Ombuds Office

An Independent Service of Ohio's Workers' Compensation System

2024 Annual Report

Ombuds Office
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Message from the Chief Ombudsperson

March 18, 2026

Industrial Commission
Nominating Council

Dear Council Members:

I am pleased to present the Ombuds Office annual report for calendar year 2024 (CY2024). In accordance with Ohio Revised Code section 4121.45, this report provides a statistical summary of the activities for the year. Ombuds Office staff again continued to perform our mission of assisting customers that interact with the workers' compensation system in matters dealing with the Bureau of Workers' Compensation (BWC) and the Ohio Industrial Commission (IC).

2024 was a busy and productive year; of the 5,089 customer contacts handled by our office, we categorized 147 as complaints, based on the customer expressing dissatisfaction with BWC or IC. These complaint contacts came from the following sources:

- Injured workers (or their representatives) 69 percent;
- Employers (or their representatives) 21 percent;
- Other 10 percent.

Of the remaining 4,942 customer contacts, we categorized 2,356 as Ombuds inquiries and 2,586 were categorized as other inquiries. These contacts came from the following sources:

Ombuds inquiries

- Injured workers (or their representatives) 53 percent;
- Employers (or their representatives) 37 percent;
- Other 10 percent.

Other inquiries

- Employers (or their representatives) 67 percent;
- Other 18 percent;
- Injured workers (or their representatives 15 percent.

Customer outreach and education remained a high priority for 2024. We will continue to supply Ombuds brochures to BWC and IC customer service offices and mail a written explanation of the hearing process with the Ombuds brochure to non-represented injured workers and employers. I plan to schedule various seminars to attend and speak at throughout the upcoming year to explain the service provided by the

Ombuds Office. Additionally, I want to thank the Ombuds staff; they reflect the true definition of a public employee by their continued hard work and dedication to the customers trying to navigate the workers' compensation system. The Ombuds Office would also like to thank the employees of the BWC and IC who assist us with resolving issues.

Finally, we have maintained membership with the International Ombudsman Association (IOA) whose mission is to support and advance the ombudsman profession and ensure that practitioners work to the highest professional standards. The IOA provides a set of professional and ethical principles to which members adhere in their ombudsman practice. These principles reflect a commitment to promote ethical conduct in the performance of the ombudsman role and to maintain the integrity of the ombudsman profession – independence, neutrality, impartiality, confidentiality and informality. We also belong to the United States Ombudsman Association whose purpose is to assist existing ombudsmen and ombudsman organizations in improving the operation of ombudsman offices throughout the United States.

Sincerely,



Erica R. Stilson
Chief Ombudsperson

About the Ombuds Office

The Ohio General Assembly established a workers' compensation ombudsperson system, which has been in place since the 1970s (ORC 4121.45). The Ombuds Office is a neutral and independent resource available to employers, injured workers, and their representatives, to assist with problems navigating and questions arising out of the Ohio workers' compensation system. We answer inquiries and investigate complaints about the workers' compensation system, facilitating resolution of issues when possible. We capture, categorize and analyze inquiry and complaint data to identify areas of potential concern in the workers' compensation system. This information is published annually.

§ 4121.45 Ombudsperson system.

A. There is hereby created a workers' compensation ombudsperson system to assist claimants and employers in matters dealing with the bureau of workers' compensation and the industrial commission. The industrial commission nominating council shall appoint a chief ombudsperson. The chief ombudsperson, with the advice and consent of the nominating council, may appoint such assistant ombudspersons as the nominating council deems necessary. The position of chief ombudsperson is for a term of six years. A person appointed to the position of chief ombudsperson shall serve at the pleasure of the nominating council. The chief ombudsperson may not be transferred, demoted, or suspended during the person's tenure and may be removed by the nominating council only upon a vote of not fewer than nine members of the nominating council. The chief ombudsperson shall devote the chief ombudsperson's full time and attention to the duties of the ombudsperson's office. The administrator of workers' compensation shall furnish the chief ombudsperson with the office space, supplies, and clerical assistance that will enable the chief ombudsperson and the ombudsperson system staff to perform their duties effectively. The ombudsperson program shall be funded out of the budget of the bureau and the chief ombudsperson and the ombudsperson system staff shall be carried on the bureau payroll. The chief ombudsperson and the ombudsperson system shall be under the direction of the nominating council. The administrator and all employees of the bureau and the commission shall give the ombudsperson system staff full and prompt cooperation in all matters relating to the duties of the chief ombudsperson.

B. The ombudsperson system staff shall:

1. Answer inquiries or investigate complaints made by employers or claimants under this chapter and Chapter 4123. of the Revised Code as they relate to the processing of a claim for workers' compensation benefits;
2. Provide claimants and employers with information regarding problems which arise out of the functions of the bureau, commission hearing officers, and the commission and the procedures employed in the processing of claims;
3. Answer inquiries or investigate complaints of an employer as they relate to reserves established and premiums charged in connection with the employer's account;
4. Comply with Chapter 102. and sections 2921.42 and 2921.43 of the Revised Code and the nominating council's human resource and ethics policies.
5. Not express any opinions as to the merit of a claim or the correctness of a decision by the various officers or agencies as the decision relates to a claim for benefits or compensation.

For the purpose of carrying out the chief ombudsperson's duties, the chief ombudsperson or the ombudsperson system staff, notwithstanding sections 4123.27 and 4123.88 of the Revised Code, has the right at all reasonable times to examine the contents of a claim file and discuss with parties in interest the contents of the file as long as the ombudsperson does not divulge information that would tend to prejudice the case of either party to a claim or that would tend to compromise a privileged attorney-client or doctor-patient relationship.

C. The chief ombudsperson shall:

1. Assist any service office in its duties whenever it requires assistance or information that can best be obtained from central office personnel or records;
2. Annually assemble reports from each assistant ombudsperson as to their activities for the preceding year together with their recommendations as to changes or improvements in the operations of the workers' compensation system. The chief ombudsperson shall prepare a written report summarizing the activities of the ombudsperson system together with a digest of recommendations. The chief ombudsperson shall transmit the report to the nominating council.
3. Comply with Chapter 102. and sections 2921.42 and 2921.43 of the Revised Code and the nominating council's human resource and ethics policies.

