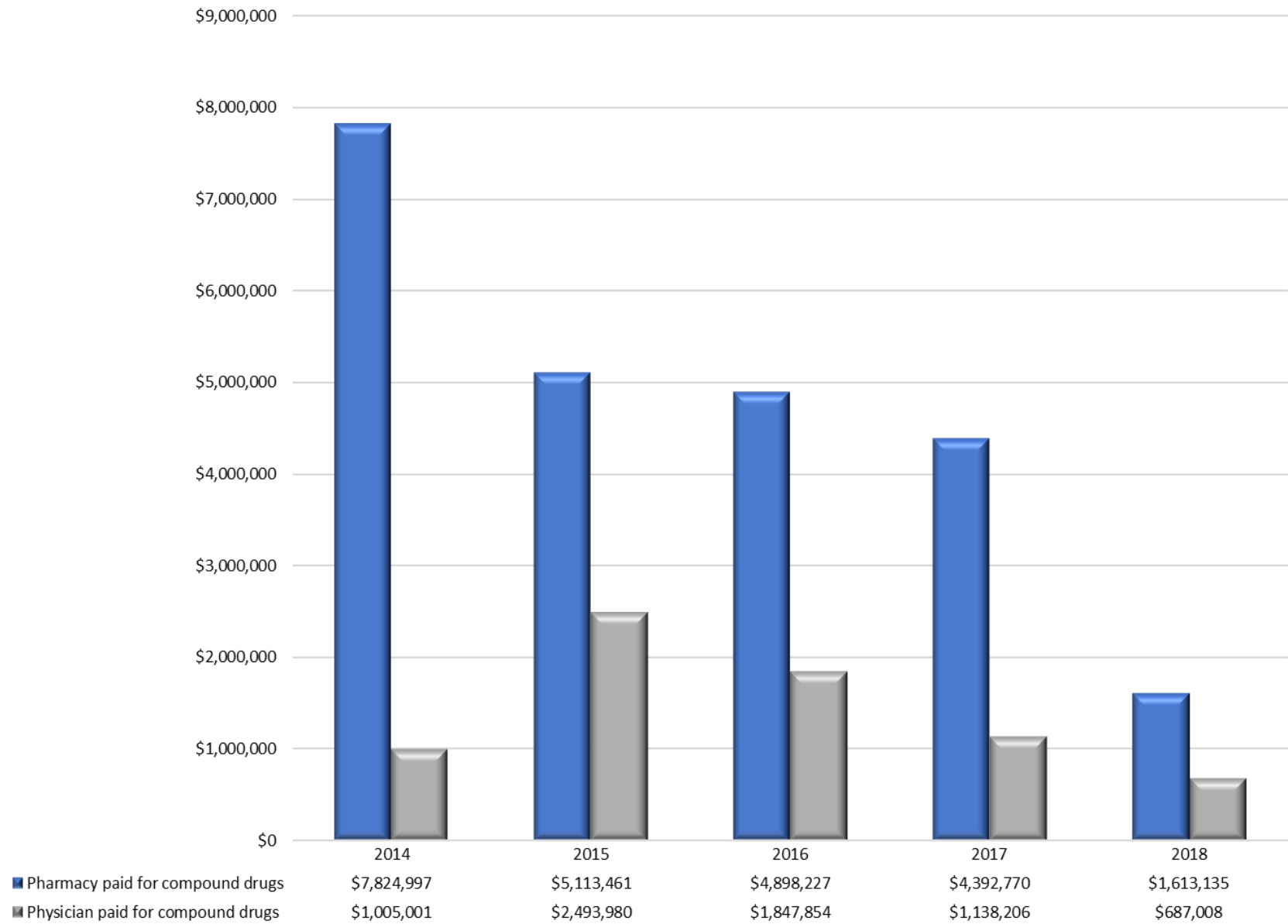
Pharmacy vs. Physician Repackaged Drug Payments



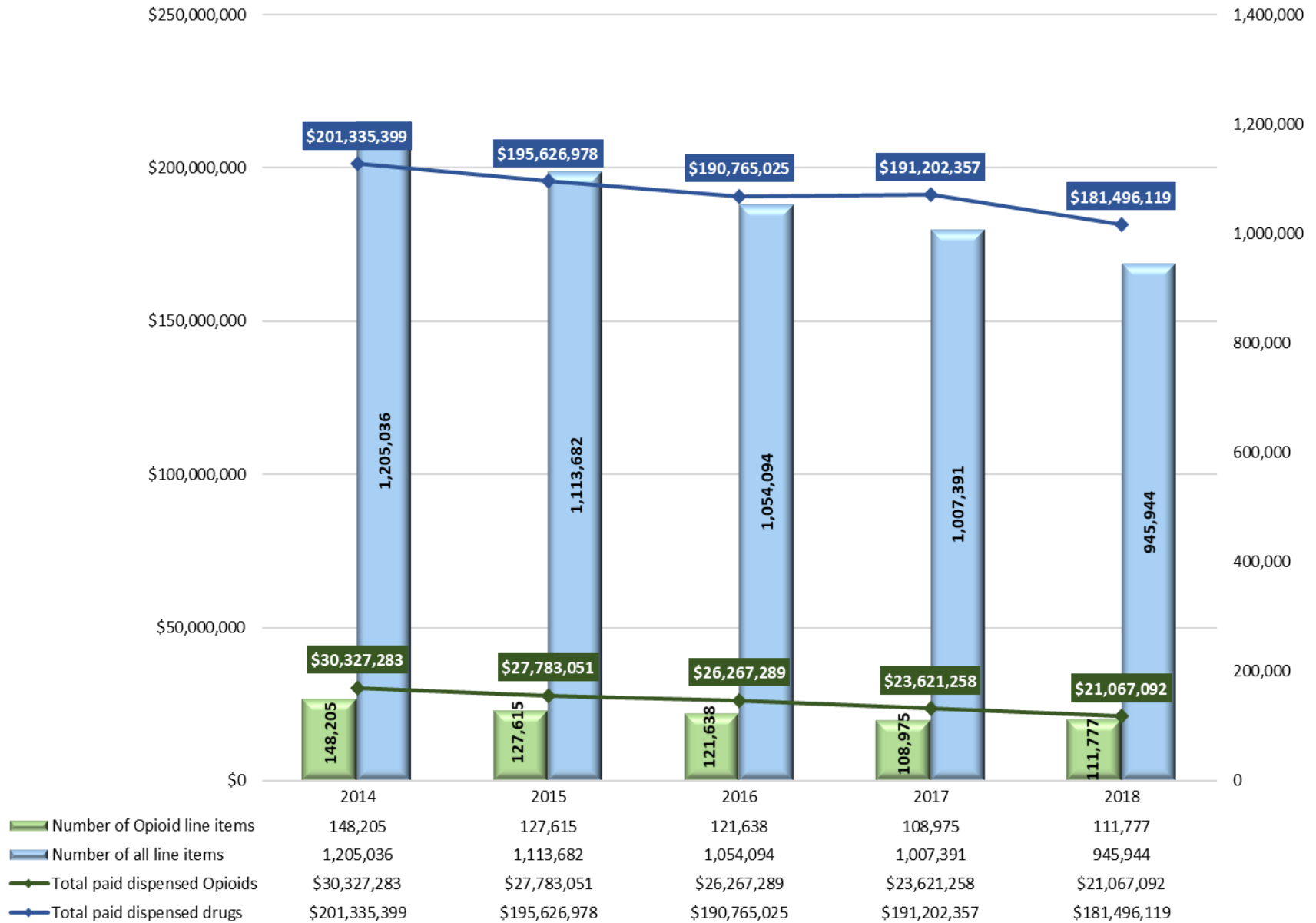
Pharmacy vs. Physician Non-Repackaged Drug Payments



Pharmacy vs. Physician Compound Drug Payments



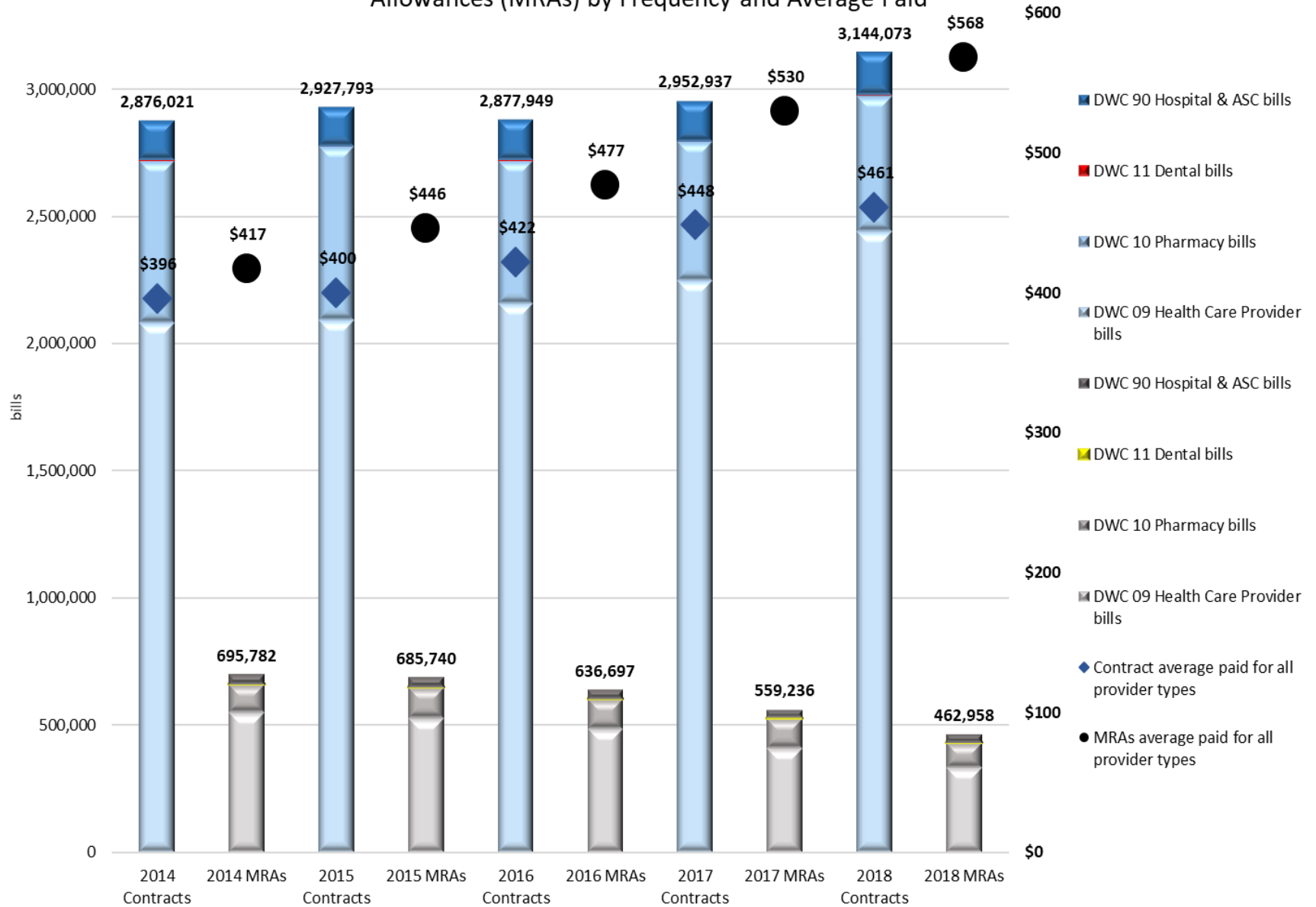
Number and Total Paid of Dispensed Drugs and Opioids



Top 20 Drugs Dispensed in Calendar Year 2018

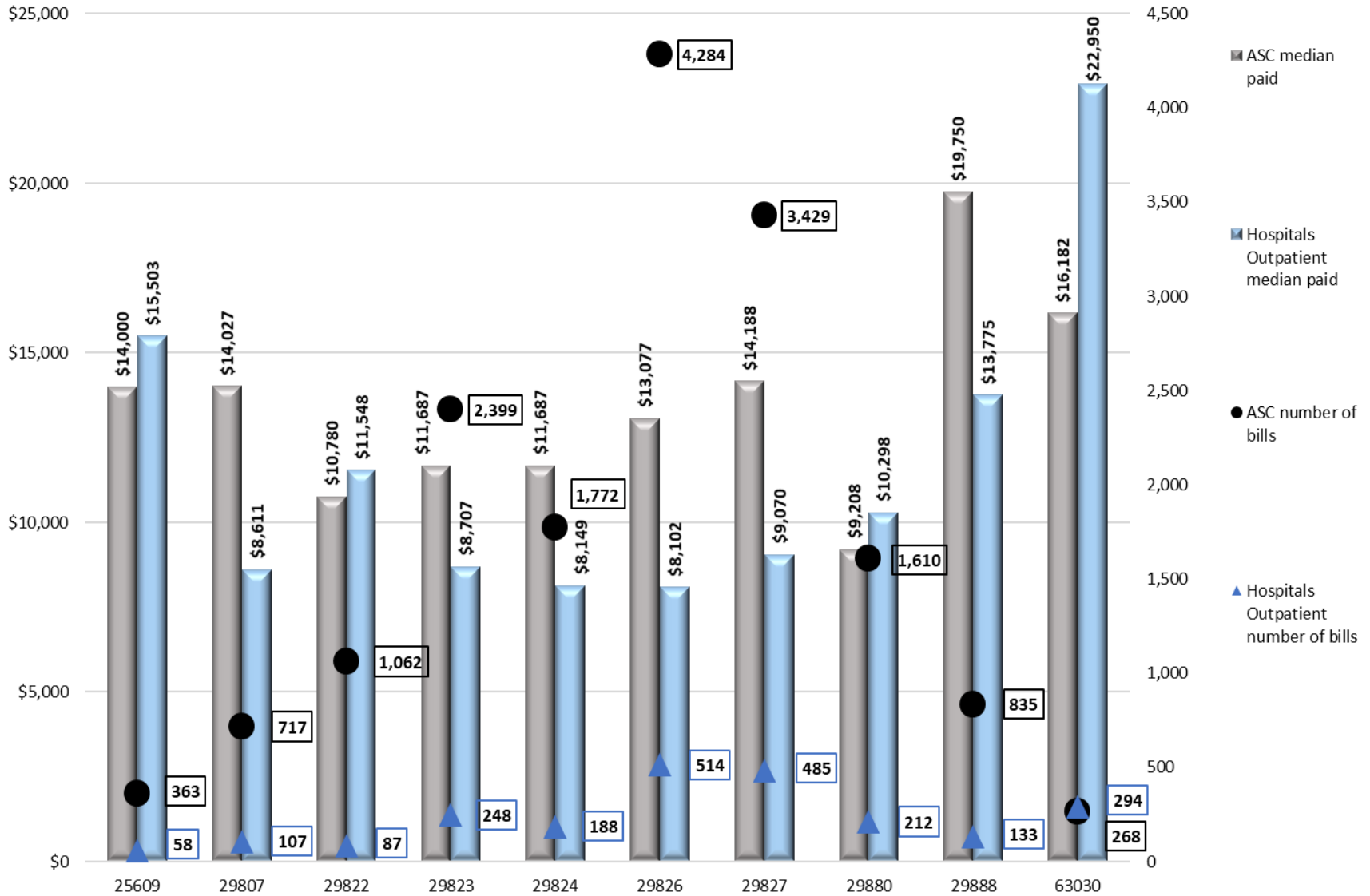
Drug Name	Number of line items	Sum of Charges	Sum of Paid	Drug Type	Percentage of Dispensed	Percentage of Paid
Meloxicam	59,132	\$9,945,587	\$8,764,866	NSAIDs	6.29%	4.86%
Cyclobenzaprine HCL	56,274	\$7,575,923	\$6,820,813	Muscle Relaxer	5.98%	3.78%
Tramadol HCL	41,482	\$5,415,175	\$4,905,834	Opioid	4.41%	2.72%
Hydrocodone Bitartrate-Acetaminophen	38,012	\$1,900,974	\$1,492,084	Opioid	4.04%	0.83%
Gabapentin	34,203	\$5,297,032	\$4,524,429	Anticonvulsant	3.64%	2.51%
Ibuprofen	30,557	\$939,407	\$798,235	NSAIDs	3.25%	0.44%
Diclofenac Sodium	28,268	\$11,535,241	\$10,118,384	NSAIDs	3.01%	5.60%
Oxycodone HCL-Acetaminophen	28,260	\$4,091,697	\$3,310,286	Opioid	3.00%	1.83%
Naproxen	28,108	\$1,418,344	\$1,173,334	NSAIDs	2.99%	0.65%
Lidocaine	19,136	\$11,066,541	\$9,608,322	Amide local anesthetics	2.03%	5.32%
Celecoxib	17,550	\$7,265,849	\$6,035,212	NSAIDs	1.87%	3.34%
Tizanidine HCL	17,485	\$1,803,023	\$1,507,162	Muscle Relaxer	1.86%	0.83%
Methocarbamol	16,625	\$547,784	\$464,083	Muscle Relaxer	1.77%	0.26%
IBU	14,432	\$229,961	\$190,806	NSAIDs	1.53%	0.11%
Methylprednisolone	13,869	\$495,123	\$425,968	Corticosteroids	1.47%	0.24%
Omeprazole	13,250	\$2,982,959	\$2,740,660	Proton-pump inhibitor	1.41%	1.52%
Lyrica	11,289	\$7,540,847	\$6,985,383	Anticonvulsant	1.20%	3.87%
Duloxetine HCL	10,929	\$3,915,223	\$3,400,978	Serotonin-nonrepinephrine reuptake inhibitor Anxiolytic	1.16%	1.88%
Oxycodone HCL	10,200	\$1,456,336	\$1,252,756	Opioid	1.08%	0.69%
Baclofen	9,932	\$2,127,891	\$1,753,305	Muscle Relaxer	1.06%	0.97%
Grand Total of Dispensed Drugs	940,644	\$209,638,207	\$180,527,499	Total Percentage	53.05%	42.25%

