

BWC's Provider Billing and Reimbursement Manual

Title	Description
Policy Name:	Substantial Aggravation of a Pre-Existing Condition
Policy Number:	BRM-2017-10
Code/Rule Reference:	OAC 4123-3-15
Effective Date:	10/1/2017
Supersedes:	All medical policies, directives, and memos regarding substantial aggravation of a pre-existing condition guidelines that predate the effective date of this policy.
History:	Rev. 10/1/2017, Republished 4/1/2024
Review date:	10/1/2026

I. POLICY PURPOSE

Periodically, either the treatment of or nature of an injured worker's disability may require you to recommend additional conditions. For example, a claim may be allowed for a lumbar sprain/strain, but additional diagnosis and treatment reveals that a herniated disc is the underlying cause of the injured worker's disability. By law, this condition must be added to the claim to pay compensation to the injured worker and reimburse providers for their services.

The purpose of this policy is to clarify and further define the potential for claim allowances resulting from substantial aggravation of pre-existing conditions. BWC will identify dates when the consideration for an allowance changed as it relates to substantial aggravation of pre-existing conditions. Additionally, this policy will define when treatment is no longer reimbursable for a substantial aggravation of a pre-existing condition. This policy complements the *Additional Allowance* policy found in the Billing and Reimbursement Manual.

II. APPLICABILITY

This policy applies to all actions related to the recommendation of additional allowances for substantial aggravation of pre-existing conditions by providers within the Ohio workers' compensation system.

III. DEFINITIONS

Not applicable.

IV. POLICY

A. The substantial aggravation of a pre-existing condition (Date of injury Claims on Or After August 25, 2006) -

1. A claim with a date of injury on or after 8/25/06 may be allowed for substantial aggravation of a pre-existing condition.
2. A substantial aggravation of a pre-existing condition must be considerable in amount, value, or the like and firmly established and solidly based through presentation of objective diagnostic findings, objective clinical findings, or objective test results.

B. Complaint –

1. Subjective complaints may be evidence of a substantial aggravation, but they are insufficient to support allowance of a substantial aggravation without objective diagnostic findings, objective clinical findings, or objective test results.
2. Subjective complaints must be accompanied by supporting objective diagnostic findings, objective clinical findings, or objective test results.
3. A substantially aggravated condition must be present prior to, or pre-exist, the injury, and the substantial aggravation of the condition must be proximately caused by the injury.

C. Substantially Aggravated Pre-Existing Condition Returns to Pre-Injury State -

1. Once the substantially aggravated pre-existing condition has returned to a level that would have existed without the injury, no compensation or benefits are payable for the condition.
2. Therefore, a claim will always be **allowed** for aggravation of a pre-existing condition once the condition has become a claim allowance; however, compensation and benefits are not be payable once this condition is returned to the pre-injury state.

D. Independent Medical Exam - When a request to allow a claim for substantial aggravation of a pre-existing condition is filed, an independent medical exam **may** be necessary to assist BWC in making an appropriate determination; however, an exam is not required, especially when the evidence mandated by law supports the request. BWC Claims Service Specialists should staff the claim with the nurse and/or other members of their team to determine if an exam or file review is appropriate.

E. Types Of Medical Evidence/Documentation -The following types of medical evidence/documentation may be submitted and/or gathered for decisions involving a substantially aggravated pre-existing condition(s):

1. Lab reports, X-rays, MRI, CT reports, or any other diagnostic tests that may document the current status of the substantially aggravated pre-existing condition;
 2. Lab reports, X-rays, MRI, CT reports other diagnostic tests pertaining to the condition prior to the injury;
 3. Documentation of current medication including dosage and frequency for substantially aggravated pre-existing condition (i.e. insulin or pain medication);
 4. Documentation of medication, including dosage and frequency for substantially aggravated pre-existing condition that the injured worker was receiving prior to the date of injury;
 5. Any objective physician examination findings of substantially aggravated pre-existing condition prior to injury and subsequent to injury;
 6. Physical Therapist and Occupational Therapist records prior to and subsequent to the injury;
 7. Emergency Room reports; and/or
 8. Accident reports.
- F. Request For Medical Treatment - The MCO must consider requests for medical treatment when a final BWC or IC decision has determined that the substantially aggravated pre-existing condition has returned to a level that would have existed without the injury and other conditions are allowed in the claim. If the request is denied and an appeal is filed, the issue will go through the Alternative Dispute Resolution process.
- G. Substantially Aggravated Pre-Existing Condition Only Condition Allowed In Claim - If the substantially aggravated pre-existing condition is the only condition allowed in the claim, treatment requests will be dismissed without prejudice once a final BWC or IC decision has determined that the condition has returned to a level that would have existed without the injury.