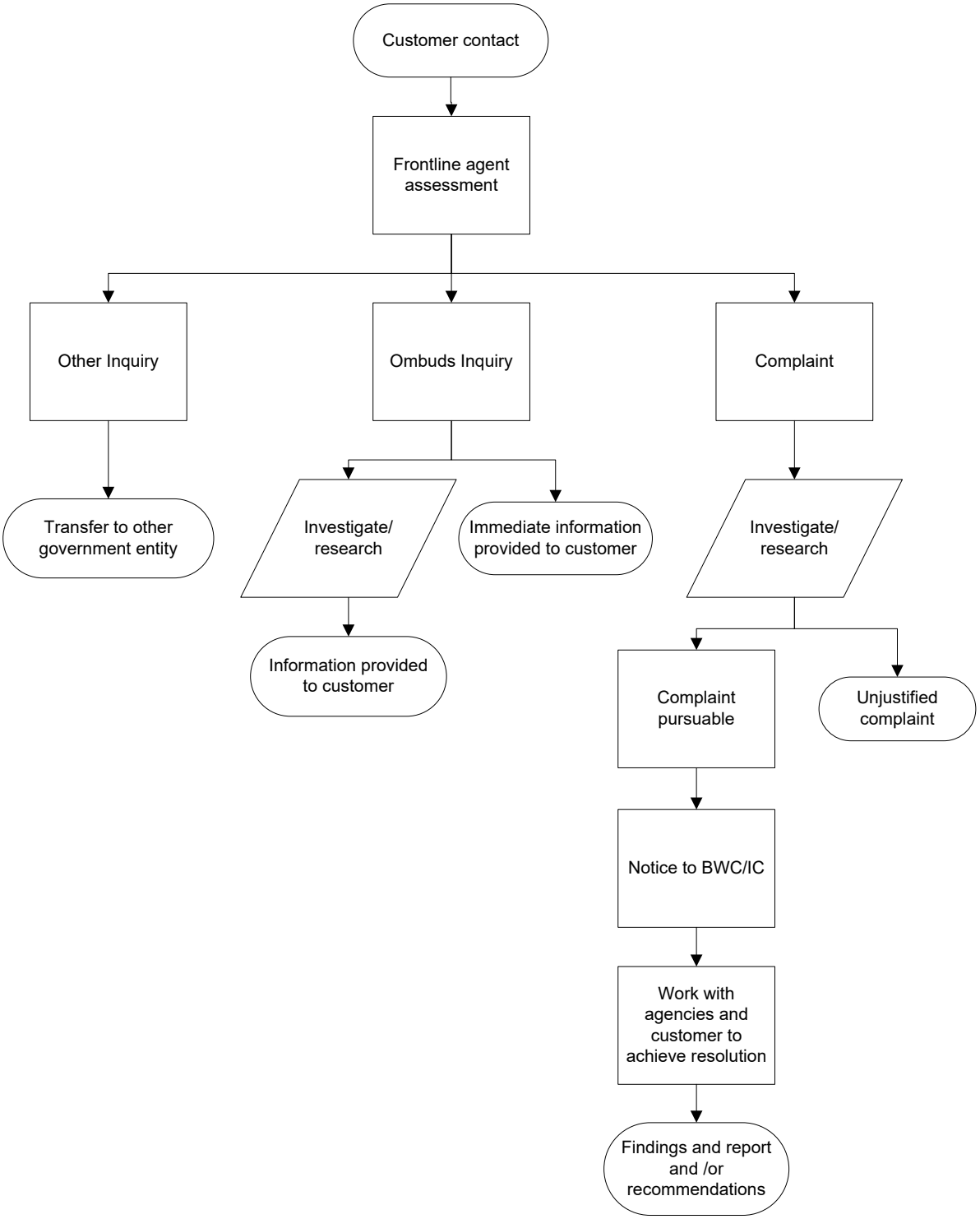
D. No ombudsperson or assistant ombudsperson shall:

1. Represent a claimant or employer in claims pending before or to be filed with the administrator, a district of staff hearing officer, the commission, or the courts of the state, nor shall an ombudsperson or assistant ombudsperson undertake any such representation for a period of one year after the ombudsperson's or assistant ombudsperson's employment terminates or be eligible for employment by the bureau or the commission or as a district or staff hearing officer for one year;
2. Express any opinions as to the merit of a claim or the correctness of a decision by the various officers or agencies as the decision relates to a claim for benefits or compensation.

E. The chief ombudsperson and assistant ombudspersons shall receive compensation at a level established by the nominating council commensurate with the individual's background, education, and experience in workers' compensation or related fields. The chief ombudsperson and assistant ombudspersons are full-time permanent employees in the unclassified service of the state and are entitled to all benefits that accrue to such employees, including, without limitation, sick, vacation, and personal leaves. Assistant ombudspersons serve at the pleasure of the chief ombudsperson.

F. In the event of a vacancy in the position of chief ombudsperson, the nominating council may appoint a person to serve as acting chief ombudsperson until a chief ombudsperson is appointed. The acting chief ombudsperson shall be under the direction and control of the nominating council and may be removed by the nominating council with or without just cause.

Ombuds Office Workflow



Ombuds Office Case Stories

The sampling of case stories below represents the variety of complaints and issues our customers brought to us in 2024.

Case #1

An unrepresented injured worker contacted the Ombuds Office due to difficulties reaching their assigned claims service specialist (CSS) by phone or email. The IW had been approved for surgery, pending the outcome of requested additional allowances submitted six weeks prior, with no action taken. This delay prevented the IW from proceeding with the surgery.

Ombuds reviewed the claim and found that the allowances were supposed to be referred to the IC, but the referral had not been completed. It was discovered that the additional allowance request had been suspended, and the claim was reassigned to a "remain at work" representative. The IW was not receiving compensation from BWC but was on paid salary continuation from their employer while awaiting surgery.

After further discussion with BWC, the claim was reassigned to an appropriate representative, and the additional allowances were approved. The IW subsequently had their surgery, completed post-op physical therapy, and returned to work in full duty capacity.

Case #2

The policyholder contacted the Ombuds Office after receiving a notice of lien from the Attorney General's (AG) office for an unpaid debt with BWC. The policyholder is currently trying to buy a home and needs this issue resolved as soon as possible. He believed all the appropriate documents were provided back in 2021 to cancel this policy.

An Ombuds agent reviewed the policy along with all documents imaged in the system. They noted that the policy was opened in March 2020 and that a request to cancel the elective coverage and the policy was made in June 2021. It appeared that only the elective coverage had been canceled, which led to the balance and the lien.

The Ombuds agent worked with BWC policy processing staff to properly cancel the policy and have the policyholder submit their payroll for the time they were in business. There was still a balance owed on the policy, and the policyholder felt that he should not be responsible for payment because of the hardship caused from COVID-19.

A formal complaint was filed through BWC's Employer Complaint Tracker, and the outcome was in his favor. The elective coverage was canceled for the time the policy was opened, and the amount owed was drastically reduced.

Case #3

Ombuds received a call from a policyholder needing assistance with a debt she was told had been resolved years ago. Upon reviewing the policy, Ombuds saw that the current balance owed to the BWC was zero, but there was a large amount owed to the AG's office. Unable to determine the source of the outstanding balance in the BWC's internal systems, staff reached out to BWC's collections department. A representative in collections contacted the AG's archive department for further assistance. It was then discovered that most of the outstanding debt originated from an audit conducted between 1991 and 1993. In 1995, a settlement offer was made to the policyholder, which was accepted and paid in 1996. This information was sent to the accounts receivable manager at the BWC for review. It was agreed that based on the data from the AG's office, this balance should have been written off due to the settlement.

The Ombuds staff then contacted the customer to inform her that the issue was resolved, and the debt had been removed.