Medical Bills Paid by Contracts Compared to Bills paid at the Maximum Reimbursement Allowances (MRAs) by Frequency and Average Paid



Hospital Outpatient Scheduled and Ambulatory Surgical Centers Frequency and Median Paid based on Procedure codes*

*with high frequency during dates of service for ASC 1/1/17 to 12/31/18 and Hospital Outpatient Scheduled 7/1/17 to 12/31/18



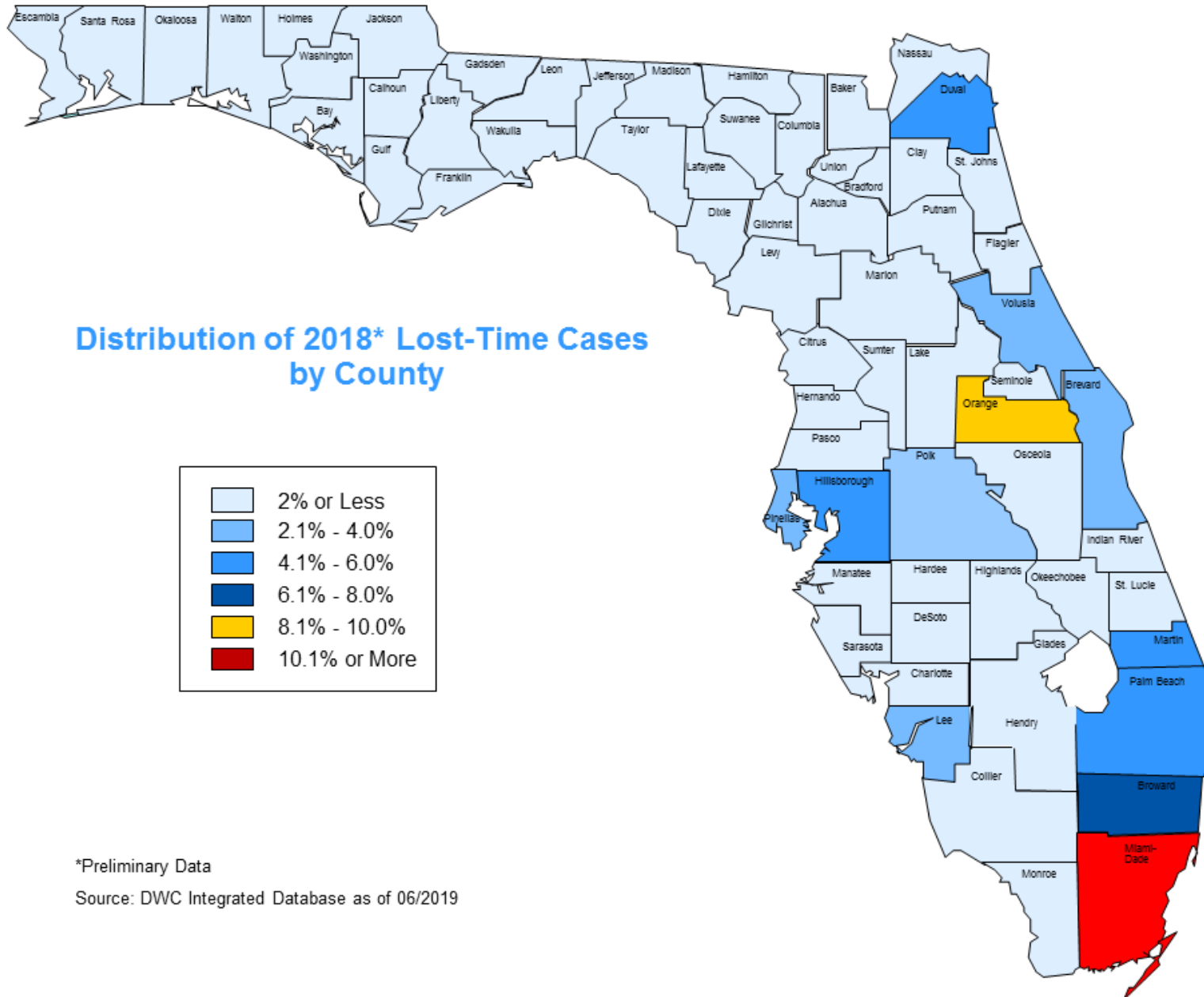
Indemnity Data Results

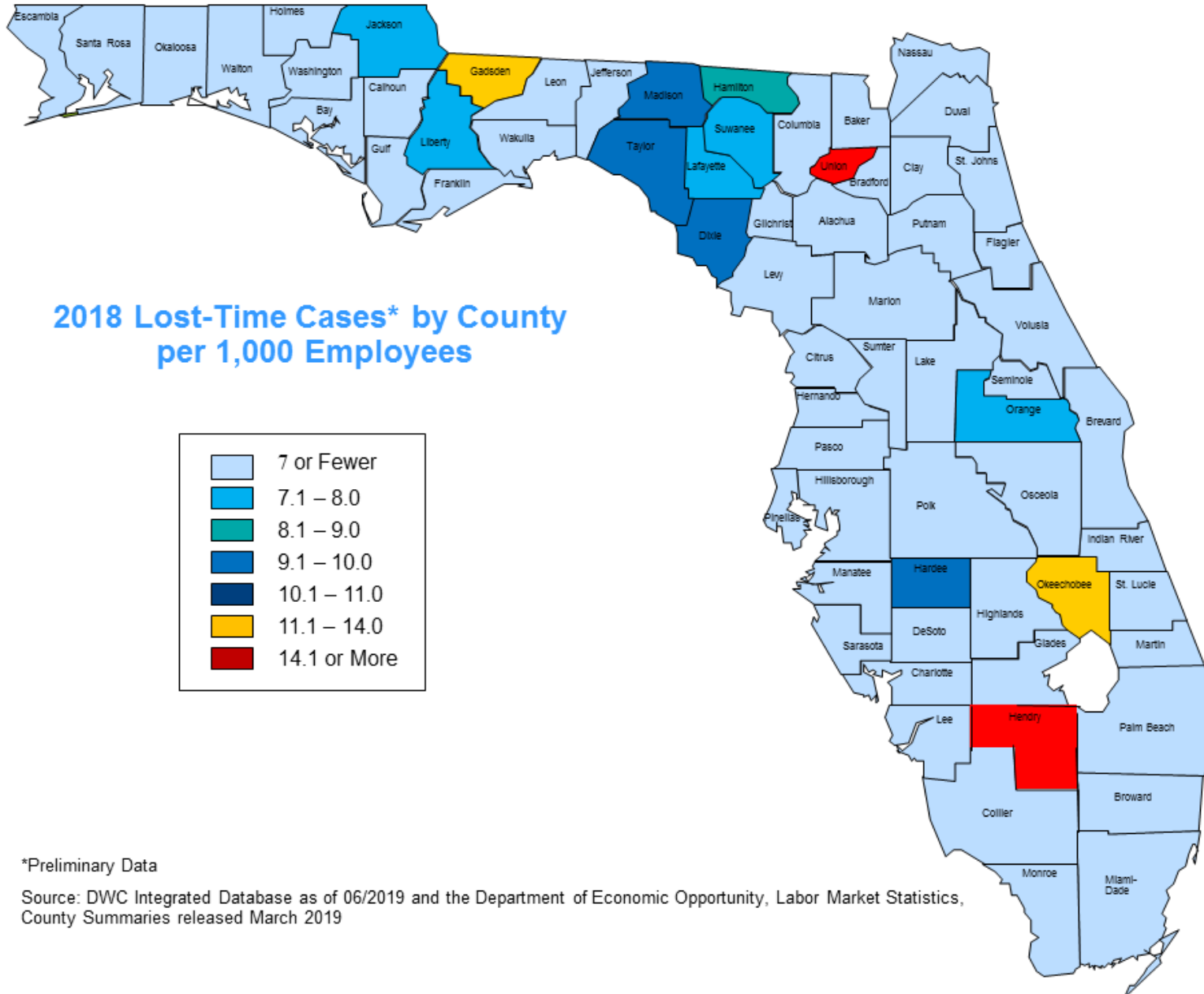
Indemnity data is summarized on a calendar basis. Workers who sustain a compensable injury are entitled to receive medically necessary treatment under Florida's workers' compensation statutes. If the injury results in disability, the injured worker is entitled to payment(s) for a portion of lost wages beginning on the 8th day of disability. Injuries resulting in or causing permanent impairment result in additional benefits being paid to the injured worker. When an injury results in a work-related fatality, survivor dependent benefits and funeral expenses may be paid.

Multiple factors are considered when determining if benefit payments for lost wages or permanent impairments are due. Such factors are the injured worker's prior earnings, the nature and extent of the injury, the length of the healing period, and the worker's ability to return to work. In this report, an injured worker's disability must result in missing 8 or more days from work to be considered a lost-time case.

Top Ten Industrial Classifications for Calendar Year 2018 Lost-Time Claims

Industry Type	Number of Claims
Administrative, Support, Waste Management, Remediation	7,463
Retail Trade	6,613
Construction	6,516
Health Care & Social Assistance	5,818
Accommodation & Food Services	4,847
Transportation & Warehousing	4,755
Public Administration	4,303
Manufacturing	3,771
Educational Services	3,046
Wholesale Trade	2,334
Total	49,466



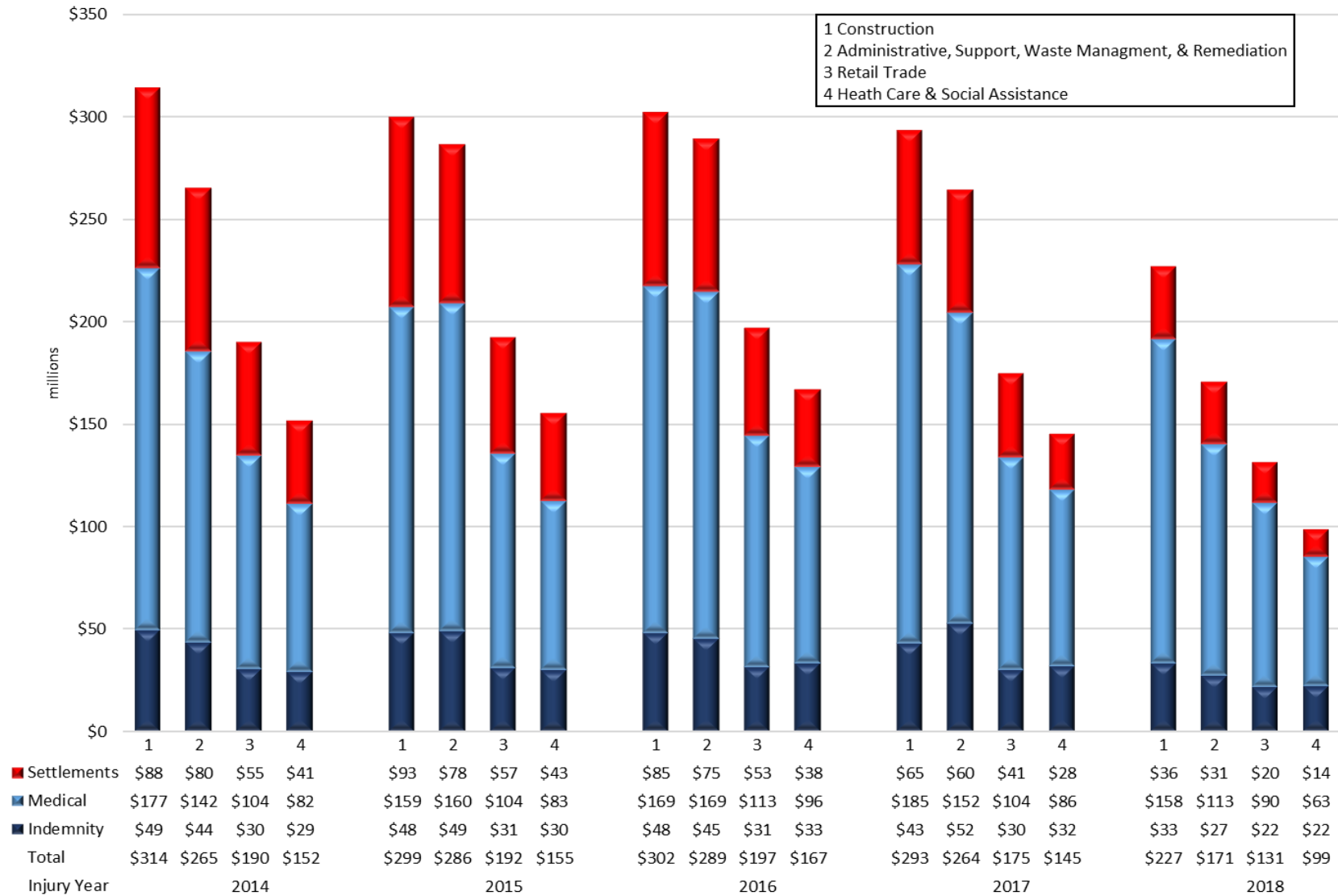


*Preliminary Data

Source: DWC Integrated Database as of 06/2019 and the Department of Economic Opportunity, Labor Market Statistics, County Summaries released March 2019

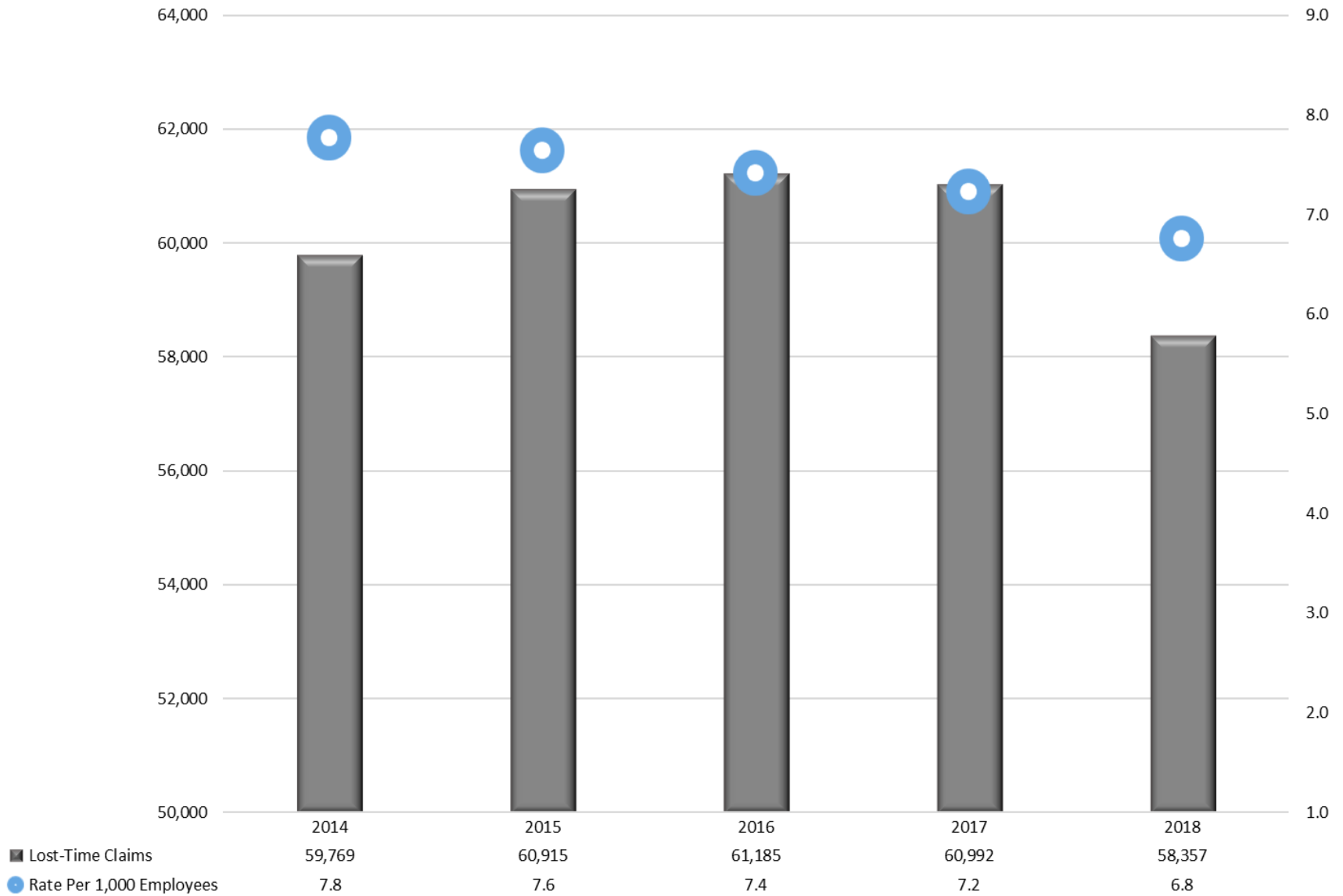
This chart illustrates the total benefit payments for the 4 industrial classifications whose benefit payments for medical, indemnity, and settlement benefits are the highest. Each year represents a different level of data maturity.