Case #4

An injured worker's attorney contacted Ombuds and requested assistance with getting their client's replacement support dog which was approved through an IC hearing more than four months ago. Prior to the hearing, the attorney and medical provider submitted the fee schedule for the specific vendor they planned to use in advance. The attorney indicated that BWC appeared to be delaying things to try and find another vendor for a cheaper price. Ombuds contacted the managed care organization (MCO) and was told that this issue was currently under review, and they were working with BWC's medical policy department to approve the payment. BWC requires two comparison fee quotes but there were no other certified vendors for training support dogs in Ohio, so they were attempting to contact vendors that were not certified to get cost comparisons. Ombuds then escalated this issue to senior management staff to be expedited due to the amount of time that had passed since the hearing approval. We received confirmation that everything had been approved, and the vendor was now able to begin training the IW's certified support assistance dog.

Case #5

A policyholder contacted Ombuds requesting assistance with removing a claim that does not belong to their policy. According to them, the IW has never worked for them. They had been in contact with BWC the year prior, when this claim was filed, and were told that due to the claim being referred to the IC, they must wait for it to be adjudicated. The actual employer of record for this claim had a similar business name as theirs, and this has happened in the past. After Ombuds investigated the matter, it was discovered that the claim had been suspended by the IC due to unrelated issues. Ombuds worked with the alleged employer of record on how to request that the suspension be removed and what form is needed to have the correct employer assigned. This matter was heard by the IC and referred back to BWC to have the correct employer assigned. Ombuds staff ensured this matter was resolved correctly.

Case #6

Ombuds received a call from a quadriplegic IW because his home health nurses weren't getting paid, causing delays in his services. On the day he contacted the Ombuds Office, he had been without nursing services all day. According to the IW, he was having issues reaching the nurse case manager with the MCO. He was also concerned that he would be left alone all weekend with no home healthcare services.

Ombuds staff reviewed the documents and notes in the system entered by the MCO and BWC. There was an approved Request for Medical Service Reimbursement or Recommendation for Additional Conditions for Industrial Injury or Occupational Disease form (C-9) for a home health aide to work 10 hours in the evenings and a home health LPN to work 8 hours from early mornings to early afternoons. The request was for 7 days a week for 6 months. BWC approved the coverage, but the home health agency did not always have a LPN to cover an 8 hour shift, so the agency would send a RN at a higher rate, which was not approved.

The medical provider was then informed that for any substitution of services due to staffing shortages where the agency was billing at a higher reimbursement rate than the existing fee schedule rate for the approved services, the agency must request it. Then the MCO must submit the request to BWC medical policy for approval prior to any substitution. Ombuds staff was able to work with the MCO and BWC to ensure the IW had services through the weekend. In the meantime, a C-9 was resubmitted requesting RN services when an LPN wasn't available. The request was initially denied by the MCO. The denied request was appealed and went through the alternate dispute resolution (ADR) process but was denied by BWC. The IW appealed BWC's decision, and the IC granted the request for an RN if an LPN is not available.

Case #7

A paraplegic IW contacted the Ombuds Office wanting to file a formal complaint against their nurse case manager (NCM) with the MCO. The IW was initially informed that all supporting documentation had been submitted to allow the request for a custom lightweight manual wheelchair.

The NCM communicated to the IW that a standard manual wheelchair had been approved. According to the IW his provider requested a lightweight wheelchair for his medical needs. When the standard manual wheelchair arrived at his home, he sent it back to the warehouse as it was not what was recommended for him. The IW expressed frustration that the NCM alleged the documents had not been received, even when all parties claimed the appropriate documents were sent. The IW requested a new NCM because the process was disorganized and created one challenge after another in obtaining the necessary equipment for the injuries he suffered from his accident.

Ombuds staff reviewed the documents and notes in the claim file and worked with the NCM's supervisor to resolve this matter in a timely manner. The manager was able to obtain the C9 request for treatment form for his custom lightweight manual wheelchair along with supporting documentation from the provider. The request was approved and delivered. The Ombuds agent followed up with the IW who expressed his satisfaction with his new point of contact at the MCO.

Case #8

A permanently and totally disabled IW contacted Ombuds, very upset and emotional, because he has to attend an exam for his denied acupuncture treatment, which he had been receiving for years. He received a text notification four days before the exam was set to take place but will be unable to attend because of lack of transportation. He admitted that he doesn't check his mail often due to his disabilities and did not see the notification of the exam earlier. According to the IW, the acupuncture helps reduce his use of pain medication, and having to attend this exam caused him a great deal of anxiety.

Ombuds staff reviewed the claim and saw that the scheduled exam was for an ADR exam because the treatment request for his acupuncture had been denied and appealed. The Ombuds agent noted that the IW had been receiving this treatment for years, and almost every time it was requested, it was denied by the MCO but then overturned and approved by the IC. Ombuds staff worked with BWC and the MCO to get the exam rescheduled for a later date, provided the IW with other transportation options, and explained the BWC's travel reimbursement policy.

The IW attended the rescheduled exam, but the findings did not support his need for acupuncture treatment. Due to the results of this report, a hearing took place, and the hearing officer granted the request for treatment.

2024 Statistical Information Summary

We processed 5,089 customer contacts in 2024. Our staff investigates and researches customer contacts to determine whether a case should be opened. The office classifies contacts as either a complaint (147), an Ombuds inquiry (2,356) or as an other inquiry (2,586). We classify a case as a complaint when a customer expresses dissatisfaction with the Ohio workers' compensation system. The most frequent complaints brought to our office for resolution include:

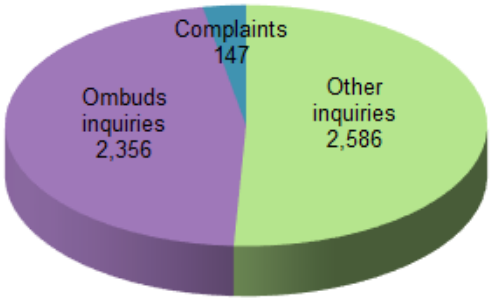
- BWC processing delays;
- Employer concerns related to their policy accounts receivable balance;
- Nonpayment of treatment bills;
- Payment of indemnity benefits to injured workers.

While these are the most frequent complaints brought to our office for resolution, it is worth noting that we receive a high volume of complaints from IWs and their representatives who are experiencing issues finding providers that accept Ohio workers' compensation patients. This includes, but is not limited to, IWs who live out of state, older injury claims, and catastrophic claims where home health care services are needed.

We also receive calls from IWs of self-insured employers, whose records have not been submitted to the BWC and IC when an issue has been referred for adjudication. This typically results in the hearing being continued, causing delays in treatment and compensation requests.

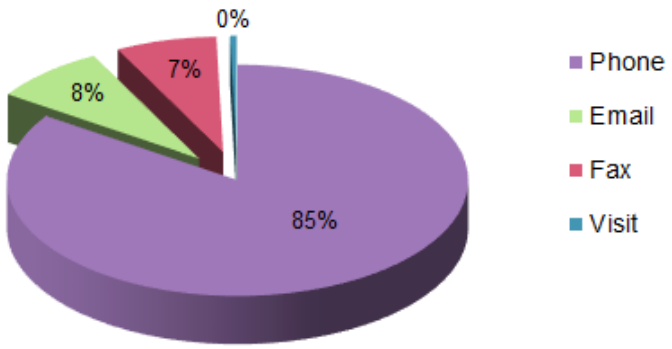
We deem a case to be an Ombuds inquiry when one of our staff directly provides the information requested by the customer and a complaint was not involved. The issues we receive the most inquiries about include employer policy coverage, accounts receivable balance and questions about canceling policy coverage. Additional frequent Ombuds inquiry issues include questions about the claim process and party rights, questions about forms required for various requests, questions about the IC hearing process, and questions about requirements for various types of compensation.

Finally, we receive a number of contacts that we do not open as Ombuds cases because the information requested is more properly obtained elsewhere. We determine quickly if another state agency can more appropriately assist a customer and we provide the proper contact information.



Method of Customer Contact

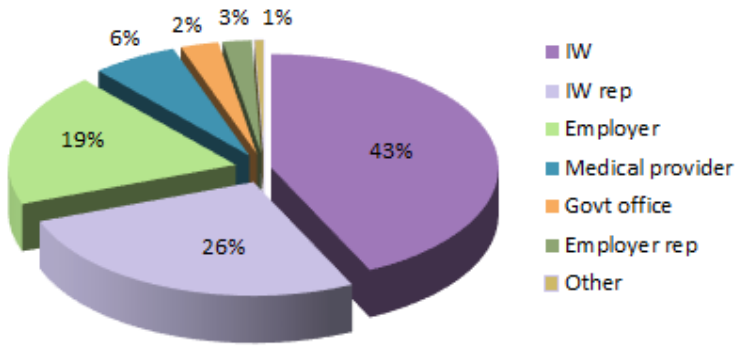
We processed 5,089 customer contacts during 2024, which we received by the methods below.



Contact Method	
Phone	4,295
Email	409
Fax	361
Visit	24
Total	5,089

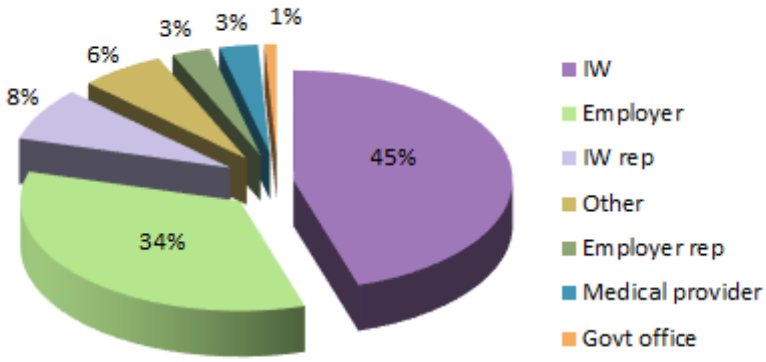
Cases by Customer Type

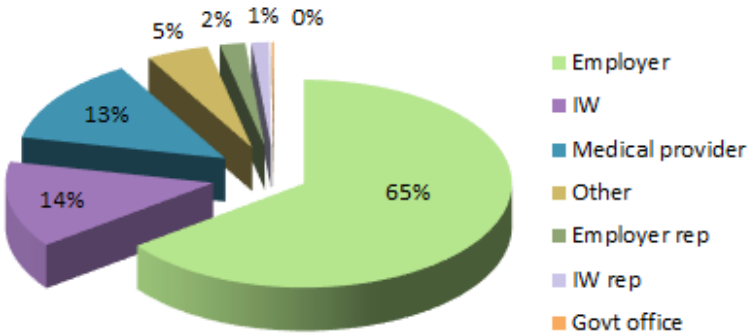
The charts below identify the customer type for each of the types of cases received: complaints, Ombuds inquiries and other inquiries.



Complaints by Customer Type	
Injured worker	63
Injured worker representative	39
Employer	28
Medical provider	9
Government office	4
Employer representative	3
Other	1
Total	147

Ombuds Inquiries by Customer Type	
Injured worker	1,065
Employer	804
Injured worker representative	184
Other	148
Employer representative	67
Medical provider	67
Government office	21
Total	2,356

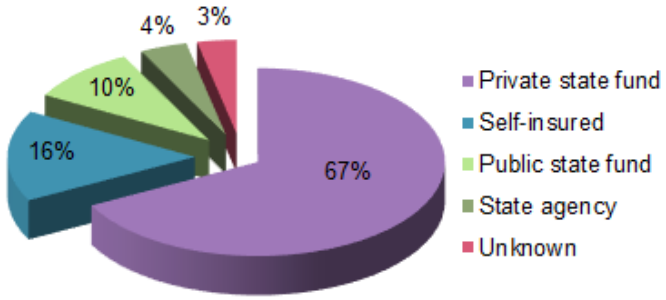




Other Inquiries by Customer Type	
Employer	1,676
Injured worker	347
Medical provider	346
Other	125
Employer representative	51
Injured worker representative	35
Government office	4
Total	2,586

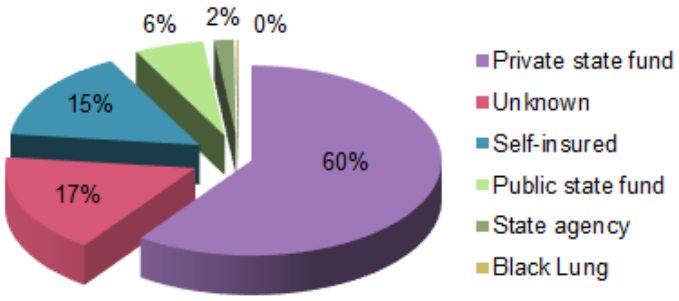
Cases by Type of Employer

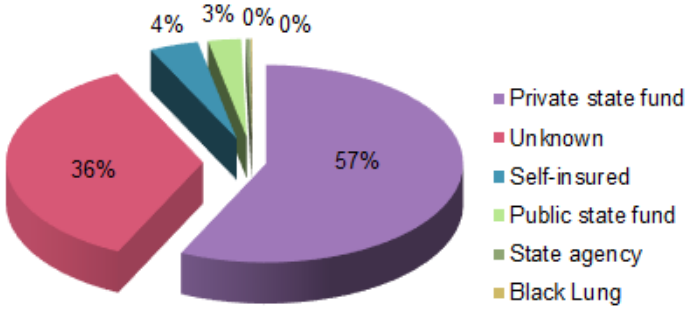
The charts below identify the employer type for each of the types of cases received: complaints, Ombuds inquiries and other inquiries.