Benefits Payments for the Four Leading Industry Classifications

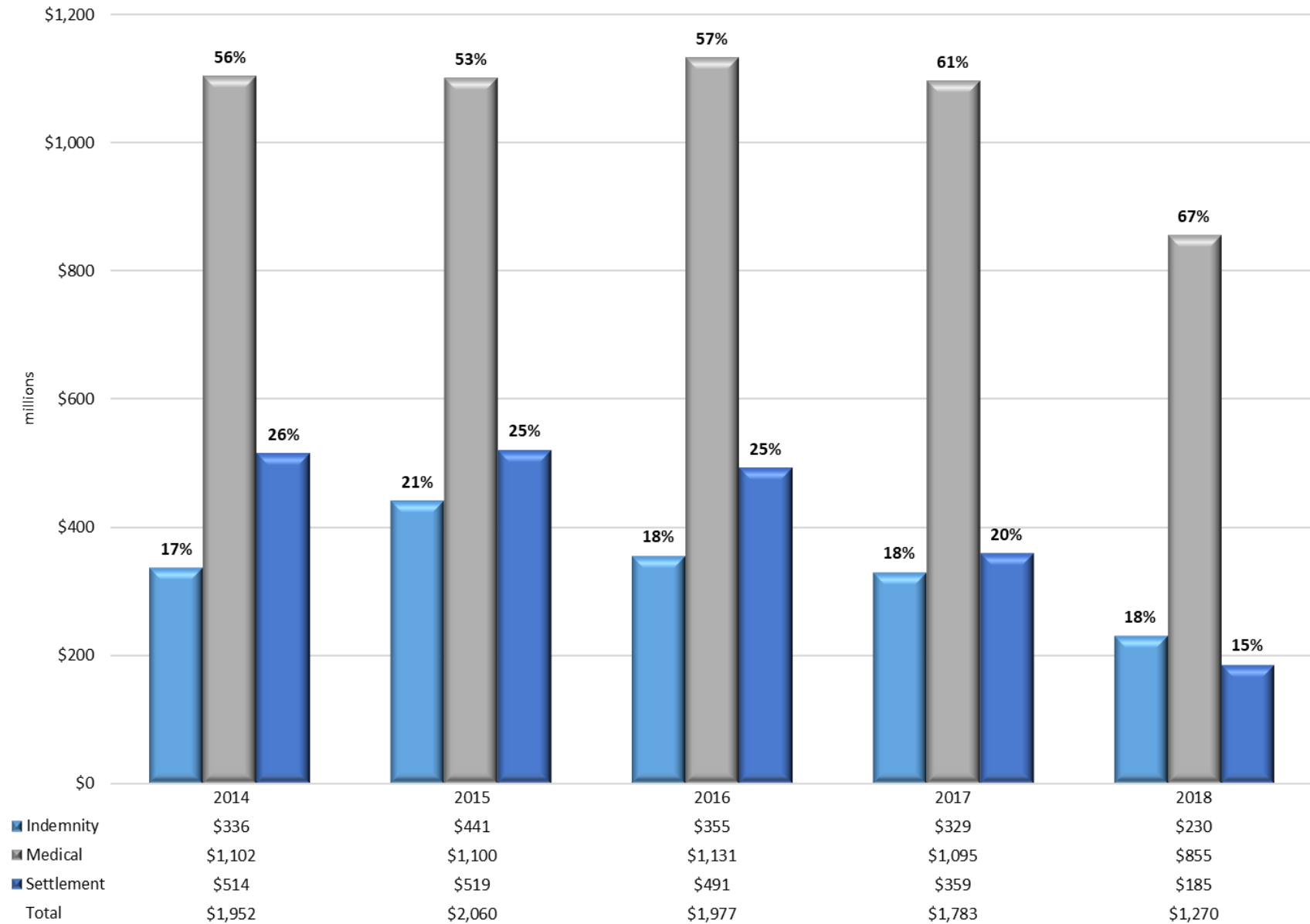


Lost-Time Claims Frequency and Rate

Source: Bureau of Labor Statistics extracted on March 11, 2019
for total number of employees



Indemnity, Medical, and Settlement Costs for Lost-Time Claims



Medical Share for Lost-Time Claims

Medically necessary treatment for a work-related injury may involve:

- the services of physicians, physical therapists, chiropractors, dentists, or other health care providers;
- the services of hospitals, ambulatory surgical centers, or skilled nursing facilities; and
- medicines, supplies, equipment, and related items, such as prosthetic devices or implants.

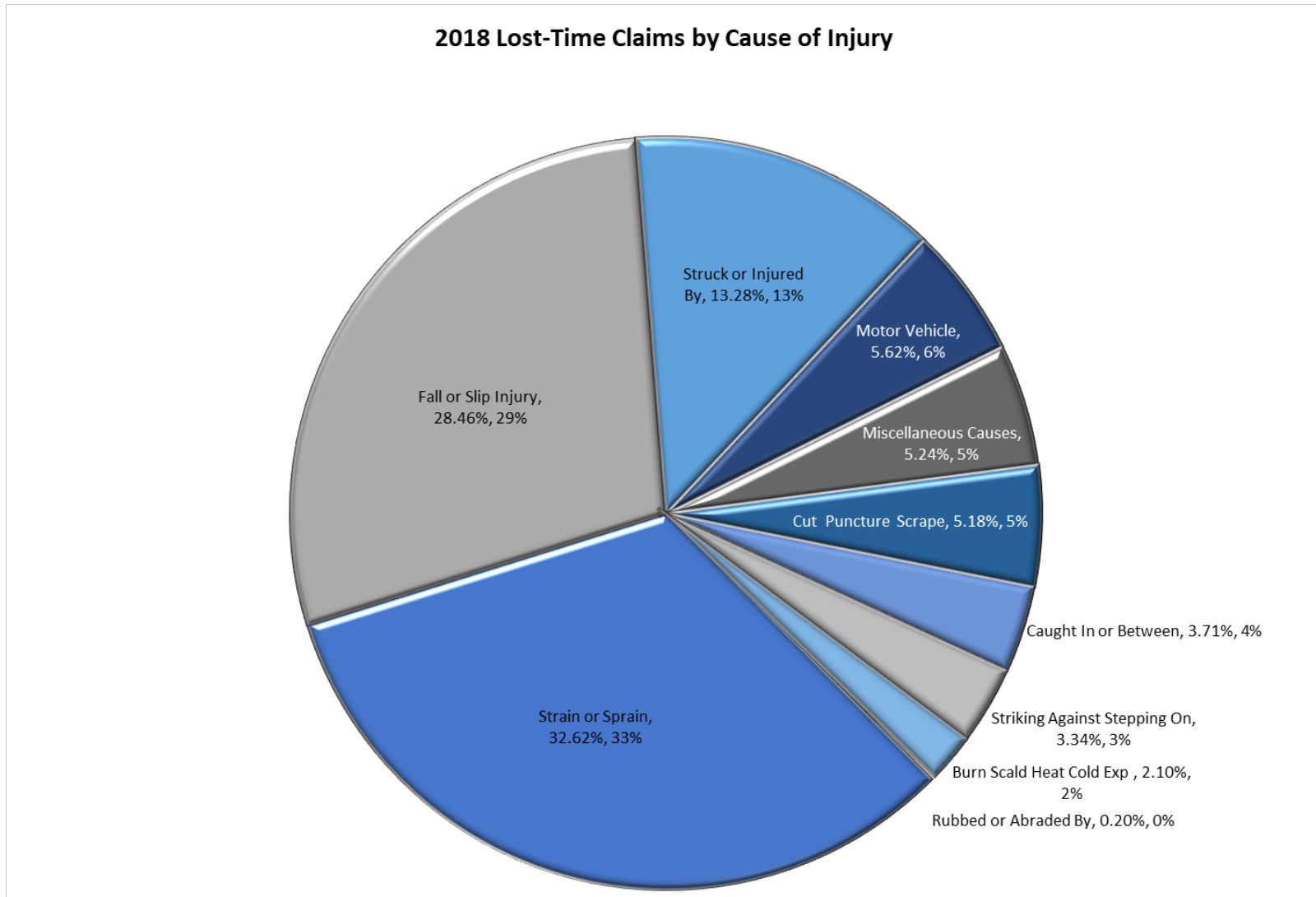
Claim development differences explain the priority of medical services early in the life of a claim and the increase in settlements as claims progress.

Calendar Year	Health Care Providers	Hospital and Ambulatory Surgical Centers	Pharmacy	All other Medical
2014	27.6%	52.0%	5.5%	15.0%
2015	27.1%	52.8%	5.3%	14.8%
2016*	26.5%	53.1%	4.9%	15.5%
2017*	25.3%	54.7%	4.4%	15.6%
2018*	23.8%	57.1%	3.3%	15.8%

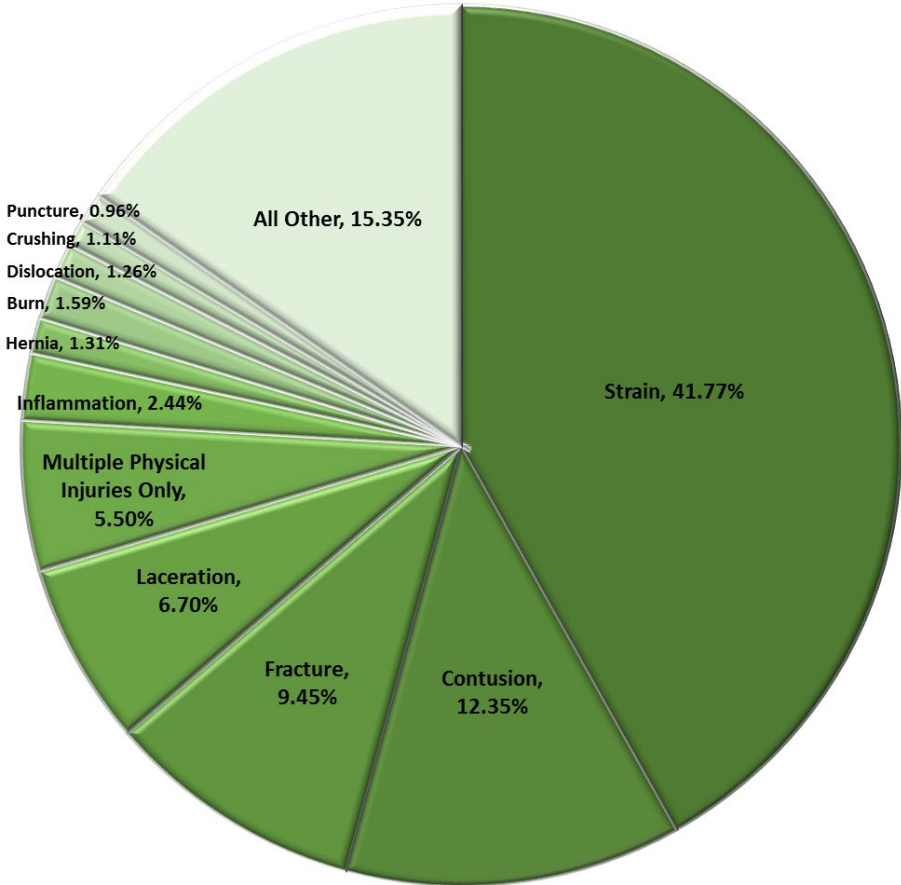
* Preliminary Data

Lost-Time Claims: Injury by Cause, Nature, & Body Part

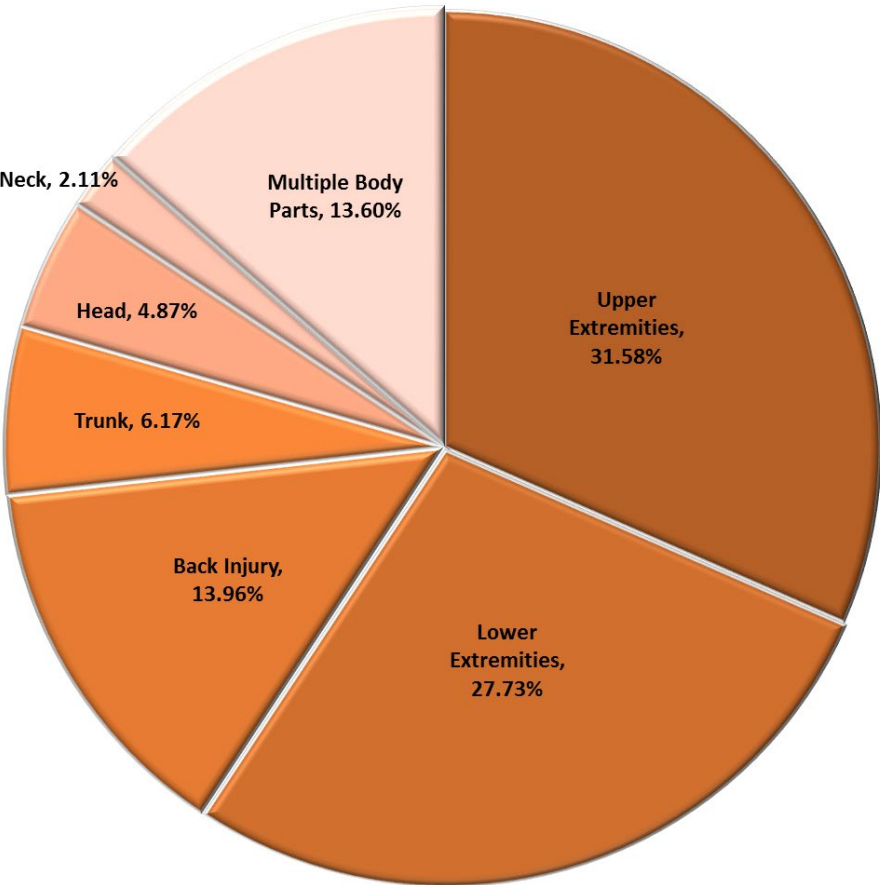
As part of the First Report of Injury or Illness, employers or claim administrators provide information on the cause, nature, and body part of each work-related injury. The following charts summarize this information. Because the information is reported on the First Report of Injury or Illness, it may not correspond to a diagnosis made by a health care professional. Additionally, the figures may change over time due to the maturation of the data.



2018 Lost-Time Claims by Nature of Injury



2018 Lost-Time Claims by Injured Body Part

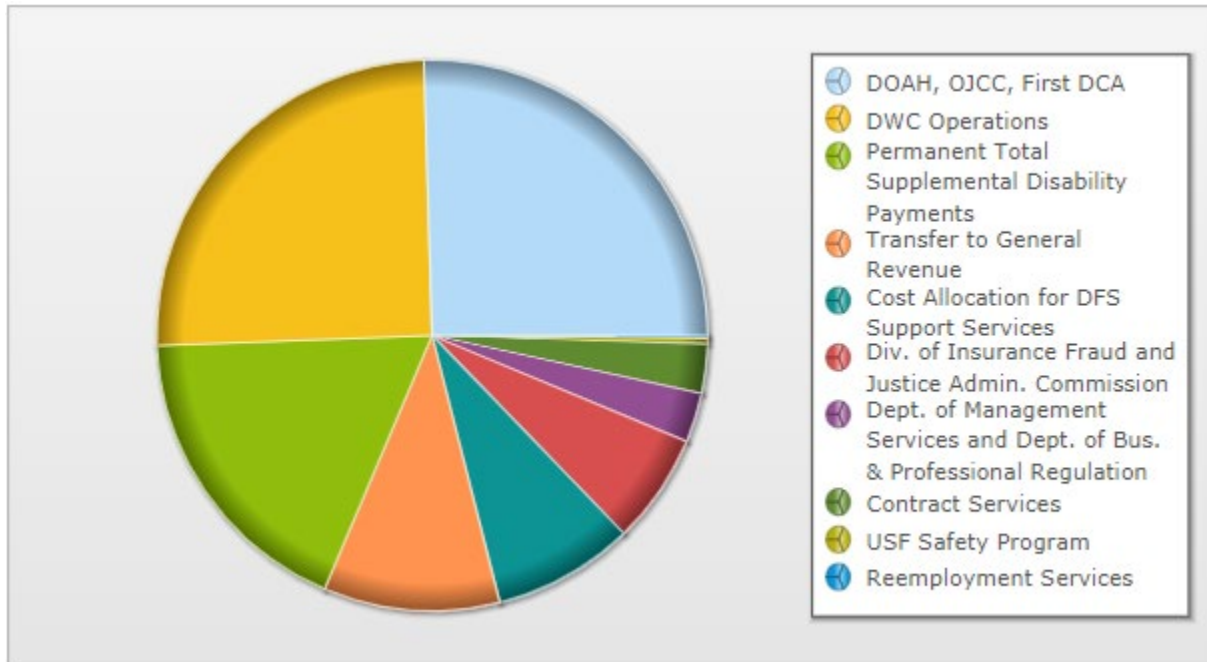


Financial Results

Workers' Compensation Administration Trust Fund (WCATF)

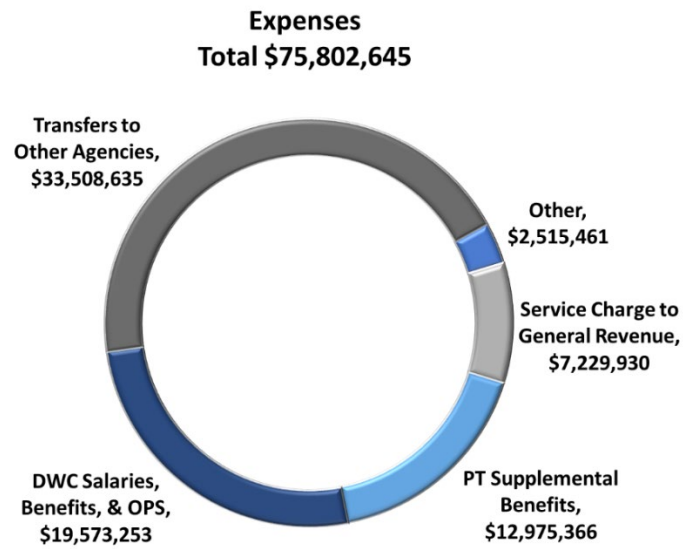
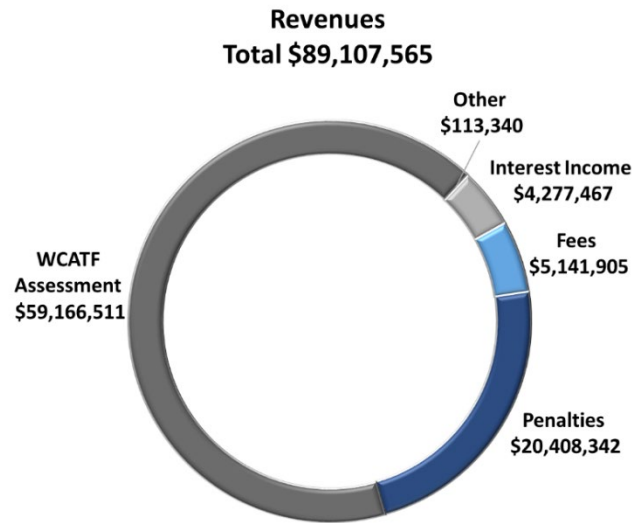
The WCATF is funded through a combination of assessments on workers' compensation insurance premiums, and the collection of fines, penalties, fees, and investment earnings. The WCATF assessment rate is applied to net premiums based on full policy premium values prior to the application of any deductible discounts and collected by carriers. Carriers and self-insurers submit their respective assessments to the DWC on a quarterly basis through START (web-based System for Tracking Assessments, Regulation, and Transactions). The WCATF rate history can be [found here](#).