Complaints by Employer Type	
Private state fund	99
Self-insured	23
Public state fund	14
State agency	6
Unknown	5
Total	147

Ombuds Inquiries by Employer Type	
Private state fund	1,411
Unknown	399
Self-insured	364
Public state fund	139
State agency	39
Black Lung	4
Total	2,356

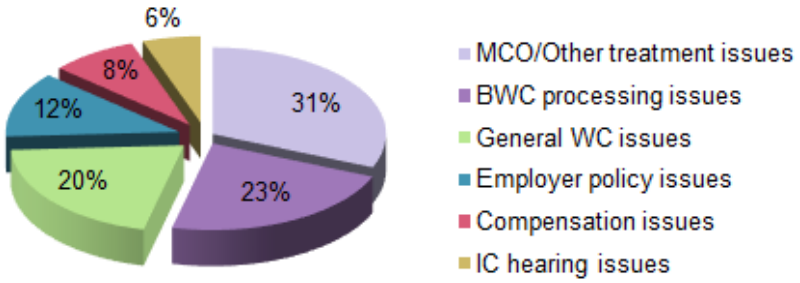




Other Inquiries by Employer Type	
Private state fund	1,476
Unknown	924
Self-insured	104
Public state fund	70
State agency	9
Black Lung	3
Total	2,586

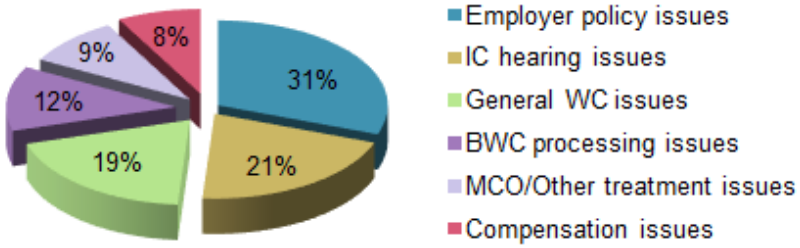
Cases by Issue Type

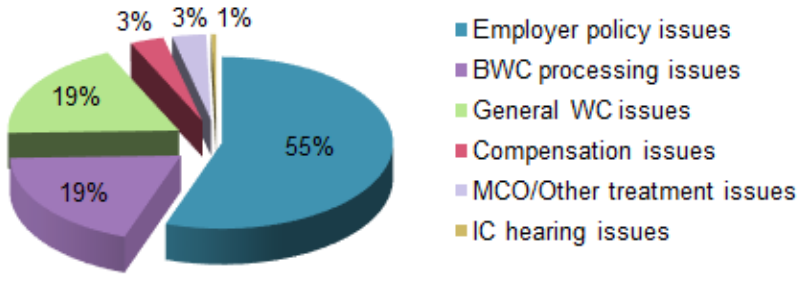
The charts below identify the issue type for each of the types of cases received: complaints, Ombuds inquiries and other inquiries.



Complaints by Issue Type	
MCO/Other treatment issues	46
BWC processing issues	33
General WC issues	30
Employer policy issues	18
Compensation issues	12
IC hearing issues	8
Total	147

Ombuds Inquiries by Issue Type	
Employer policy issues	720
IC hearing issues	485
General WC issues	455
BWC processing issues	291
MCO/Other treatment issues	217
Compensation issues	188
Total	2,356





Other Inquiries by Issue Type	
Employer policy issues	1,431
BWC processing issues	497
General WC issues	480
Compensation issues	83
MCO/Other treatment issues	83
IC hearing issues	12
Total	2,586

Issue Report - Complaints

The codes below describe what issue our staff determined best described the complaint.

Compensation Issues	
Temporary total disability	8
Travel reimbursement	2
Wage loss	1
Permanent partial disability	1
Total	12

Employer Policy Issues	
Employer true-up	3
Audit	2
Cancel/Sold company	2
Employer program	2
Accounts receivable balance	1
Coverage	1
Elective coverage	1
Employer invoice	1
ESS/AE2	1
Estimated annual premium	1
Installment payment	1
Lien	1
Wrong policy number	1
Total	18

IC Hearing Issues	
Hearing decision	4
Hearing process/Hearing letter	3
IC exam	1
Total	8

BWC Processing Issues	
Claim process	11
Processing delay	9
CSS/MCS	6
Independent medical exam	6
BWC E account	1
Total	33

MCO & Other Treatment Issues	
Bills nonpayment	23
Authorization of medical treatment	11
Medical provider	3
MCO staff	3
ADR	2
Vocational rehabilitation	2
Self-insured medical bill	1
BWC form	1
Total	46

General Workers' Compensation Issues	
OHID	11
Self-insured complaint	9
Additional allowance	3
Claim allowance	3
Nonspecific	2
Fraud allegation	1
Medicare	1
Total	30

Causation and Accountability Reports - Complaints

These charts denote in further detail what we found to be the problem after investigating the complaint and identifying the responsible entity. Comparison data from prior years are included.

Causation	2022	2023	2024
Unjustified complaint	95	77	84
Unresponsiveness CSS/MCS	20	8	13
Billing issue	8	6	12
MCO	12	3	9
CSS/MCS	13	5	7
Medical exam/Review required	4	8	3
Medical provider	14	3	3
Employer	11	2	3
Needs forms or information	4	0	3
Policy services	2	0	3
Attorney/Representative	16	2	2
Claim status	1	6	1
IC	4	1	1
Website	1	1	1
Warrant returned or reissued	4	0	1
Prescription issue	0	0	1
Appeal	1	2	0
Injured worker	25	1	0
Wrong diagnosis code	1	0	0
Total	232	125	147

Accountability	2022	2023	2024
Injured worker	101	64	53
BWC	41	23	25
Employer - State fund	14	9	21
MCO	19	8	20
Medical provider	22	9	13
Attorney/Representative	14	5	9
Employer - Self-insured	18	6	5
Pharmacy Benefits Manager	0	0	1
IC	2	1	0
Financial institution	1	0	0
Total	232	125	147

Year-to-year comparison - Complaints

The tables below provide a comparison of complaint data for years 2022, 2023, and 2024.

Complaints by Customer Type	2022	2023	2024
Injured worker	126	61	63
Injured worker representative	51	28	39
Employer	16	9	28
Medical provider	15	11	9
Government office	18	14	4
Employer representative	6	1	3
Other	0	1	1
Total	232	125	147

Complaints by Employer Type	2022	2023	2024
Private state fund	145	87	99
Self-insured	56	13	23
Public state fund	23	15	14
State agency	4	3	6
Unknown	4	7	5
Total	232	125	147

Complaints by Issue Type	2022	2023	2024
MCO/Other treatment issues	52	36	46
BWC processing issues	73	49	33
General WC issues	33	12	30
Employer policy issues	17	9	18
Compensation issues	42	14	12
IC hearing issues	15	5	8
Total	232	125	147

Issue Report - Ombuds Inquiries

Ombuds staff directly provides information to the customer and there was not a complaint.