WCATF Payment Categories



We offer an interactive version of this pie chart that details how the funds are required to be allocated under Florida law: [Link to Chart](#)

Workers' Compensation Administration Trust Fund (WCATF) Revenues and Expenses for FY 2018/19



Special Disability Trust Fund (SDTF)

The SDTF is maintained mostly by annual assessments and by the interest these assessment deposits earn in the State Treasury. In Florida, the net premiums written by the workers' compensation carriers and the net premium applicable to the self-insurers are the basis for the assessment rate, which is a percentage of net direct written premiums. Neither carriers nor self-insurers may deduct the cost of reinsurance. These premiums are then applied to the current applicable SDTF assessment rate to determine the carrier's quarterly assessment.

Paragraph 440.49(8)(d), F.S., requires the Special Disability Trust Fund to report annually on the status of the trust fund to the Governor, the Speaker of the House of Representatives, and to the President of the Senate.

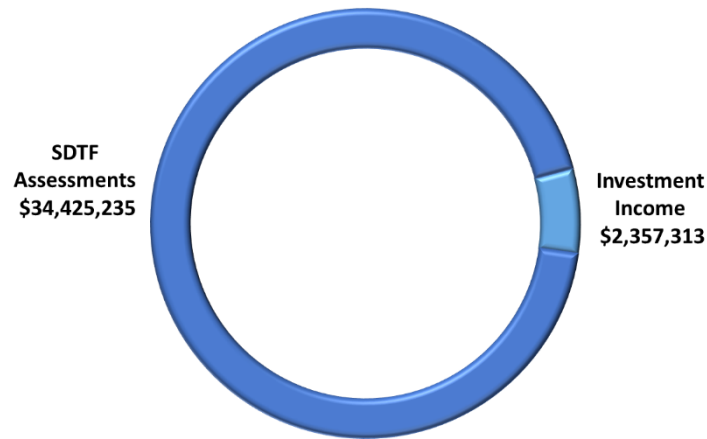
This report, [State of Florida Special Disability Trust Fund Actuarial Review](#), is required to be produced by an independent actuary and is available on the reports page of the DWC website along with all prior annual reports.

Evaluation Date	Undiscounted Unfunded Outstanding Claim Liability*	Discounted Unfunded Outstanding Claim Liability*
June 30, 2015	\$796	\$535
June 30, 2016	\$675	\$454
June 30, 2017	\$554	\$366
June 30, 2018	\$437	\$278
June 30, 2019	\$330	\$215

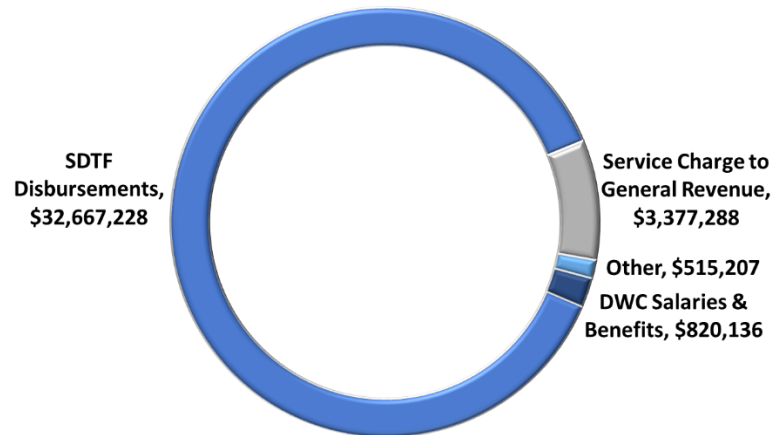
* dollars are in the millions

Special Disability Trust Fund (SDTF) Revenues and Expense for FY 2018/19

Revenues Total \$36,782,548



Expenses Total \$37,379,860



Regulatory Activities

Employer Compliance

Tasked with the responsibility of ensuring employers comply with statutory obligations in obtaining workers' compensation insurance coverage for employees, the Division conducts investigations and issues enforcement actions in accordance with Section 440.107, F.S., processes workers' compensation exemptions to qualified applicants in accordance with Section 440.05, F.S., and provides educational outreach and training to employers and to insurance industry representatives on workers' compensation coverage laws.

During FY 2018/19, the Bureau of Compliance (BOC) processed 97.98% of online exemption applications within 5 days of receipt; utilized data from various agencies to identify and successfully find non-compliant employers; investigated 1,724 public referrals alleging non-compliance; and collected exemption fees totaling \$5,096,889.

As of June 30, 2019, the Division managed 1,169 Periodic Payment Agreements (PPA). These PPAs have an outstanding balance owed totaling \$28,114,512. Employers may enter into a PPA with the Division in order to pay off their penalties over time.

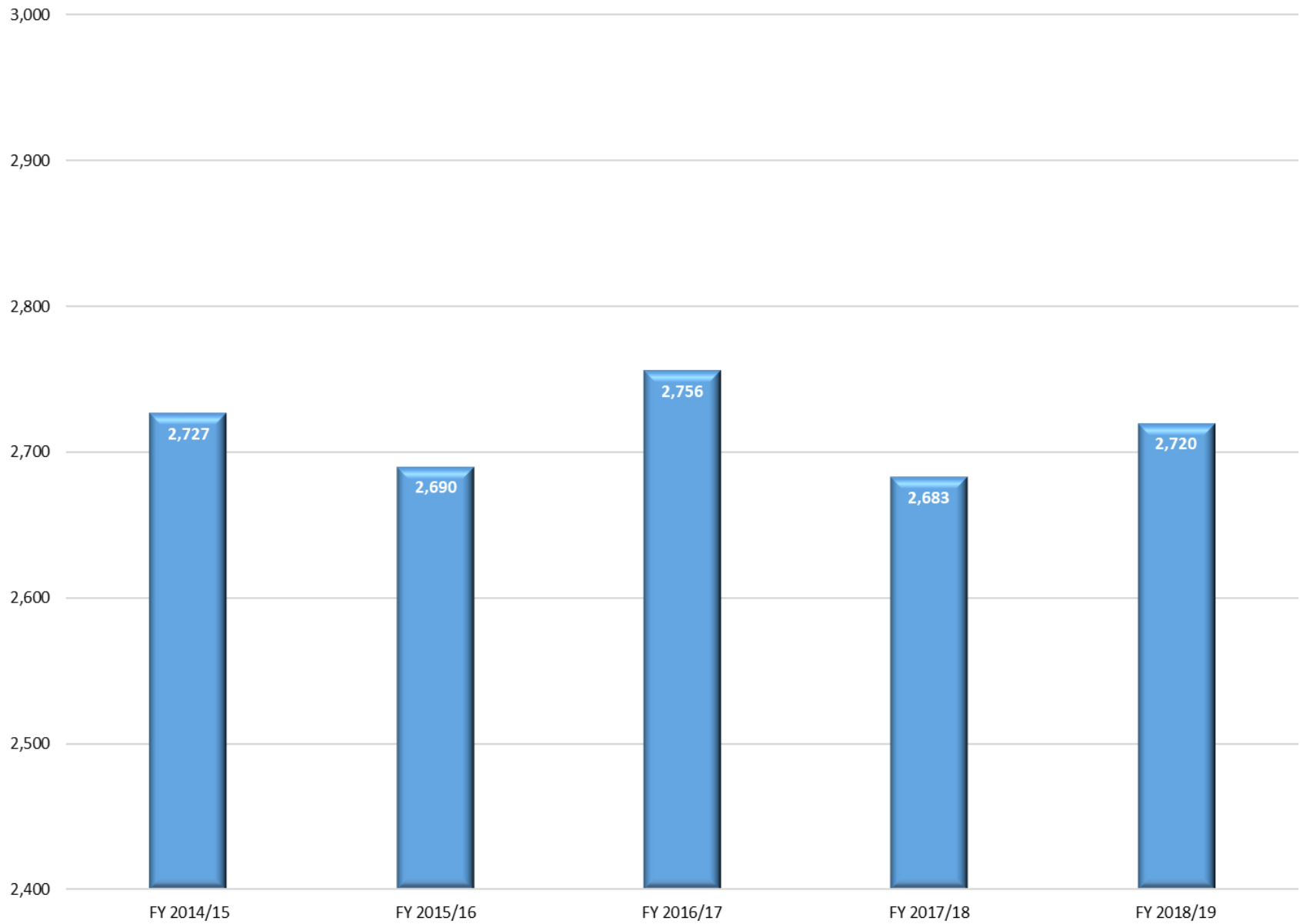
Investigators conduct physical, on-site inspections of an employer's job-site or business location to determine compliance with workers' compensation coverage requirements. If an employer is found to be out of compliance, the Division is required to issue a Stop-Work Order (SWO) to the employer.



Total Number of Investigations Conducted

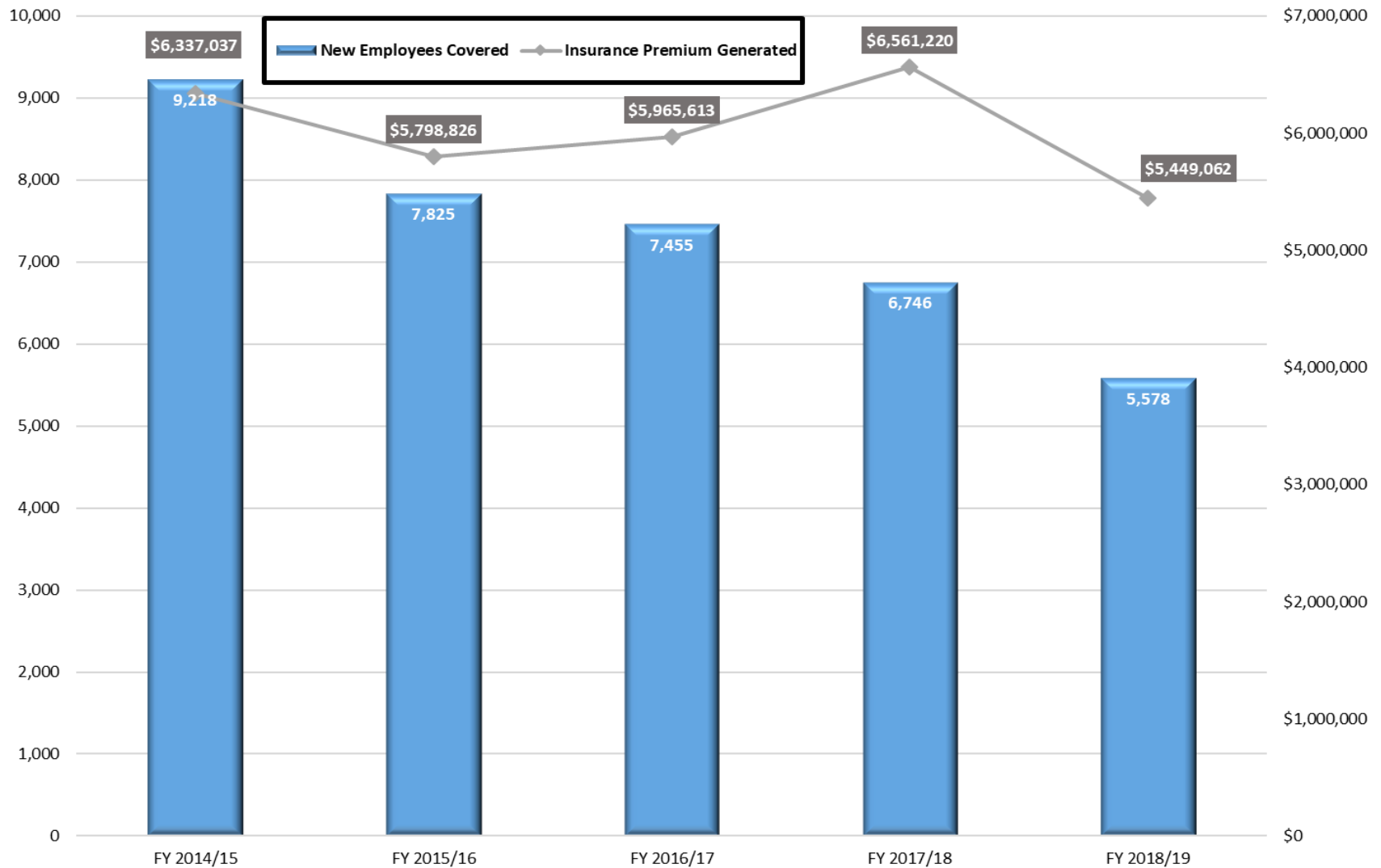
Fiscal Year	Number of Investigations
FY 2014/15	34,282
FY 2015/16	33,681
FY 2016/17	31,764
FY 2017/18	28,790
FY 2018/19	30,029

Stop-Work Orders Issued



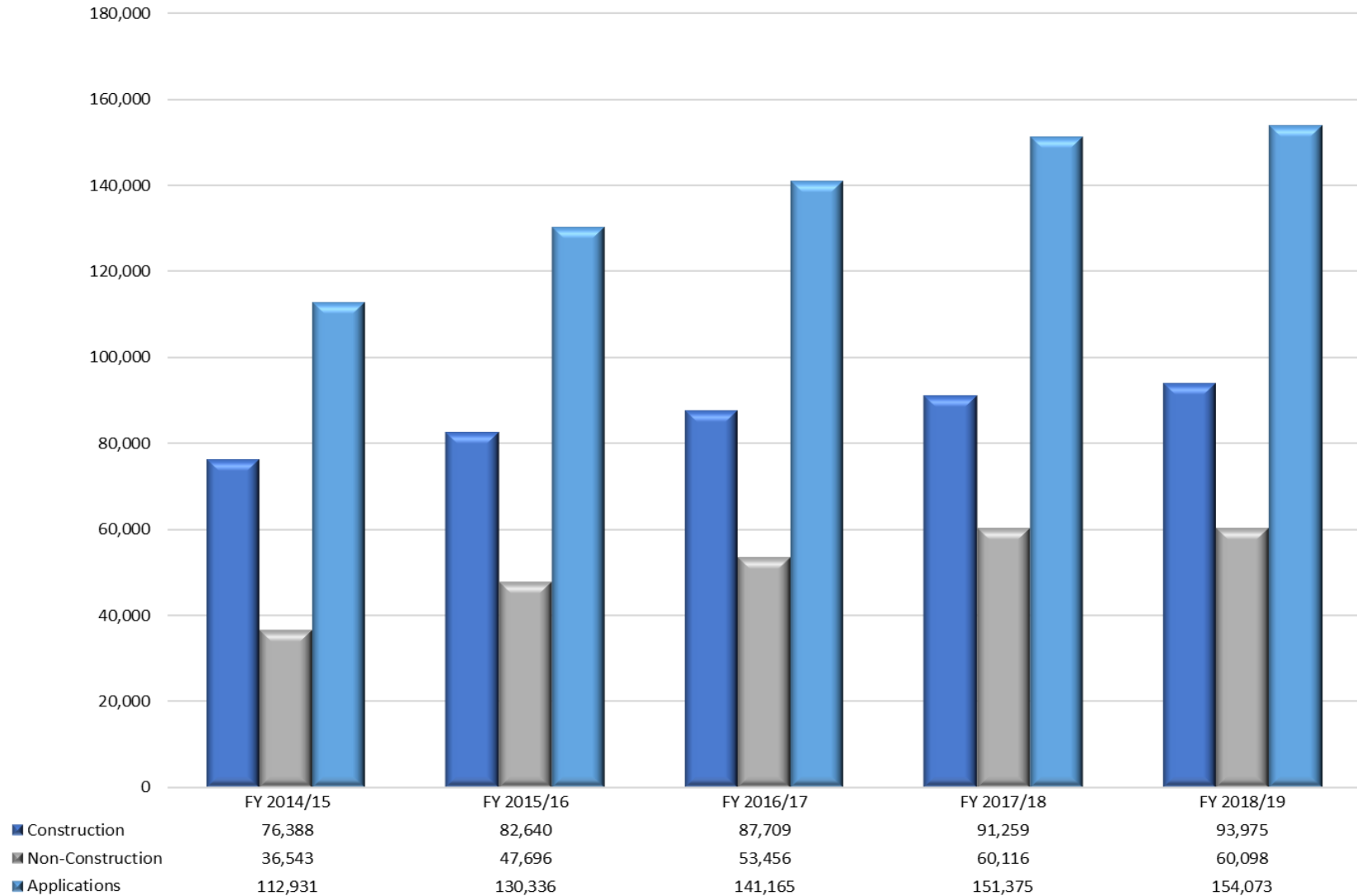
The Bureau of Compliance's efforts resulted in 5,578 new employees being covered and the generation of \$5,449,062 in insurance premiums during FY 2018/19.

New Employees Covered and Insurance Premium Generated based on Stop-Work Orders Issued



The increase in construction industry exemptions is reflective of the general improvement in Florida's economy and in the construction industry. The rise in non-construction exemptions is due to the statutory change that defines non-construction limited liability company members as "corporate officers". Corporate officers are employees but are allowed to exempt themselves.

Exemption Applications Processed



Employee Assistance

The Bureau of Employee Assistance & Ombudsman Office (EAO) is established pursuant to Section 440.191, F.S. EAO distributes workers' compensation information, proactively contacts injured workers to inform them of their rights and responsibilities, and educates injured workers about its services. EAO also works to resolve disputes between injured workers and carriers to avoid unnecessary expenses, costly litigation, or delays in the provision of benefits. EAO relies on team structures to successfully accomplish its mission. Each team focuses on a specific area of statutory responsibility to effectively assist injured workers.

Injured Worker Helpline

The Injured Worker Helpline Team educates callers from all system stakeholders. Through the Division's toll-free telephone line, (800) 342-1741, the team answers questions about the requirements of Florida's workers' compensation law and assists injured workers who are experiencing problems when obtaining medical and/or indemnity benefits. The team fulfills its mission by identifying disputed issues, researching injured workers' concerns, and contacting employers, carriers, medical providers, attorneys, or other appropriate parties to aid in resolution. All disputes requiring extensive investigation are referred to the Ombudsman Team.

Fiscal Year	Calls Handled	Spanish Speaking Callers	Disputes Received	Percentage of Disputes Resolved
FY 2014/15	40,517	8,559	373	94%
FY 2015/16	45,291	7,338	620	90%
FY 2016/17	45,291	7,559	393	98%
FY 2017/18	54,921	9,202	606	95%
FY 2018/19	45,871	8,056	782	97%

First Report of Injury (FROI)

The First Report of Injury Team contacts injured workers who have missed 8 or more days of work due to an on-the-job injury. This contact takes place early in the claim, typically within 18-20 days after the date of injury. The team provides educational resources regarding the workers' compensation system, surveys injured workers about their claims experience, advises workers of their statutory responsibilities, documents attorney involvement, and informs workers of EAO's various services.

Injured Workers Contacted

Fiscal Year	Number Contacted by Telephone	% Contacted
FY 2014/15	29,116	81%
FY 2015/16	30,236	80%
FY 2016/17	33,269	77%
FY 2017/18	30,581	79%
FY 2018/19	29,145	76%

The team communicated, by letter or by email, to **39,693** injured workers. These contacts were made to inquire about the status of injured workers' claims and advise them about EAO's services.

Customer Service

The Customer Service Team focuses on assisting and educating employers about the requirements of workers' compensation coverage, exemptions from coverage obligation, and various work-related & safety programs.

This team also responds to email inquiries from employers sent to the Division by email, at Workers.CompService@myfloridacfo.com.

Customer Service Team's Call Volume

FY 2018/19	Number of Calls
1 st Quarter	14,037
2 nd Quarter	12,262
3 rd Quarter	15,895
4 th Quarter	15,331
Total	57,525

Ombudsman

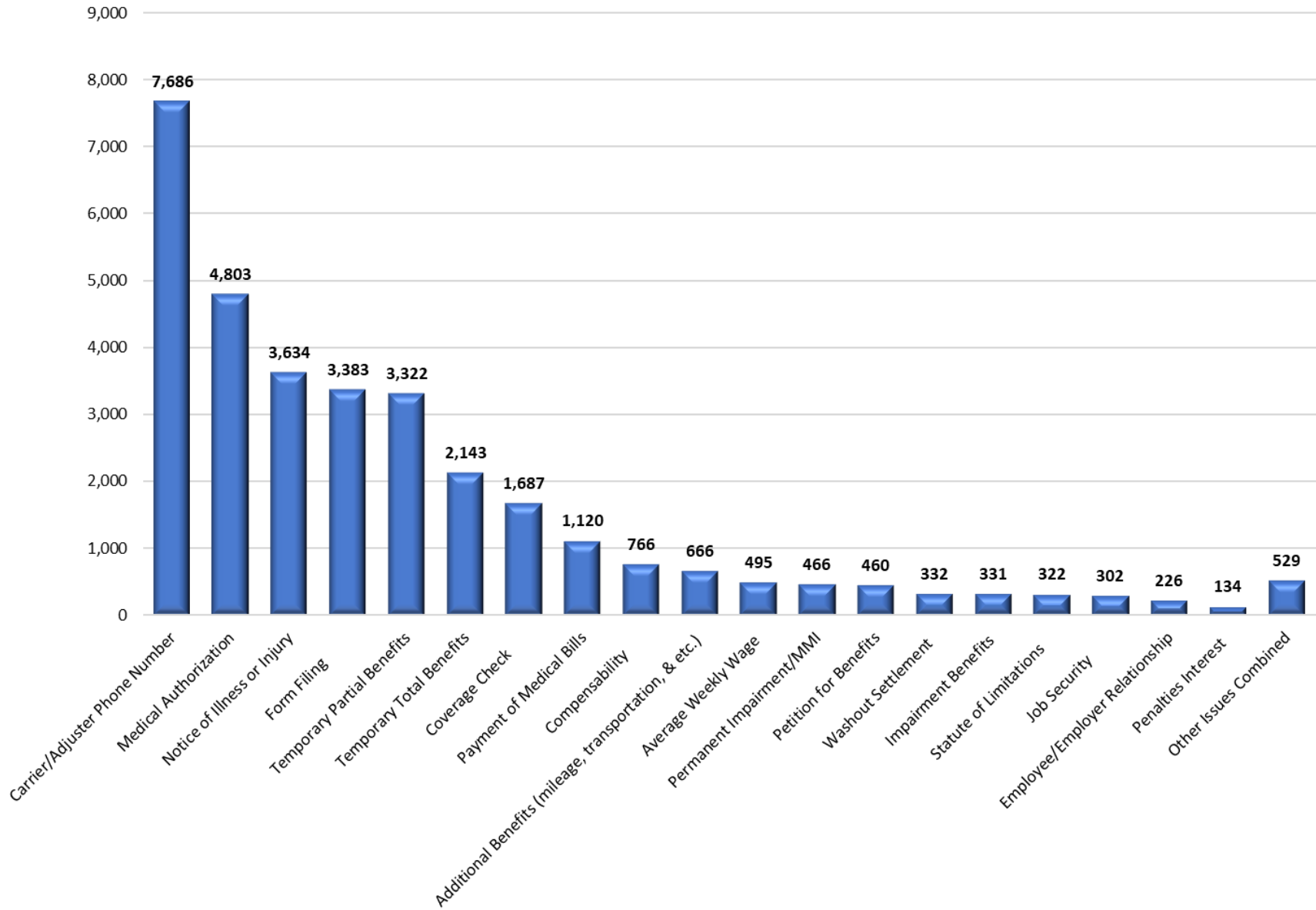
The Ombudsman Team assists injured workers to resolve complex disputes. The team conducts fact-finding reviews, analyzes claim files, researches case law, promotes open communication between parties, and generally helps parties to understand their statutory responsibilities. The team also assists injured workers locally, in offices throughout Florida; assists in resolving disputes; provides workers' compensation information applicable to each injured worker's claim, including guidance on the Petition for Benefits (PFB) process; and assists injured workers referred from the Governor's and CFO's offices, legislators, and other elected officials. The team also responds to emails inquiries from stakeholders sent to the Division by email, at WCEAO@myfloridacfo.com.

The Ombudsman team resolved 93% of the 251 disputes received during FY 2018/19. The medical bill disputes totaled \$16,975 in previously unpaid medical bills. The team resolved indemnity benefit disputes totaling \$119,605. Additionally, the Ombudsman team prevented 2,492 potential disputes by educating injured workers with in-depth, case-specific information.

Ombudsman Intervention FY 2018/19

Issue	Resolved	Unresolved	% Resolved
Attendant Care	1	0	100%
Average Weekly Wage	6	1	86%
Compensability	2	4	33%
Impairment Income Benefits	2	0	100%
Indemnity - TPD	33	2	94%
Indemnity - TTD	24	1	96%
Medical Authorization	97	4	96%
Medical Bills	10	2	83%
Medical Mileage	15	0	100%
Other	16	4	80%
Penalties & Interest	27	0	100%
Total	233	18	93%

Issues Addressed by Ombudsman and Helpline Teams FY 2018/19



Records Management

Florida's Public Records Law and Civil Rules of Procedure (Chapter 119, F.S.), require the release of certain information for public inspection upon request. Upon receipt of a request, documents must be identified, located, printed, assembled from multiple mediums, inspected for confidentiality, and redacted by the team. And if applicable, released upon receipt of payment as authorized by Section 119.07, F.S. Each request undergoes multiple quality reviews prior to the release of records.

- On average, public records requests are invoiced within 1.67 business days of their request or they are provided with documents if there was no charge required. Subpoenas, on average, were invoiced in less than 1.59 business days of receipt.
- The Records Management Section processed 5,929 subpoenas and 2,057 public records requests during FY 2018/19.

Public Records requests may be submitted via email to the Division at: DWCPublicRecordsRequest@myfloridacfo.com.

Records Privacy Requests

House Bill 1107, effective July 1, 2017, made the personal identifying information of an injured or deceased employee which is contained in reports, notices, records, or supporting documentation held by the Department of Financial Services pursuant to Chapter 440, F.S., confidential or exempt, however, some workers' compensation accident information remains releasable upon request.

Paragraph 119.071(4)(d), F.S., provides exemption of personal information for certain occupational classes (e.g., law enforcement personnel, correctional officers, firefighters, judges, etc.). The employee or employer may request an agency exempt personal information (e.g., home address, telephone number, and date of birth) from public records release if a person's occupation qualifies. Additionally, the requestor is provided a follow-up email notification regarding the status of the exemption request.

For a list of qualifying occupations and educational information, visit: <http://www.myfloridacfo.com/division/WC/employee/records.htm>.

Questions regarding records privacy can be emailed to: DWCRrecordsPrivacy@myfloridacfo.com

- During FY 2018/19 the Records Management Section processed 861 requests for workers' compensation profiles to be exempt from public records inspection under Paragraph 119.071(4)(d), F.S.
- Records privacy requests in FY 2018/19 were, on average, processed in 2 business days.

Reemployment Services (RES)

The Reemployment Service Team educates injured workers about the availability and provision of services designed to assist them with attaining suitable and gainful employment following a work-related injury. The team ensures that required documentation is received, interviews the injured worker, and assesses their eligibility for services.

The team provides services that include: vocational counseling, transferable skill analysis, resumé writing/development, job search assistance, job seeking skills, vocational evaluations, and training and education (including GED). Injured workers submit screening requests for services through the Division's Injured Worker Web Portal.

The team educates carriers about reemployment services requirements under Florida's workers' compensation law.

- During FY 2018/19, the Reemployment Services team received 196 requests for screenings through the Division's Injured Worker Web Portal.
- The team screened 139 injured workers for services and provided assistance to 68 injured workers who were eligible to return to suitable, productive employment.

Reemployment Services Resources

- Contact the Reemployment Services Team by phone at (800) 342-1741, option 4 or by email at WCRES@myfloridacfo.com
- [Injured Worker Reemployment Services Web Portal](#)
- [Reemployment Services Web Portal](#)
- [Reemployment Services Program Brochure](#)



Insurer Reporting Services' Section

Proof of Coverage (POC) EDI Data Collection

With the exception of self-insurers, Chapter 69L-56, F.A.C. requires every insurer to file policy information with the Division for Certificates of Insurance, Notices of Reinstatement, Endorsements, and Cancellations. All POC data is collected and inspected via Electronic Data Interchange (EDI).

POC EDI data is used to populate several online Division databases including: "Proof of Coverage" database, which provides information used to verify if an employer currently has workers' compensation coverage, to view a prior policy period, or to validate if a person has a workers' compensation exemption.

The "Construction Policy Tracking" database provides the policy status of every subcontractor a contractor has chosen to track. Its features include email notifications to contractors informing them of any changes to a subcontractor's coverage status. As of June 30, 2019, the Construction Policy Tracking database had a total of 10,795 registrants and 43,651 subcontractors being tracked.

POC data is also used for the newly developed [Coverage Assistance Program](#). Employers and agents can use this online tool to see which carriers are currently writing insurance coverage for certain types of businesses.

Proof of Coverage Accepted Filings

Fiscal Year	FY 2014/15	FY 2015/16	FY 2016/17	FY 2017/18	FY 2018/19
New Policies	281,190	305,712	314,613	318,855	332,072
Binders	2,118	3,489	3,251	2,248	2,149
Reinstatements	84,765	86,558	87,348	84,023	81,194
Endorsements	415,389	363,471	320,326	342,166	340,506
Cancellations	160,193	158,659	158,547	158,053	157,513
Total	943,655	917,889	884,085	905,345	913,434

Medical EDI Data Collection

Pursuant to Rule 69L-7.710, F.A.C., all required medical billing (hospital, health care provider, ambulatory surgical center, dental, and pharmacy) forms must be submitted to the Division in accordance with the date appropriate Florida Medical EDI Implementation Guide (MEIG). The Division collects this information to adopt fee schedules, to evaluate carrier performance, and to identify over-utilization.

To assist with the electronic filing of medical bills, the Medical Data Management System (MDMS) website was developed. Small insurers with a low volume of workers' compensation medical bills (no more than 200 per month for all 4 form types) may utilize the MDMS website to comply with the mandate for electronic submission of the DFS-F5-DWC-9, DFS-F5-DWC-10, DFS-F5-DWC-11, and DFS-F5-DWC-90 medical bills. Monthly report cards are generated that identify the primary reasons for initial medical bill rejection. The report cards also allow Medical EDI submitters to track their rejection rates and compare their rates with that of the industry.

For information on setting up an MDMS web account or assistance regarding Medical EDI reporting, email the Medical Data Management Team at: MedicalDataManagementTeam@myfloridacfo.com.

Electronic Medical Bills Accepted

Fiscal Year	Total Bills
FY 2014/15	4,332,002
FY 2015/16	4,111,714
FY 2016/17	4,169,569
FY 2017/18	4,140,862
FY 2018/19	3,887,226

Claims EDI Data Collection

Claims EDI data is collected pursuant to Chapter 69L-56, F.A.C., and is used to populate the Division's primary accident databases. The Division collects this data to ensure injured workers are being paid accurately, to inform and educate employers, for informal dispute resolution, and for system analysis.

In an effort to increase acceptance percentages of claims EDI filings, the Claims EDI team provides triage assistance. Triage assistance for trading partners consists of action plans with training, teleconferences, on-site visits, and webinars. The team provided training/triage sessions with 9 trading partners and 70 adjusters in attendance, resulting in a 6% increase to the acceptance rate for the industry, since fiscal year FY 2014/15. Sessions consist of EDI Webinars and/or Triage sessions for individual trading partners covering:

- Claims EDI Warehouse Demonstration Insurer Access View
- Reporting Return to Work Information MTC S1 (Suspension-RTW) vs. FROI or SROI 02 (Change)
- Reinstatement of Benefits (MTC RB and MTC ER)
- Top Errors Affecting Claim Administrators and How to Correct Them
- Proper Reporting of Claim Type 'L' (Medical Only to Lost-Time)

For questions or assistance regarding Claims EDI data, contact the Claims EDI team by email at Claims.EDI@myfloridacfo.com.