Employer Policy Issues	
Certificate	110
Accounts receivable balance	100
Coverage	89
Cancel/Sold company	83
Employer true-up	80
Payment issue	80
Employer invoice	58
Installment payment	27
Rebate/Refund	16
Lien	16
Collections	9
Other state coverage	8
Employer program	8
Audit	7
Change of address	4
Safety & Hygiene	3
Rate	3
Policy combined/Transferred/Cancelled	3
Estimated annual premium	3
ESS/AE2	2
Manual code classification	2
Elective coverage	2
Prospective billing	2
Reinstatement	2
Wrong policy number	2
MCO	1
Total	720

Compensation Issues	
Temporary total disability	70
Lump sum settlement	34
Permanent partial disability	17
Death benefits	10
Banking issue	9
Income verification letter	9
Wage loss	8
AWW/FWW amount	8
Travel reimbursement	8
Permanent total disability/DWRF	6
AWW/FWW delay	4
Scheduled loss	2
Lump sum advancement	2
Salary continuation	1
Total	188

IC Hearing Issues	
Hearing process/Hearing letter	363
Hearing decision	68
IC form	33
Hearing officer	8
Hearing delay	8
Interpreter services	4
IC exam	1
Total	485

Issue Report - Ombuds Inquiries - continued

MCO & Other Treatment Issues	
Bills nonpayment	59
Authorization of medical treatment	53
Find physician	21
Medical provider	20
Self-insured medical bill	20
MCO form	12
Prescription - general	6
Prescription - prior authorization	6
ADR	5
MCO staff	5
Vocational rehabilitation	3
Prescription - opioids	2
Reactivation	2
Prescription - general vs. brand	1
Provider enrollment	1
Provider policy and fee schedule	1
Total	217

BWC Processing Issues	
Claim process	120
BWC form	64
CSS/MCS	46
Processing delay	20
BWC E account	16
Independent medical exam	16
Website	6
Status of form/Application	2
IC Hearing referral	1
Total	291

General Workers' Compensation Issues	
Nonspecific	147
OHID	93
Claim allowance	55
Attorney/Representative	44
Medicare	32
Self-insured complaint	31
Additional allowance	20
Employer form	9
Department of Taxation	6
Fraud allegation	6
Statute of limitations	4
Fee dispute	4
Employer delay of claim	2
ADA	1
Light duty	1
Total	455

Issue Report - Other Inquiries

Ombuds staff determines that the information being requested is more properly obtained elsewhere.

Employer Policy Issues	
Payment issue	373
Coverage	227
Accounts receivable balance	209
Employer true-up	194
Cancel/Sold company	146
Certificate	98
Employer invoice	26
Other state coverage	24
Rebate/Refund	20
Change of address	17
Lien	17
Employer program	14
Manual code classification	12
Rate	10
Collections	9
Safety & Hygiene	9
Installment payment	7
Estimated annual premium	4
Policy combined/Transferred/Cancelled	4
Reinstatement	3
Elective coverage	2
Prospective billing	2
Amended payroll	1
Audit	1
ESS/AE2	1
Wrong policy number	1
Total	1,431

Compensation Issues	
Banking issue	28
Death benefits	13
Temporary total disability	10
Permanent total disability/DWRF	9
Income verification letter	9
Lump sum settlement	6
AWW/FWW amount	4
Permanent partial disability	1
Travel reimbursement	1
Lump sum advancement	1
Wage loss	1
Total	83

IC Hearing Issues	
Hearing process/Hearing letter	7
IC form	5
Total	12

Issue Report - Other Inquiries - continued

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MCO & Other Treatment Issues	
Bills nonpayment	22
Medical provider	18
Prescription - general	9
Provider enrollment	8
Authorization of medical treatment	8
Prescription - prior authorization	5
MCO form	4
MCO staff	3
Self-insured medical bill	2
Find physician	2
Provider policy and fee schedule	1
Vocational rehabilitation	1
Total	83

BWC Processing Issues	
Claim process	330
BWC E account	66
CSS/MCS	57
BWC form	40
Website	1
Status of form/Application	1
Independent medical exam	1
Processing delay	1
Total	497

General Workers' Compensation Issues	
OHID	262
Nonspecific	143
Self-insured complaint	18
Attorney/Representative	14
Employer form	11
Claim allowance	10
Claim process	8
Medicare	7
Fraud allegation	4
Department of Taxation	2
Additional allowance	1
Total	480

2024 Administrative Update

Budget

Expenditures to operate the Ombuds Office in CY2024 totaled $686,610. This total includes payroll costs for staff of $672,986 and operating expenses of $13,624. Total expenditures for CY2024 decreased 8 percent as compared to CY2023. A spreadsheet providing budget details is on page 27 of this annual report.

Total payroll costs for 2024 vs. 2023 decreased 8 percent. Payroll costs include employee salary and employer paid benefits, including health insurance and retirement. Additionally, this portion of the budget includes a mass allocation (cost divided between BWC departments) for William Green Building security guards (personal service). There is some fluctuation in the payroll cost over CY2024 based on the 26 pay period cycle resulting in two months with three pay periods, and individual employees' selections related to their benefits.

In CY2024, staff included the chief ombudsperson, two exempt employees and five bargaining unit employees.

Non-payroll operating costs for the Ombuds Office for 2024 were $13,624. This total is a decrease of 22 percent from $17,526 in 2023. The two largest operating expenses for us are building maintenance and printing (building maintenance is a mass allocation calculated based on the square footage of each department). Also included in this section of the budget, is the cost for office supplies, telephone and travel.

Database

In December 2024 we concluded our sixteenth year of the ePowerCenter tracking software. Benefits of this industry standard software include:

- Improved tracking of individual complaints and inquiries;
- Improved consistency of information provided to Ombuds Office customers;
- Quicker recall history of prior discussions with customers;
- Quicker access to injured worker claims data;
- Quicker access to employer risk data;
- Improved report generating capabilities;
- Improved data trend analysis capabilities.

We began collecting data in January 2009, and this data continues to be useful in conducting year over year comparisons and identifying customer trends. In addition, several BWC divisions now use ePowerCenter. The ePowerCenter data on the Ombuds system remains 100 percent segregated from BWC data, and we continue to retain statutory independence and neutrality. This sharing of the same software allows for better data trend analysis of current and future problems.

In 2014, we began tracking general inquiry information in addition to complaint information we previously tracked. This additional data provides a more robust picture of the type and source of issues presented to us for resolution. Additionally, we continuously review database parameters to ensure we are capturing as much information as possible from each customer contact.

The advantage to making these changes is that we can get a much clearer and more detailed picture of the type of issues brought to us.

Promoting Ombuds Office services

The information we collect, allows the office to conduct analysis to promote our services more effectively. Ensuring that potential customers and sources of referrals have an awareness of the office and the services provided continues to be a priority in 2024. I continue to accept speaking engagements to explain Ombuds Office services whenever they are offered.

Printed material

We produce and print our capabilities brochure in-house at minimal cost by BWC communications and DAS state printing. We mail this brochure upon request; distribute it at speaking engagements; and provide it to BWC, IC, employer and labor groups and other government entities for distribution to potential customers.

Promoting services to IC

We increased awareness of services to the IC in several ways including:

- Presenting an overview of the office and services provided to all IC hearing officers as part of their regional training;
- Meeting with IC support staff in IC offices statewide to discuss available services;
- Providing capabilities brochures to IC hearing officers and staff for distribution to employers, injured workers and their representatives;
- Maintaining placement of link to Ombuds Office information on the IC's website.