Claim Form Filings

Fiscal Year	EDI	Paper	Total
FY 2014/15	474,942	140	475,082
FY 2015/16	482,815	106	482,921
FY 2016/17	489,318	87	489,405
FY 2017/18	490,585	81	490,666
FY 2018/19	687,273	59	687,332

Insurer Performance

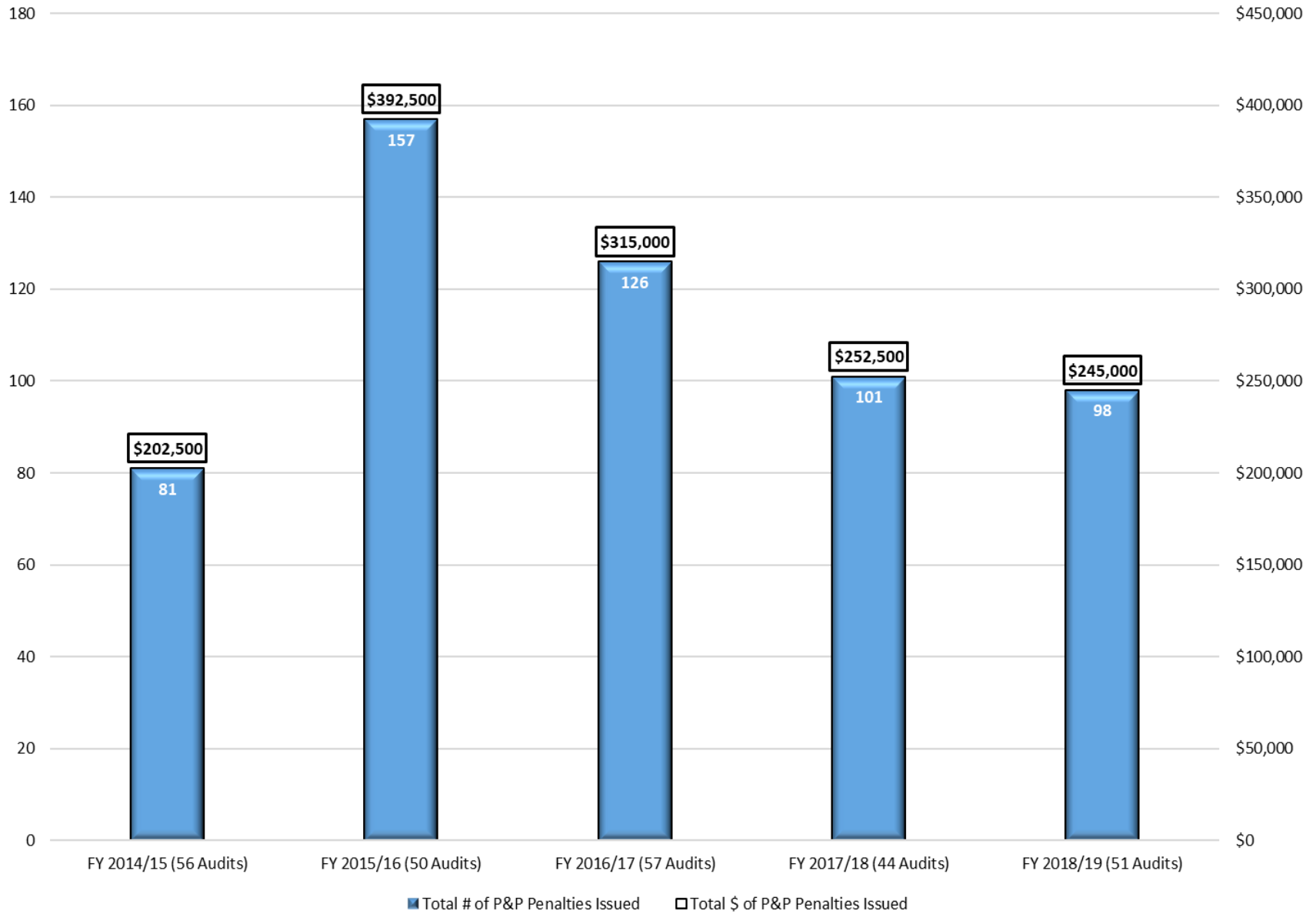
The Bureau of Monitoring and Audit identifies patterns and practices in claims-handling, timely and accurate payment of benefits to injured workers, timely and accurate payment of medical care, timely and appropriate filing of required forms and reports, and enforces compliance with compensation orders of the Judges of Compensation Claims.

The Audit Section, within the Bureau of Monitoring and Audit, conducted 51 on-site insurer audits and examined 6,376 claim files. These examinations found 682 underpaid claim files and helped secure an additional \$468,898 in late indemnity payments along with penalties and interest for injured workers.

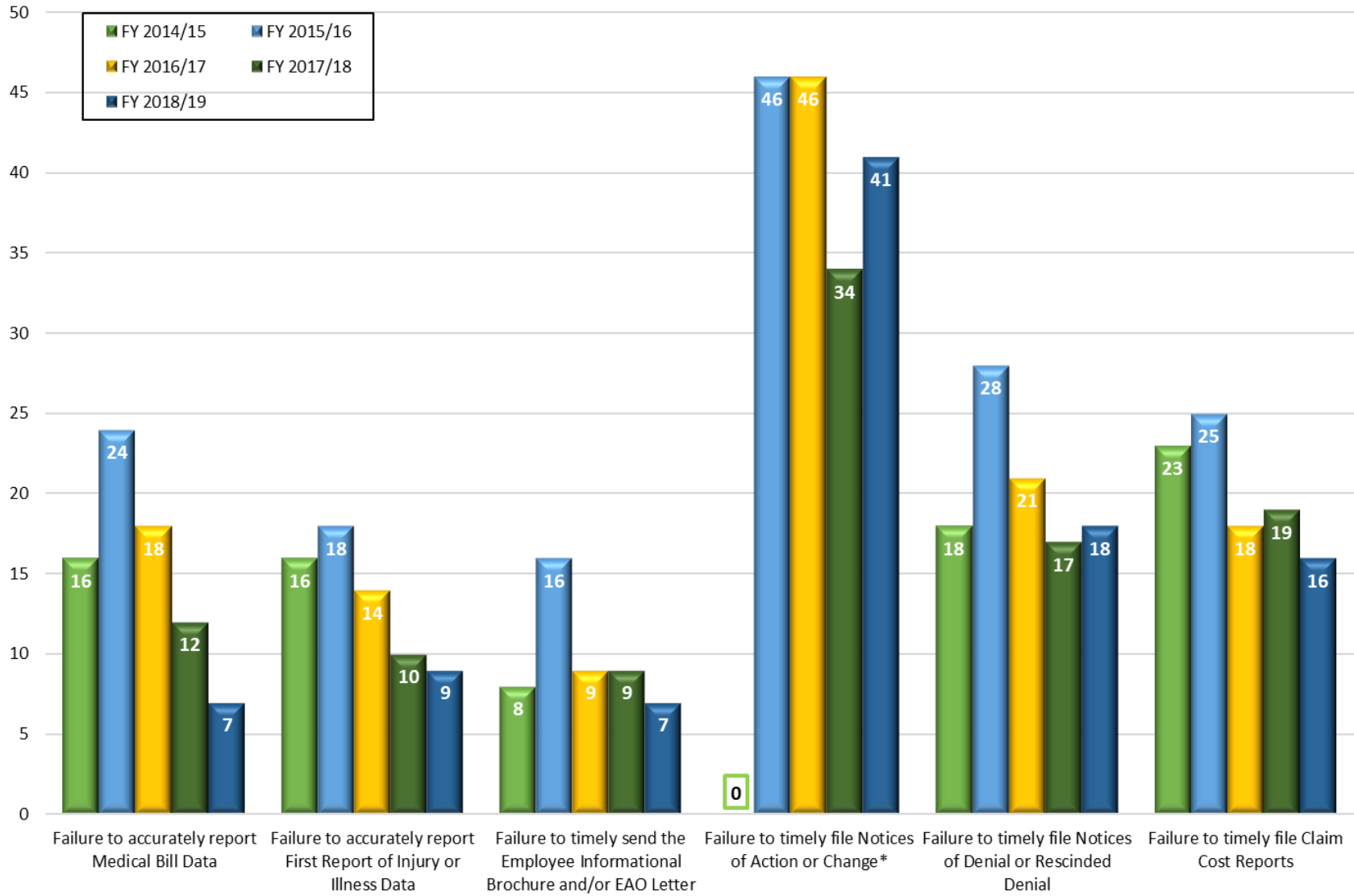
The table below shows five fiscal years of claim review results. The Untimely Indemnity Payment and Untimely First Reports of Injury or Illness penalties were paid to the Division, and the Benefits Recovered for Injured Workers were paid to those injured workers.

Fiscal Year	Number of Audits	Total Amount of Penalties Issued for Untimely Indemnity Payments	Total Amount of Penalties Issued for Untimely First Reports of Injury or Illness	Total Amount of Benefits Recovered for Injured Workers due to Discovered Underpayments
FY 2014/15	56	\$83,300	\$60,300	\$310,845
FY 2015/16	50	\$99,400	\$78,900	\$337,727
FY 2016/17	57	\$62,500	\$48,600	\$270,123
FY 2017/18	44	\$81,750	\$54,000	\$467,161
FY 2018/19	51	\$72,050	\$38,400	\$468,898

Non-Willful Pattern and Practice Penalties by Fiscal Year



Non-Willfull Pattern and Practice Penalties by Category and Fiscal Year



*Penalty for untimely Notice of Action or Change was not assessed until Fiscal Year 2015/16

Permanent Total Disability

If, after reaching Maximum Medical Improvement, an injured worker's injuries are so severe, as defined by law, that the injured worker is left permanently unable to work, then the injured worker may receive permanent total disability benefits. Bureau of Monitoring and Audit has:

- Reviewed 34,297 electronic permanent total claims transactions.
- Calculated, approved, and processed permanent total supplemental benefits for 761 claims totaling \$12,983,416. These benefits are annual cost-of-living adjustments.
- Recovered an additional \$1,913,576 in carrier underpaid claims for 297 claimants.

For assistance in estimating Permanent Total (PT) benefits, please contact the Bureau of Monitoring and Audit at (850) 413-1608.

Medical Services Section

This section provides educational assistance and consultation on issues related to medical bill filing and reimbursements. They also provide administrative support to the Three-Member Panel. The Three-Member Panel adopts uniform schedules of maximum reimbursement allowances for physicians, hospitals, ambulatory surgical centers (ASC), and other service providers. The section is also responsible for determining if a carrier properly disallowed or adjusted the payment of medical bills through the receipt of Petitions for Resolution of Reimbursement from health care providers. The section:

- Received 3,301 Petitions for Resolution of Reimbursement
- Issued 1,438 determinations (55.2%) and 1,169 dismissals (44.8%)
- Processed 19 reports of provider violations
- Maintained the certification of 144 expert medical advisors (EMA)

Number of Petitions Submitted by Provider Type

Type	FY 2014/15	FY 2015/16	FY 2016/17	FY 2017/18	FY 2018/19
Practitioner	7,323	3,601	4,072	1,687	1,387
ASC	331	400	348	384	369
Hospital Inpatient	453	341	238	376	502
Hospital Outpatient	1,550	1,184	640	787	1,043
Total	9,657	5,526	5,298	3,234	3,301

Assessments Section

The Assessments Unit (AU) calculates, collects, reconciles, and audits the quarterly workers' compensation assessment payments made by insurance companies, assessable mutual insurance companies, self-insurance funds, and individual self-insurers. These assessments support the Workers' Compensation Administration Trust Fund (WCATF) and the Special Disability Trust Fund (SDTF), which in turn, fund Florida's workers' compensation system. The AU also provides data used to determine the annual assessment rate for each of the WCATF and the SDTF.

The AU collected a total of \$93,591,747.13 in assessments for FY 2018/19. A Florida workers' compensation premium basis of over \$6 billion generated WCATF assessments of \$59,166,511.53, and the SDTF premium basis of more than \$4.2 billion resulted in assessments of \$34,425,235.60.

Florida Statutes determine the premium basis for each trust fund. The WCATF assessment is based on collected premium, whereas the SDTF basis uses written premium. Also, the WCATF premium basis includes the deductible premium credits of insurers' policies.

The AU collected, audited, and reconciled the quarterly assessments of 376 insurance companies and self-insurance funds.

In addition, the AU calculated the imputed premium of 396 individual self-insured entities. The imputed premium is based on the self-insureds' job classifications, payrolls, volume discounts, statutorily allowed credits, and experience modification factors. This imputed premium is then used to determine the self-insurance assessments for each trust fund.

Assessment Rates

The Division is responsible for calculating the annual assessment rates for both the Workers' Compensation Administration Trust Fund and the Special Disability Trust Fund. By July 1st of each year, the Division notifies stakeholders of the next [calendar year's assessment rate](#) for each trust fund as can be seen by clicking the [Department Bulletin and Rate Order](#). In 2019, the SDTF assessment rate decreased for the 10th consecutive year, and the WCATF assessment rate decreased for the 8th consecutive year.

The WCATF and SDTF assessment rates are effective on January 1st of each calendar year for workers' compensation insurance companies and self-insurance funds writing business in Florida. For each individually self-insured employer, the rates commence with the Rate Effective Date (RED) after January 1st.

WCATF		SDTF	
Calendar Year	Rate	Calendar Year	Rate
2016	1.43%	2016	1.16%
2017	1.25%	2017	1.09%
2018	0.97%	2018	0.91%
2019	0.90%	2019	0.42%
2020	0.79%	2020	0.40%

The Bureau of Financial Accountability (BFA) contains the Division's largest monetary transaction programs and safeguards its assets by developing and implementing a broad range of financial accountability measures. This bureau's programs work to implement and build upon their internal checks and balances while maintaining effective financial controls that focus on managing the daily functions of cash receipts, revenue, and warrant payments. Included in these controls are a series of comprehensive reconciliation processes that balance each cash receipt and cash payment processed.

Self-Insurance Section

The Self-Insurance section is responsible for regulating employers who elect to individually self-insure for workers' compensation benefits. Self-insureds can be categorized as either governmental or private self-insured employers. The Section actively regulates governmental self-insured employers and contracts with the Florida Self-Insurers Guaranty Association (FSIGA) to co-regulate private self-insured employers. The laws, rules, and requirements are unique for each type of self-insured employer. As of June 30, 2019, there were 267 governmental self-insured employers and 119 private self-insured employers.

This section monitors the essential flow of timely and accurate information from both governmental and private self-insureds. Depending on whether a self-insured is private or governmental, the entity reports information such as their National Council on Compensation Insurance ([NCCI](#)) classification codes, payrolls, loss data, outstanding liabilities reports, financial statements, and other documents.

This section is directly involved in receiving and processing information from governmental self-insureds, and FSIGA manages the private self-insured reporting process including new self-insurance applications. As required by law, FSIGA reviews information submitted by private self-insureds and makes recommendations to the Division with regards to new applicants, adjustments to security deposits, actuarial reports, revocation of self-insurance privileges, and timely reporting of various forms required by administrative rule.

Self-Insurers: (<u>Governmental</u> and <u>Private</u>)		<u>Qualified Servicing Entities (TPAs)</u>	
FY 2014/15	395	FY 2014/15	97
FY 2015/16	394	FY 2015/16	100
FY 2016/17	396	FY 2016/17	102
FY 2017/18	393	FY 2017/18	105
FY 2018/19	386	FY 2018/19	107

Special Disability Trust Fund Section

The Special Disability Trust Fund (SDTF) has 3 primary business processes:

- Review all filed Proofs of Claim to determine if the claim meets eligibility requirements for reimbursement of benefits paid by the carrier and subsequently notify the carrier whether the claim has been accepted or denied;
- Determine eligibility for reimbursement by the Fund through auditing Reimbursement Requests and supporting documentation submitted by the carrier on claims that have been accepted; and
- Issue accurate reimbursements.

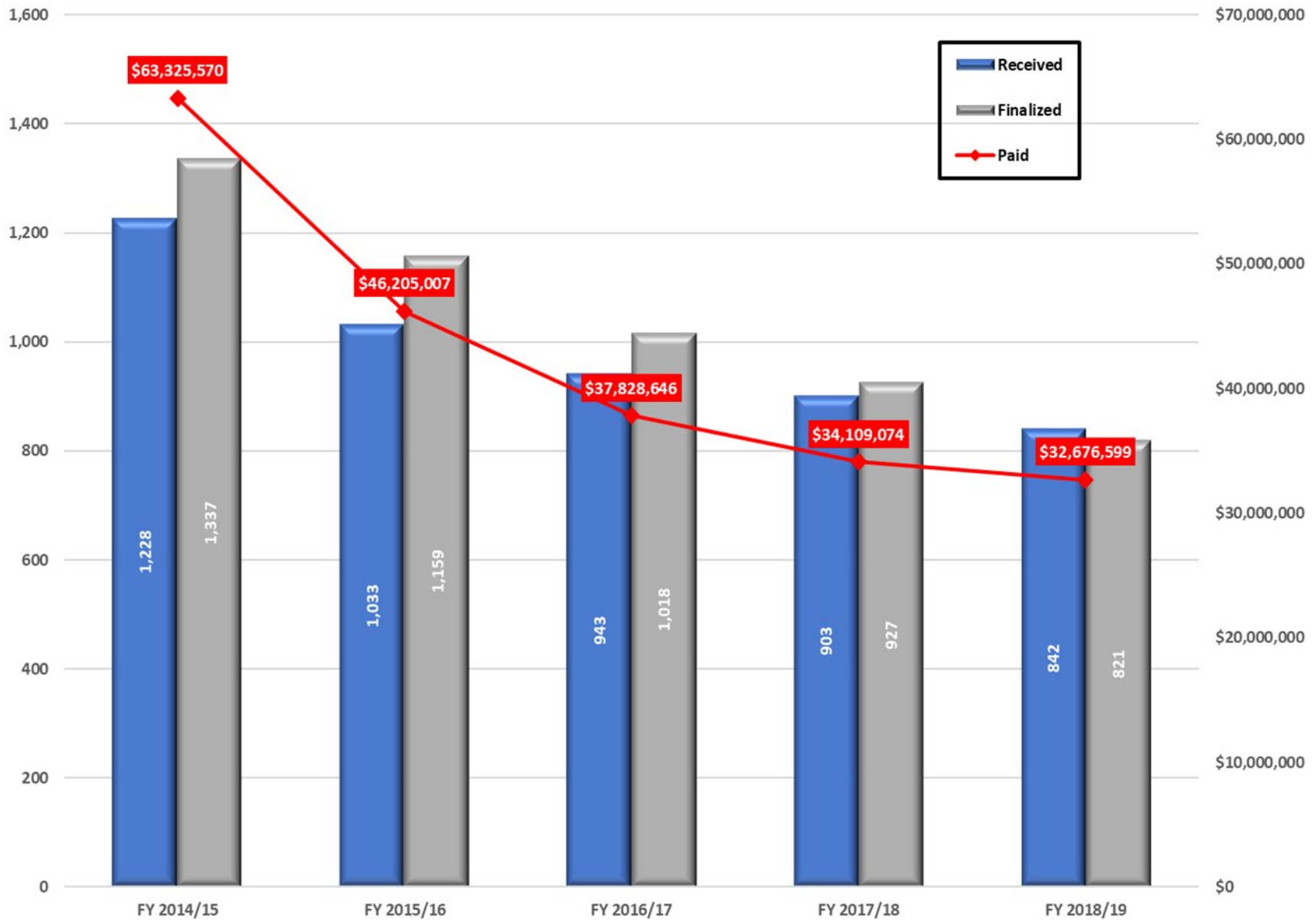
The SDTF issued \$32.6 million in reimbursements to carriers and self-insured employers. Through the audit process, the SDTF identified and disallowed \$1.9 million in non-reimbursable benefits. These audit results equate to 5.7% of the total dollars reimbursed. The SDTF averages 33 days to issue payment for approved reimbursement requests. The SDTF section is also responsible for the payment of permanent total supplemental benefits, which the Division is required to pay, on dates of accident prior to July 1, 1984.

Financial Accountability Section

The Financial Accountability Section (FAS) monitors the receipt of all payments related to Notices of Election to be Exempt and employer penalty payments. The section oversees the process of reinstating Stop-Work Orders to employers who default on payments, refers delinquent accounts to the collection agency, and files liens against those employers.

If an employer violates the workers' compensation law and is assessed a penalty, the employer has the option of paying the penalty over a 5-year period. The employer must enter into a Periodic Payment Agreement (PPA) with FAS and agree to make penalty payments monthly. The section collected \$18,109,994.58 in penalty payments during this fiscal year.

SDTF - Reimbursement Requests



Rule Changes & Notices

The purpose of agencies is to promulgate rules to implement legislation. These regulations are codified in the [Florida Administrative Code](#) (FAC). There are also numerous decisions, opinions, and rulings of state agencies. Rulemaking is defined as the adoption, amendment or repealing of a rule. This consists of drafting rule text, providing notice to the public, accepting public comment, and filing the rule for adoption. There are times where many more steps may be involved.

A daily publication which gives the public current information about the status of rules that are moving through the rule making process is the [Florida Administrative Register](#) (FAR). The FAR also includes notices of public meetings, workshops and hearings, and miscellaneous actions required to be published by the statute.

Notices required to be published in the FAR can include:

- Notices of Rule Development
- Notices of Proposed Rules
- Notices of Change, Correction, and Withdrawal
Emergency Rules
- Petitions and Dispositions Regarding Rule Variance and Waiver
- Notices of Meetings, Workshops, and Public Hearings
- Notices of Petitions and Dispositions Regarding Declaratory Statements
- Notices of Petitions and Dispositions Regarding Non-Rule Policy Changes
- Announcements and Objection Reports of the Joint Administrative Procedures Committee
- Notices Regarding Bids, Proposals, and Purchasing
- Notices of Intent to Adopt rules pursuant to Sections 120.54(6), 120.54(1)(i)2., and 403.8055, Florida Statutes



The Division of Workers' Compensation's Rule Changes and Notices are at this [link](#).

The Division has an electronic alert system to notify subscribers of upcoming news impacting the Workers' Compensation industry, dates of public meetings and workshops. To receive important Division notices, register for our email list. [Register](#)

Points of Interest to Our Readers

Delivery of Training and Education to Our Stakeholders:

Bureau of Compliance

This Bureau conducted 21 seminars and 24 webinars on workers' compensation and work-related safety for 658 employers statewide. Speakers from the Bureau are available to provide information about coverage requirements and enforcement actions, upon request. For contractors licensed by the Department of Business and Professional Regulation, an hour toward the workers' compensation continuing education requirement can be awarded.

Please contact BOCSeminars@myfloridacfo.com with your request.

Bureau of Employee Assistance

This Bureau, working with the Bureau of Monitoring & Audit, produced 2 educational videos that are located on the Division's website. To view these videos, please visit: <https://www.myfloridacfo.com/division/wc/videos/>.

Bureau of Financial Accountability

The Self-Insurance Section provided 4 "classification & payroll" webinars to 25 self-insurers during this fiscal year. A total of 32 employees participated in the training.

Bureau of Monitoring & Audit

This Bureau provided training on claims handling to 7 insurers, 8 webinars, 1 seminar, and trained 9 trading partners and 70 adjusters. For more information about workers' compensation related training, please visit: <https://www.myfloridacfo.com/division/wc/employer/educational.htm>.

Injured Worker Frequently Asked Questions (FAQs)

The Division has created a collection of FAQs based on its many interactions with injured workers. This collection of information is available online at: <https://www.myfloridacfo.com/division/wc/employee/faq.htm>.

The Division of Workers' Compensation Guide

To gain a better understanding of workers' compensation in Florida, the Division provides a [WC System Guide](#).

The guide is intended to give all parties a general overview and summary of the workers' compensation system. It is not intended to supersede or take the place of the Florida workers' compensation law (Chapter 440, F.S.) or Florida Workers' Compensation Case Law.

Its purpose is to assist all stakeholders in their roles and responsibilities. It provides general information and references that may assist with resolving issues and answering questions.

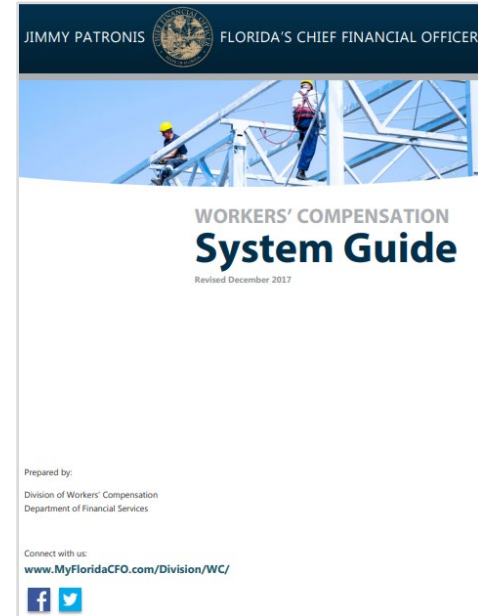
Maximum Workers' Compensation Rate, Effective January 1, 2020

The Florida Department of Economic Opportunity has determined the statewide average weekly wage paid by employers, subject to the Florida Reemployment Assistance Program Law, to be \$970.58 for the 4 calendar quarters ending June 30, 2019.

Subsection 440.12(2), Florida Statutes (2019), expressly provides that, for injuries occurring on or after August 1, 1979, the weekly compensation rate shall be equal to 100% of the statewide average weekly wage, adjusted to the nearest dollar, and the average weekly wage determined by the Department of Economic Opportunity for the 4 calendar quarters ending each June 30 shall be used in determining the maximum weekly compensation rate with respect to injuries occurring in the calendar year immediately following.

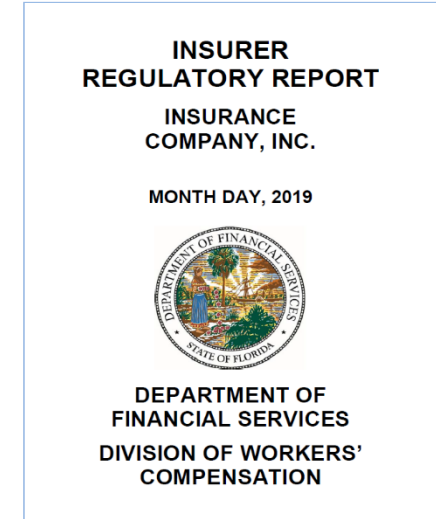
Accordingly, the maximum weekly compensation rate for work-related injuries and illnesses occurring on or after January 1, 2020, shall be \$971.00.

[Minimum/Maximum Compensation Rate Table](#)



Insurer Regulatory Report

The Insurer Regulatory Report (IRR) is given to executives of insurance companies several weeks prior to the Bureau of Monitoring and Audit conducting an audit of their respective claims-handling practices. The report further engages and informs regulated entities about their claims-handling practices. Carriers can use the information to identify key processes, policies, or practices that are instrumental in maintaining or improving their performance levels. Performance data is shown by individual carrier and by the industry average, so the individual carrier can see if it is performing better or worse than the industry average.



Opioid Summary Report

What is happening with opioids from a workers' compensation perspective?

The purpose of this and future publications is to provide insight into the unique aspects of the Florida's workers' compensation system. We hope you find the data informative and beneficial.



Online Tools

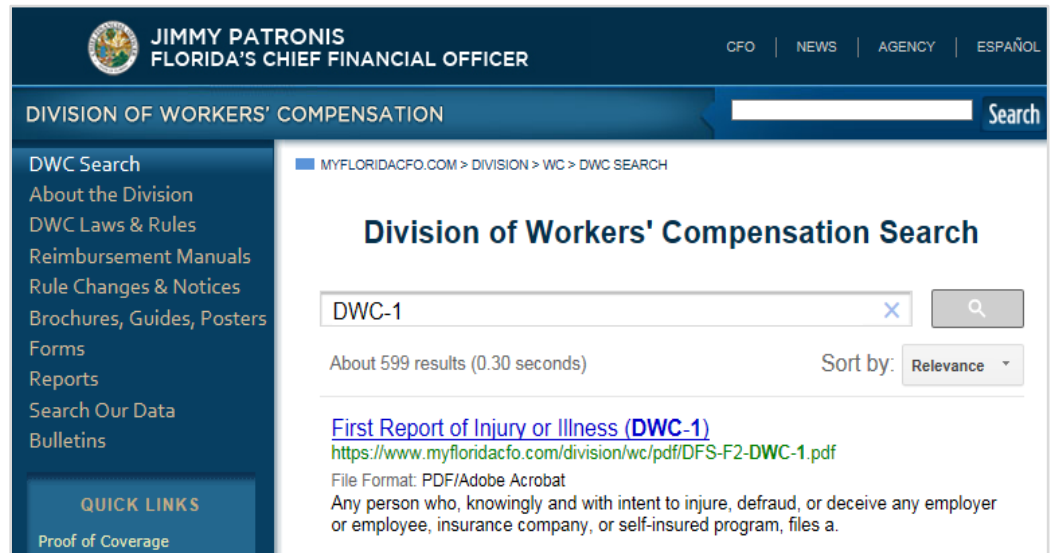
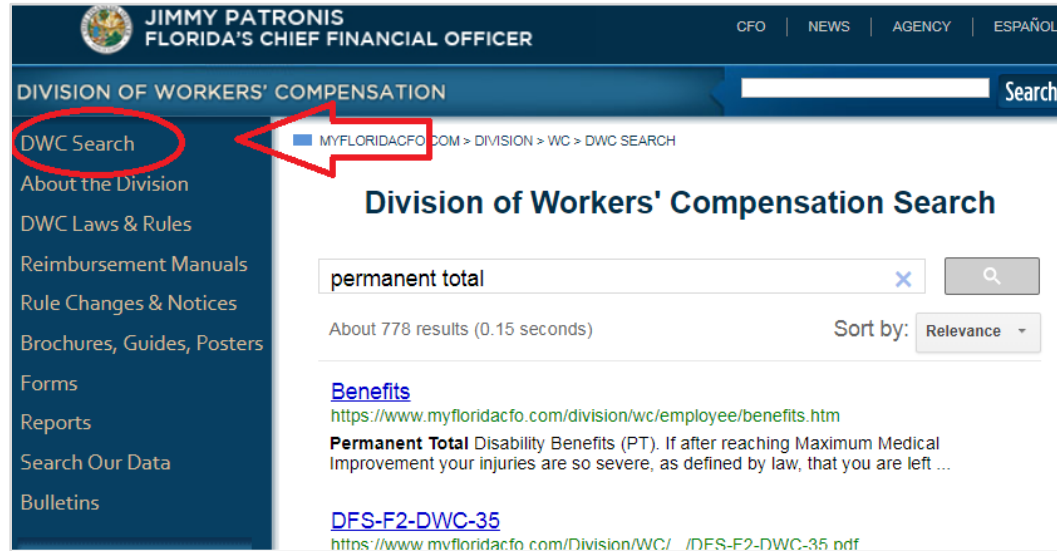
Search Our Content

The Department's Search feature allows you to search across all divisions. Sometimes, though, stakeholders want to filter or limit their searches to content only within the Division of Workers' Compensation.

To assist our stakeholders in using our web content as a primary source of reference, the Division has a feature on its homepage that allows visitors to perform keyword searches against content only within the Division's web pages.

Therefore, if stakeholders are looking for a form, a calculator, or a manual, the person would visit the Division's website, select "DWC Search" in our left panel's navigation choices, and then begin their search.

In these examples, an injured worker may be searching for benefit information, or, an employer may be seeking a copy of the form to send to its insurer.

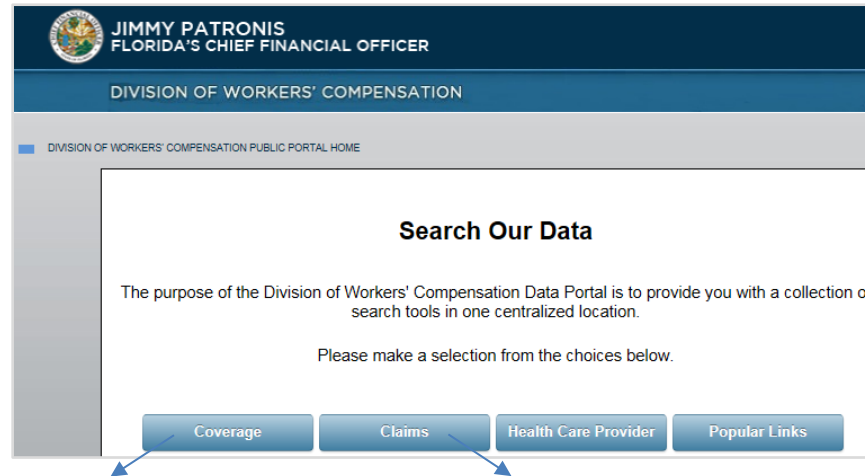


Search Our Data

The Division renewed its focus on the data entrusted to the Division, and how to make approved sets of the data available to our stakeholders online.

One outcome was the creation of a new online portal entitled "Search Our Data".

The purpose of the new portal is to provide stakeholders with a collection of search tools in one centralized location. Visitors to the website can search for coverage and claims data, access the health care provider portals, and view a set of popular links to related information.



Coverage

This section of the Division of Workers' Compensation Portal provides you will the ability to look up Proof of Coverage information, submit referrals for non-compliance, and to interact with Construction Policy Tracking database.

Please make a selection from the choices below.

[Can My Personal Information Be Protected?](#)

Proof of Coverage Database (Compliance)

WC Policy Search Page

Non-Compliance Referral Database

Construction Policy Tracking Database

Insurers Licensed to do business in the State of Florida

Compliance Stop-Work Order Database

For questions regarding the claims data extracts, contact the Bureau of Data Quality & Collection at dwcpublicrecordsrequest@myfloridacfo.com

Claims

During the 2017 Legislative Session, [HB 1107](#), a bill relating to public records, created [440.1851, Florida Statutes \(F.S.\)](#). This statute provides an exemption from public records requirements for personal identifying information filed with the Department of Financial Services and other agencies pursuant to the Workers' Compensation Law; specifying persons to whom and circumstances in which such confidential information may be disclosed. The statute becomes effective on July 1, 2017.

Consequently, the Workers' Compensation Claims Database is discontinued effective July 1, 2017. If you are an authorized individual, to whom and in circumstances in which such confidential information may be disclosed, please complete the [Records Release Authorization Form](#) to enable the Division to respond to your public records request.

See [Records Release FAQs](#) for further assistance.

Please make a selection from the choices below.

[Can My Personal Information Be Protected?](#)

Insurer/Claim Administrator Search

Statistical Report Based on Claims Data

Accident Characteristics by Occurrence

DWC Claims EDI Data Warehouse

Employer Loss Run Data

Coverage Assistance Program (CAP)

This online tool allows employers to enter their primary class code or business description to find insurance companies that are currently providing workers' compensation coverage. The results do not guarantee an insurance company will provide coverage to your business since each insurance company has its own underwriting criteria. For additional assistance identifying a governing class code, contact NCCI at 1-800-622-4123.

In this example to the right, an owner of a roofing business is looking for an insurer who would be writing coverage for this type of business.

After confirming the selection, CAP presents to the owner the list of insurers providing policies for this type of business.

The screenshot shows the CAP website interface. At the top, it features the logo of Jimmy Patronis, Florida's Chief Financial Officer, and the text 'Workers' Compensation'. A large blue circle with the number '1' is overlaid on the page. Below the header, the title 'Coverage Assistance Program' is displayed. The main content area is titled 'Search For Coverage' and contains a search form. The form has a text input field with 'Roofing' entered. Below the input field, two class codes are listed: '04283 BUILDING OR ROOFING PAPER' and '05551 ROOFING'. There are 'Reset' and 'Search' buttons below the list. A disclaimer is visible at the bottom of the search area.

Search For Coverage

This on-line tool allows employers to enter their primary class code or business description to find insurance companies that are currently providing workers' compensation coverage. The results do not guarantee an insurance company will provide coverage to your business since each insurance company has its own underwriting criteria. For additional assistance identifying a governing class code, contact NCCI at 1-800-622-4123.

Search By Governing Class Code or Description

Roofing

04283 BUILDING OR ROOFING PAPER
05551 ROOFING

Reset Search

Disclaimer: The Department of Financial Services shall be held harmless against all claims, suits, judgments and/or damages resulting from this disclosure of information, including all costs and fees. The information contained herein is a representative reflection of selected information maintained by the Department of Financial Services, Division of Workers' Compensation.

The second screenshot shows the same search form, but with a large blue circle with the number '2' overlaid. The text input field now contains '05551 ROOFING'. Below the input field, the 'Governing Class Code/Description Selection' section shows '05551 ROOFING' selected. The 'Reset' and 'Search' buttons are still present. The disclaimer is also visible at the bottom.