Promoting Services to BWC

We increased awareness of services to the BWC in several ways, including:

- Meeting with BWC senior staff to discuss available Ombuds Office services;
- Working with BWC's 1-800-OHIOBWC call center staff to increase awareness of our services and to increase appropriate referrals;
- Maintaining placement of link to Ombuds Office information on BWC's website;
- Working with BWC to determine placement of an option to reach the Ombuds Office on the 1-800-OHIOBWC phone line.

Promoting services to employers

We increased awareness of services to employers in several ways, including:

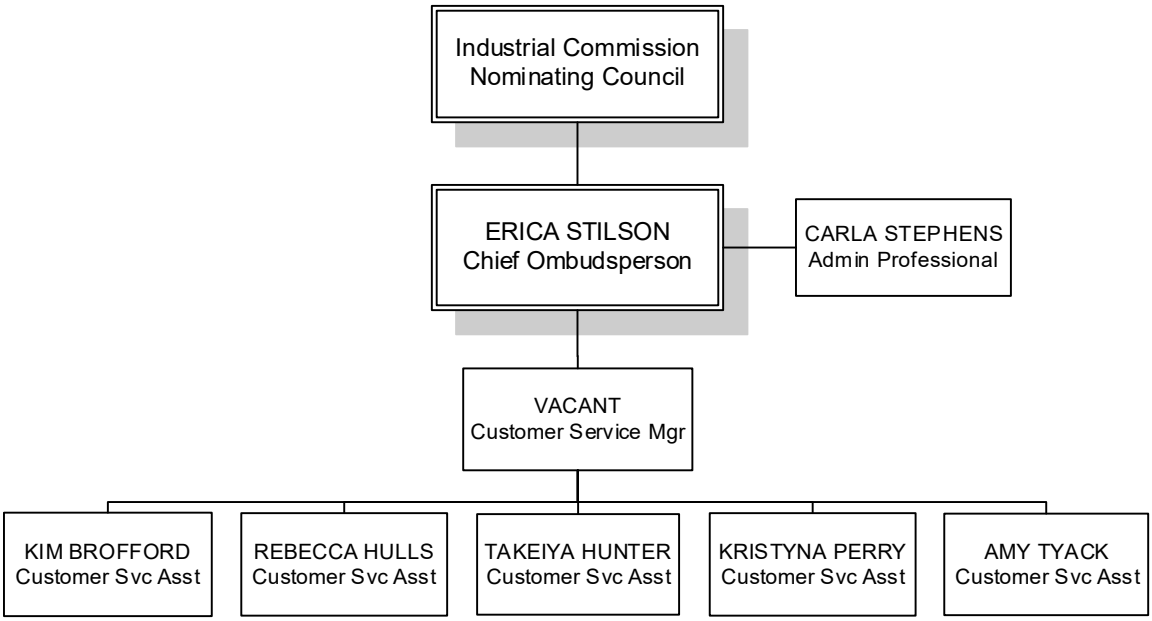
- Mailing letters to unrepresented employers prior to their first IC hearing;
- Distributing our capabilities brochure to business trade groups for distribution to their members;
- Providing information business trade groups can share on their websites;
- Speaking at special events and/or seminars with target audiences present;
- Providing information on our services to local and regional chambers of commerce and safety councils.

Promoting services to injured workers

We will increase awareness of services to injured workers in several ways, including:

- Mailing letters to unrepresented injured workers prior to their first IC hearing;
- Distributing our capabilities brochure to local unions, across Ohio;
- Speaking at labor seminars, including AFL-CIO, UAW and Teamsters;
- Providing information local unions can share on their websites;
- Conducting meetings with local union stewards to increase their awareness of our services.

Ombuds Office Table of Organization



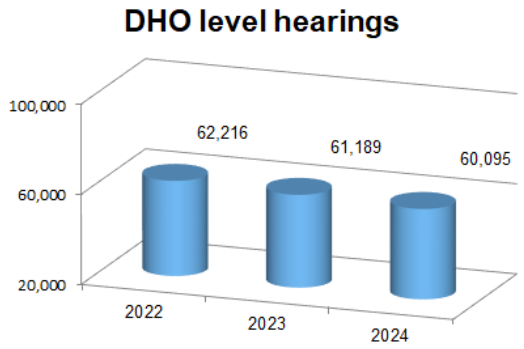
Ombuds Office Expenditure Report - Calendar Year 2024

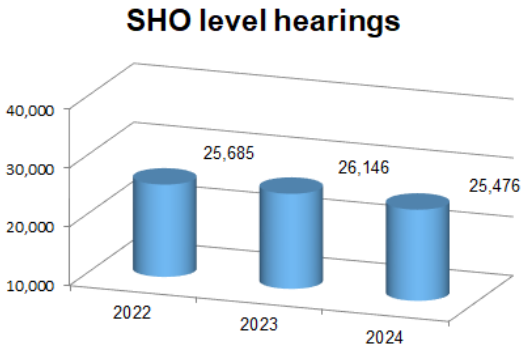
OBJECT CLASS	JAN.	FEB.	MAR.	APR.	MAY	JUN.	JUL.	AUG.	SEP.	OCT.	NOV.	DEC.	TOTAL EXPENSES
10 Payroll	58,578	85,584	69,928	45,960	45,910	45,860	46,700	71,509	47,771	49,009	50,244	50,758	667,811
10 Overtime Paid	0	0	8	0	0	0	0	12	4	0	0	0	24
13 Purchased Services	0	0	835	0	0	2,259	0	0	0	0	0	1,906	5,000
15 Other Pers Svc	150	0	0	0	0	0	0	0	0	0	0	0	150
Total 100	58,728	85,584	70,771	45,960	45,910	48,120	46,700	71,521	47,775	49,009	50,244	52,664	672,986
20 Edible Products	0	0	0	0	0	0	0	0	0	0	0	0	0
21 Supplies	0	0	903	0	0	832	0	0	284	0	0	1,238	3,257
22 Vehicle Maintenance	0	0	0	0	0	0	0	0	0	0	0	0	0
23 Travel	0	0	0	0	0	0	0	0	0	0	0	0	0
24 Communications	0	0	0	0	0	0	0	0	0	0	0	0	0
24 IT Lic Commun	342	156	149	150	151	776	151	152	152	239	0	0	2,418
25 Fuel/Utilities	0	0	706	0	0	487	0	0	603	0	0	714	2,510
26 Maintenance/Repairs	0	0	633	0	0	0	0	0	390	0	0	585	1,608
27 Rentals/Leases	0	0	0	0	0	0	0	0	0	0	0	0	0
27 ISTV/Goods & Svcs	713	0	597	94	114	494	88	93	0	586	0	941	3,720
28 Printing/Advert	0	0	0	0	0	0	0	0	0	0	0	112	112
29 General/Other	0	0	0	0	0	0	0	0	0	0	0	0	0
Total 200	1,055	156	2,987	244	265	2,589	239	245	1,429	825	0	3,590	13,624
30 Food Handling Equip	0	0	0	0	0	0	0	0	0	0	0	0	0
31 Office Equipment	0	0	0	0	0	0	0	0	0	0	0	0	0
32 Motor Vehicles	0	0	0	0	0	0	0	0	0	0	0	0	0
34 Commun Equip	0	0	0	0	0	0	0	0	0	0	0	0	0
35 Medical/Lab/Therpeut	0	0	0	0	0	0	0	0	0	0	0	0	0
36 Educt'l/Recrt'l	0	0	0	0	0	0	0	0	0	0	0	0	0
37 IT Equip	0	0	0	0	0	0	0	0	0	0	0	0	0
38 Copy/Print Equip	0	0	0	0	0	0	0	0	0	0	0	0	0
39 Other Equipment	0	0	0	0	0	0	0	0	0	0	0	0	0
Total 300	0	0	0	0	0	0	0	0	0	0	0	0	0
Grand Total	59,784	85,739	73,758	46,204	46,175	50,709	46,939	71,766	49,204	49,834	50,244	56,254	686,610