Search By Governing Class Code or Description

05551 ROOFING

Governing Class Code/Description Selection

05551 ROOFING

Reset Search

Disclaimer: The Department of Financial Services shall be held harmless against all claims, suits, judgments and/or damages resulting from this disclosure of information, including all costs and fees. The information contained herein is a representative reflection of selected information maintained by the Department of Financial Services, Division of Workers' Compensation.

Benefit Calculators

In an effort to help stakeholders evaluate their benefit information, the Division provides a set of online benefit calculators on its web site.

The information and interactive calculators are made available to everyone as self-help tools for each person's independent use.

The Division cannot and does not guarantee their applicability or accuracy regarding each person's individual circumstances.

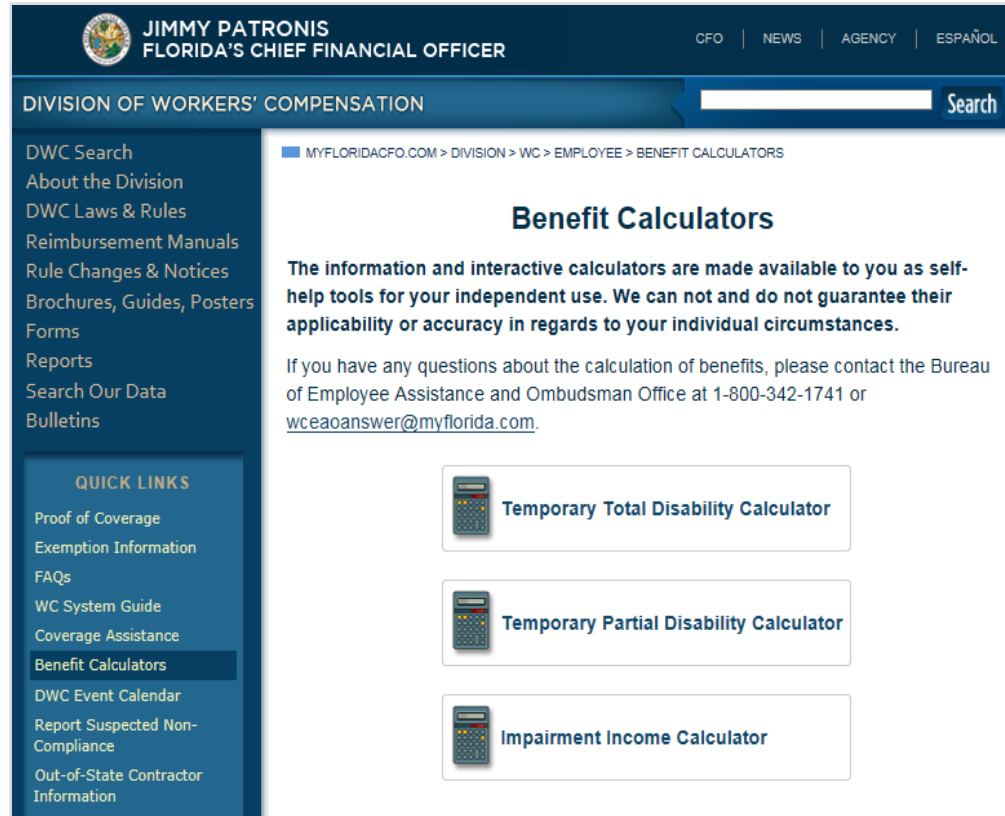
The Division offers three types of benefit calculators:

- [Temporary Total Disability](#),
- [Temporary Partial Disability](#), and
- [Impairment Income](#)

If you have any questions about the calculation of benefits, please contact the Bureau of Employee Assistance & Ombudsman Office at:

1-800-342-1741 or
WCEAOAnswer@myflorida.com.

For assistance in estimating Permanent Total (PT) benefits, please contact the Bureau of Monitoring and Audit at (850) 413-1608.

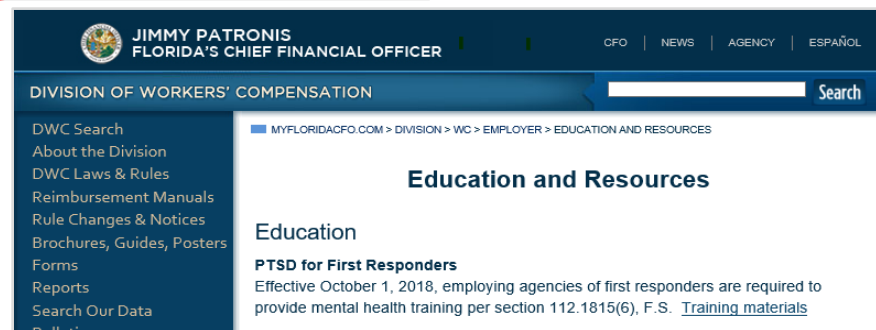
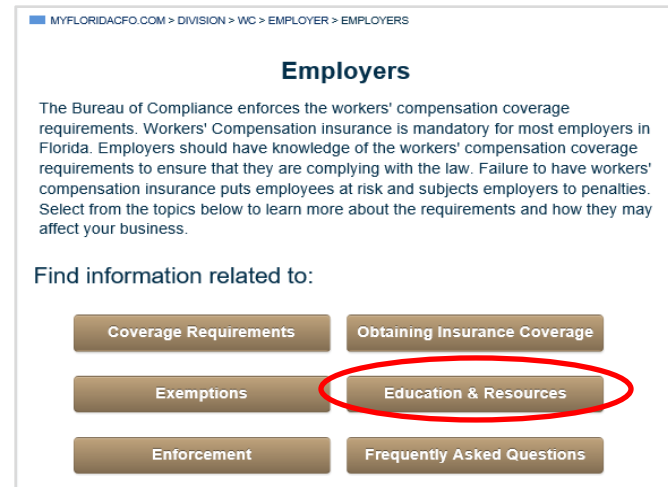


PTSD | Educational Training Material

Senate Bill 376 extends workers' compensation indemnity benefits to eligible first responders with work-related PTSD. SB 376 outlines the specific qualifying events, exposures, and diagnosis needed for a compensable workers' compensation claim. The new law went into effect October 1, 2018.

An additional provision of the bill is a requirement for employing agencies of first responders to provide educational training related to mental health awareness, prevention, mitigation, and treatment. The Division is providing a framework for employing agencies to build upon to comply with the educational requirement in the new law. The framework consists of four documents designed to assist employing agencies in their mission to comply with the requirements of Section 112.1815(6), F.S. It is not a standard or a requirement to use this material. Employing agencies will determine how to scale up or down based on their individual capabilities, needs, and resources.

PTSD Educational Training Materials



DWC Educational Videos

The Division is excited to announce the publication of its initial set of on-demand Educational Videos. The purpose of presenting this expanding collection of short videos is to help educate our stakeholders on an assortment of topics.

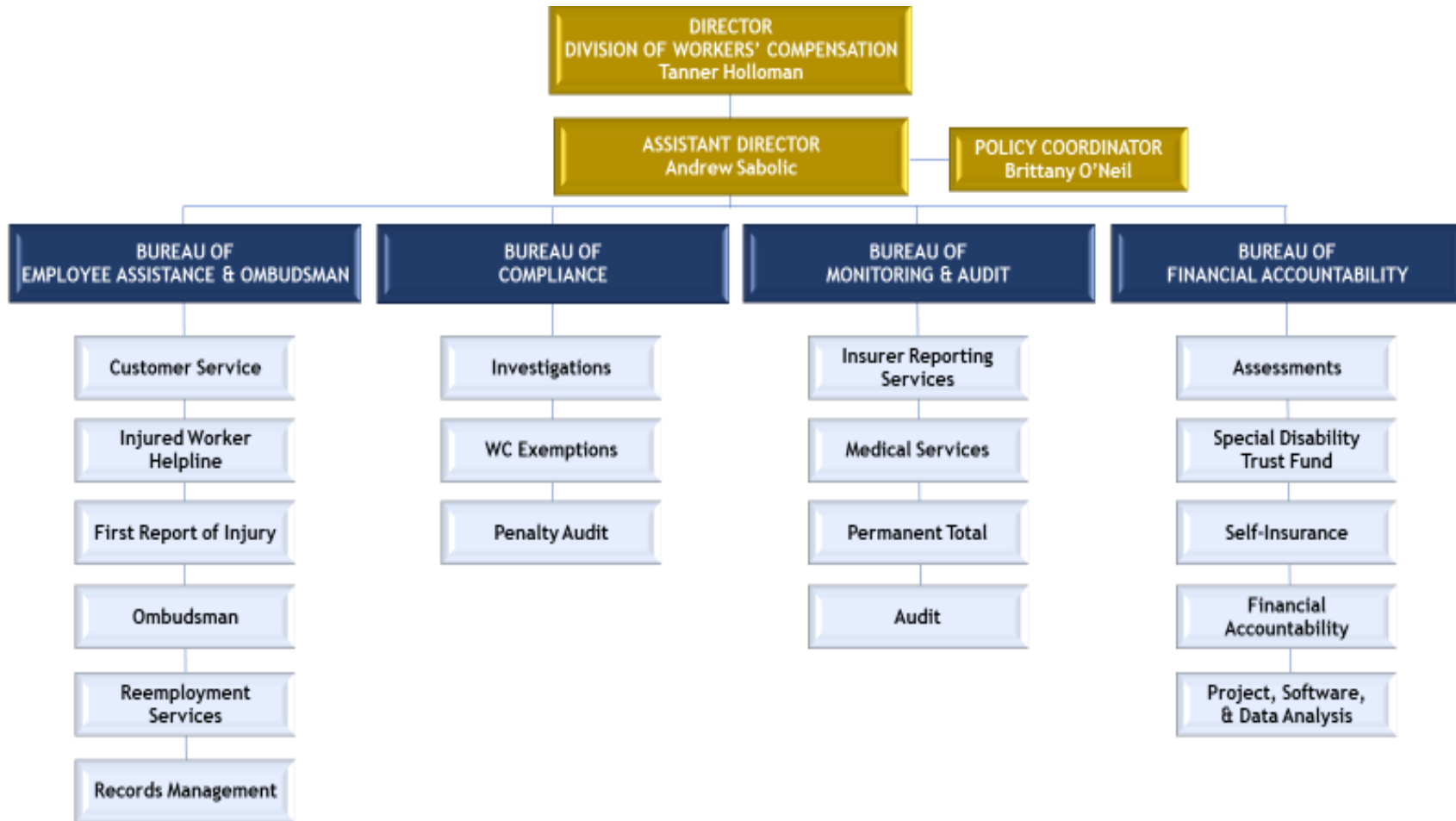
- [Informational Brochures & System Guides](#)
- [Average Weekly Wage Calculation](#)

As our library grows, the Division will continue to publish additional videos to the website.

The screenshot shows the website header with the logo of Jimmy Patronis, Florida's Chief Financial Officer, and navigation links for CFO, NEWS, AGENCY, and ESPAÑOL. Below the header is the 'DIVISION OF WORKERS' COMPENSATION' section with a search bar. A left-hand navigation menu lists various resources, with 'Educational Videos' highlighted in red. The main content area is titled 'Educational Videos' and includes an introductory paragraph and instructions to click on video icons. Two video thumbnails are displayed, each with a play button icon and a 'Download Presentation (pdf)' link below it.

About the Division

DWC Organizational Chart



Bureaus & Roles

Bureau of Employee Assistance & Ombudsman Office | Lisel Laslie, Bureau Chief

EAO, established pursuant to Section 440.191, F.S., assists injured workers, employers, carriers, and the health care providers in fulfilling their responsibilities under the workers' compensation law.

EAO's key roles include:

- Investigates disputes and facilitates resolutions without undue expense, costly litigation, or delay in the provision of benefits.
- Assists system participants in fulfilling their statutory responsibilities.
- Educates and disseminates information to all system participants.
- Initiates contacts with injured workers to discuss their rights and responsibilities and advise them of services available through EAO.
- Reviews claims in which injured workers' benefits have been denied, stopped, or suspended.
- Provides reemployment services to eligible injured workers who are unable to return to work as a result of their work-related injuries or illnesses.
- Provides for collection, distribution, and archival of the Division's imaged records.
- Provides public record information and responds to requests for Division data.

Florida Statutory References

- Section [119.07](#), Public Records Release
- Section [440.19](#), Regulates the procedure and time for filing claims and all aspects of the claim resolution process
- Section [440.191](#), Creates the EAO to inform and assist injured workers, employers, carriers, and health care providers in fulfilling their responsibilities under the workers' compensation law
- Section [440.192](#), Procedure for resolving benefit disputes
- Section [440.491](#), Regulates the provision of Reemployment Services to injured workers

Bureau of Compliance | Pam Macon, Bureau Chief

BOC investigates employers to determine civil compliance with Chapter 440, F.S.

BOC's key roles include:

- Issue stop-work orders and assess penalties to employers for violating Florida's coverage and compliance requirements.
- Process exemption applications, maintain an exemption database of application information, and make it available to the public.
- Educate employers on Florida's coverage and compliance requirements.

Florida Statutory References

- Coverage Procedures: subsections [440.04](#), [440.05](#), [440.055](#), [440.06](#), [440.075](#), [440.077](#), [440.09](#), [440.091](#), [440.092](#)
- Enforcement Procedures: subsections [440.103](#), [440.104](#), [440.105](#), [440.107](#), [440.40](#)
- Section [440.03](#), Stipulates that every employer and employee as defined in [440.02](#) is bound by the statutes
- Section [440.10](#), Requires subject employers to insure their liability
- Section [440.185](#), Requires insurers to file proof of coverage and related documents with the Division

Bureau of Monitoring & Audit | Charlene Miller, Bureau Chief

M&A reviews claims handling practices to ensure the timely and accurate payment of benefits to injured workers, timely filing and payment of medical bills, and timely and accurate filing of required claims forms and other electronic data. M&A is responsible for ensuring the practices of insurers and claims-handling entities meet the requirements of Chapter 440, F.S., and the Florida Administrative Code.

Pursuant to Rule 69L-7.710, F.A.C., all required medical billing (hospital, health care provider, ambulatory surgical center, dental, and pharmacy) forms must be submitted to the Division in accordance with the date-appropriate Florida Medical EDI Implementation Guide (MEIG).

Claims EDI data is collected pursuant to Chapter 69L-56, F.A.C., and is used to populate the Division's accident databases. M&A's mission is to efficiently and effectively collect and store data in order to provide accurate, meaningful, timely, and readily accessible information to all stakeholders within the workers' compensation system.

The Audit Section examines claims-handling practices pursuant to Sections 440.20, 440.185, and 440.525, F.S., and other rules of the Florida Administrative Code.

M&A's key roles include:

- Establishes and implements the rules, requirements, and processes for electronic reporting of the First Report of Injury, Subsequent Report of Injury, and Proof of Coverage forms, using national EDI standardized file formats.
- Monitors accuracy and timeliness of benefit payments; initiating intervention efforts when appropriate.
- Establishes permanent total cases eligible for Division-paid supplemental benefits.
- Assesses penalties for late reporting, benefit payments, or medical payments.
- Provides technical assistance to customers through telephone contacts, training, and audit workshops.

Florida Statutory References

- Section [440.13](#), Medical services and supplies; penalties for violations; limitations
- Section [440.15](#), Compensation for disability
- Section [440.185](#), Notice of injury or death; reports; penalties for violations
- Section [440.20](#), Time for payment of compensation; penalties for late payment
- Section [440.525](#), Examination of Carriers
- Section [440.593](#), Electronic Reporting

Bureau of Financial Accountability | Greg Jenkins, Bureau Chief

BFA's key roles include:

- Calculates Assessment Rates (WCATF & SDTF)
- Collects Assessments
- Collects employers' compliance payments and exemption fees
- Regulates individually self-insured employers
- Manages the Workers' Compensation Trust Fund and the Special Disability Trust Fund
- Manages the Division's contracts and directs new application development

Florida Statutory References

- Section [119.07](#), Public Records Release
- Section [215.86](#), Management Systems and Controls
- Section [440.107](#), Enforcement Provisions
- Section [440.38](#), Security for compensation: insurance carriers and self-insurers
- Section [440.49](#), Establishes the Special Disability Trust Fund
- Section [440.49](#), Administration of Trust Fund and Advisory Committee
- Section [440.49](#), Outlines the limitation of liability, definitions, legislative intent, and reimbursement provisions of the Special Disability Trust Fund
- Section [440.49](#), Claims and Reimbursement
- Section [440.49](#), Assessments (Special Disability Trust Fund)
- Section [440.50](#), Florida Workers' Compensation Administration Trust Fund
- Section [440.51](#), Expenses of Administration
- Section [440.52](#), Registration of insurance carriers; notice of cancellation or expiration of policy; suspension or revocation of authority

Contact Us

Mail & Email Contacts

Division Address: Division of Workers' Compensation, 200 East Gaines Street, Tallahassee, FL 32399-4220

Email: Workers.CompService@myfloridacfo.com

Public Records Requests: [DFS Public Records](#)

Telephone Contacts

Customer Service Center: (850) 413-1601

Employee Assistance Office: (800) 342-1741

Workers' Compensation Claims: (800) 342-1741

Workers' Compensation Exemption/Compliance: (800) 742-2214

Websites

Contact information for the Bureau of Compliance and the Bureau of Employee Assistance & Ombudsman District Offices may be found on the Division's website at: http://www.myfloridacfo.com/Division/WC/dist_offices.htm.

The Division of Workers' Compensation website homepage is located at: <http://myfloridacfo.com/division/wc> and provides direct information access for all stakeholders in the Workers' Compensation System. The website organizes items of interest by stakeholder group with tabs for Employer, Insurer, Employee, and Provider.

Workers' Compensation System Guide:
<http://www.myfloridacfo.com/Division/WC/pdf/WC-System-Guide.pdf>