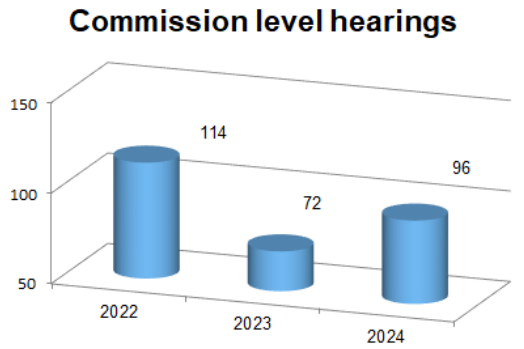
Source: Monthly reports from January through December 2024.
Note: Mass Allocations included in March, June, September, and December. Line items are rounded and may not match actual totals.

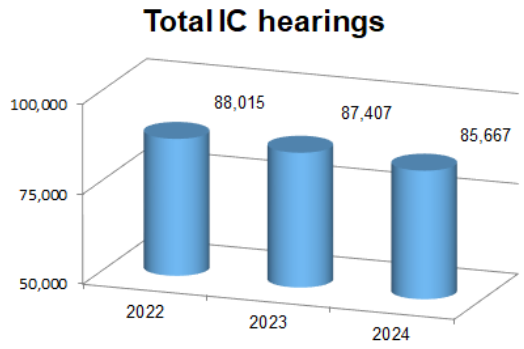
Prepared By: Budget Department/VMW

Industrial Commission 2024 Year-End Statistics









Source: IC Management Planning

Ohio Bureau of Workers' Compensation

2024 Year-End Statistics

	FY 2024	FY 2023	FY 2022
State Fund Claims Filed			
Lost Time	11,017	10,870	10,821
Medical Only	54,920	56,069	58,281
Occupational Disease	234	287	751
Death	161	206	154
Disallowed or Dismissed	10,777	10,783	10,674
Total	77,109	78,215	80,681
Net Allowed Injuries	66,332	67,432	70,007

NOTE: Every claim is evaluated at 60 days after filing for purposes of claim type, State Fund versus Self-Insured, combine status, and allowance status. Values exclude combined and Self-Insured claims.

Open Claims (Per statute)			
Lost Time	167,140	171,857	179,122
Medical Only	339,681	358,069	376,809
Total	506,821	529,926	555,931
Benefits Paid			
Medical Benefits Paid	$370,425,066	$379,481,783	$385,836,050
Compensation Paid			
Wage Loss	$3,313,068	$3,573,527	$4,203,613
Temporary Total	180,178,340	173,332,976	179,919,262
Temporary Partial	1,006	1,004	1,819
Permanent Partial	20,075,509	20,329,996	23,314,096
% Permanent Partial	49,750,142	42,468,873.28	44,552,760
Lump Sum Settlement	179,084,708	190,256,897	223,734,112
Lump Sum Advancement	14,059,456	13,645,857	15,374,273
Permanent Total & DWRF	354,989,004	352,153,760	353,418,673
Death	78,146,356	77,976,581	77,648,364
Rehabilitation	17,808,738	18,753,770	19,392,389
Other	2,744,927	3,853,653	3,198,573
Total Compensation Paid	$900,151,253	$896,346,895	$944,757,934
Total Benefits Paid	$1,270,576,319	$1,275,828,678	$1,330,593,984
MCO Fees Paid	$170,272,655	$165,264,893	$161,693,729
Fraud Statistics			
Fraud Dollars Identified	$72,293,045	$73,526,655	$89,989,982
$$$ Saved to $$$ Spent Ratio	5.38 to 1	6.08 to 1	7.02 to 1
Prosecution Referrals	104	118	123

Source: BWC Fiscal Year 2024 Annual Report

2024 Year-End statistics

	FY 2024	FY 2023	FY 2022
Active Employers By Type			
Private	253,975	253,128	251,816
Public (Local)	3,811	3,805	3,807
Public (State)	117	113	114
Self-Insured	1,129	1,072	1,089
Black Lung	19	19	19
Marine Fund	122	126	125
Total	259,173	258,263	256,970
Starting in FY 2019, policies that lapsed within the fiscal year are treated as active			
BWC Personnel	1,604	1,587	1,545
IC Personnel	278	295	285
BWC COMBINED FUNDS FINANCIAL DATA	(000s omitted)	(000s omitted)	
	Audited FY 2024	Audited FY 2023	Audited FY 2022
Operating Revenues			
Premium & Assessment Income, net of Provision for Uncollectibles and Ceded Premiums	$1,238,848	$1,391,763	$1,245,461
Other Income	11,073	8,858	7,665
Total Operating Revenues	$1,249,921	$1,400,621	$1,253,126
Operating Expenses			
Workers' Compensation Benefits and Compensation Adjustment Expenses	$1,707,214	$1,546,974	$1,405,889
Other Expenses	172,165	152,633	116,436
Total Operating Expenses	$1,879,379	$1,699,607	$1,522,325
Non-Operating Revenues			
Net Investment Earnings	$526,476	$536,871	$479,562
Increase (Decrease) in Fair Value	491,058	52,283	(2,049,566)
Net Investment Income	$1,017,534	$589,154	(1,570,004)
Net Dividends, Rebates and Credits	$9	$150	$28,263
Total Assets	$23,044,229	$22,491,441	$22,289,947
Total Liabilities	$14,872,383	$14,706,357	$14,793,343
Total Net Position	$8,171,846	$7,785,084	$7,496,313

Industrial Commission Nominating Council

Current as of December 2024

Employer Representatives

Ryan Augsburger
Ohio Manufacturers Association

Kevin Shimp
Ohio Chamber of Commerce

Chris Ferruso
National Federation of
Independent Business / Ohio

Gordon M. Gough*
Ohio Council of Retail Merchants

Denise Evans
Ohio Self-Insurers Association

Public Members

Robert Schmitz

Vacant

Labor Representatives

Tim Burga**
Ohio AFL-CIO

Frank Gallucci
Plevin & Gallucci

R. Sean Grayson
AFSCME Ohio Council 8

David Prentice
United Steelworkers

Ohio Association of Justice Representative

Philip Fulton***

* Chairperson
** Vice Chairperson
*** Secretary