

10 a.m. (EST)
Via Zoom



Safety & Workers' Compensation Committee

Tuesday, June 22, 2021

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**2021 Committee Meeting
Calendar**

Meetings begin at 10 a.m.
Wednesday, October 20

Our Meeting Sponsor:





Safety & Workers' Compensation Committee Agenda

June 22, 2021

Welcome & Self-Introductions	Matt Shurte, Lancaster Colony Corporation
Guest Speaker	Jim Hughes, Industrial Commission Chairman
Safety Update and OSHA Information	Dianne Grote Adams, Safex
Safety Story Presentation	David Nagle, T. Marzetti Co.
COVID-19 Discussion	Open discussion on employee safety and compensation changes due to COVID-19
Workers' Compensation Update	Brian Jackson, OMA Staff
Public Policy Report	Rachael Carl, OMA Staff
OMA Counsel's Report	Sue Roudebush, Bricker & Eckler LLP

**2021 Committee Meeting
Calendar**

Meetings begin at 10 a.m.
Wednesday, October 20

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OMA Safety and Workers' Comp Committee - June 2021

Name	Company	Location
Susan Adkins	A M G Industries, LLC	Mount Vernon, OH United States
LaWanda Alexander	Panelmatic Cincinnati, Inc.	
Anna Anderson	Knott Brake Company	Lodi, OH United States
Craig Andrews	Haltec Corporation	Salem, OH United States
Patrick Ard	Xaloy, LLC	Austintown, OH United States
John L. Asimakopoulos	Apex Paper Box Company	Cleveland, OH United States
Gerri L. Baxter	Benchmark Woodworks	Delaware, OH United States
Joseph Kyle Belford	Republic Steel	Canton, OH United States
Tricia Bell	Principle Business Enterprises, Inc.	Dunbridge, OH United States
David Bonistall	American Trim, LLC	Sidney, OH United States
Kyle Brun, Intern	The Ohio Manufacturers' Association	Columbus, OH United States
Rob Brundrett	The Ohio Manufacturers' Association	Columbus, OH United States
Logan Brutcher	Norwalk Concrete Industries	Norwalk, OH United States
Eva Canales	Arps Dairy, Inc.	Defiance, OH United States
Rachael Carl	The Ohio Manufacturers' Association	Columbus, OH United States
Corrine Carman	Vorys, Sater, Seymour & Pease LLP	Columbus, OH United States
Darlene Carpenter	Cascade Corporation	Springfield, OH United States
Wendy Carroll	Mid West Fabricating Company	Amanda, OH United States
Shawn Chaney	Hartzell Industries, Inc.	Piqua, OH United States
Niki Chapin	PPG	Cleveland, OH United States
Rhonda Cogan	Fusion Ceramics, Inc	Carrollton, OH United States
Ashley Conaway	M P C Plastics Inc	Brooklyn, OH United States
Randy Counts	Thieman Tailgates, Inc.	Celina, OH United States
Marcos Cuevas	Warren Equipment Company	Katy, TX United States
Steve Cunningham	Solvay Specialty Polymers USA, LLC	Marietta, OH United States
John D. Dance	Barclay Machine, Inc.	Salem, OH United States
Gordon Daugherty	Universal Metal Products	Wickliffe, OH United States
Stacy DeLong	Retriev Technologies Inc.	Lancaster, OH United States
Brian DeLucenay	Fort Recovery Industries, Inc.	Fort Recovery, OH United States
Peggy E. Downard	Cooper Tire & Rubber Company	Findlay, OH United States
Joseph F. Dutt	Summitville Laboratories	Minerva, OH United States
Carl Estock	Buckeye Shapeform	Columbus, OH United States
Eric Fischer	Butech Bliss	Salem, OH United States
LaMont Friebel	Cooper Enterprises Inc.	Shelby, OH United States
Jennifer J. Friel	Mid West Fabricating Company	Amanda, OH United States
Mark A. Fujka	Altenloh Brinck & Co. US, Inc.	Bryan, OH United States
Thomas A. Futey	Wright Tool Company	Barberton, OH United States
Jennifer Gilliland	Identity Systems Inc	Columbus, OH United States
Darcy Grimes	Hi-Vac Corporation	Marietta, OH United States
Gina Grimes	Restoration Parts Unlimited, Inc.	Lebanon, OH United States
Susan Grom	American Honda Motor Company	Marysville, OH United States
Dianne Grote Adams	Safex, Inc.	Westerville, OH United States
Lisa Hagggar	Middletown Tube Works Inc	Middletown, OH United States
Mishelle K. Hall	Ohio Transitional Machine/Tool	Toledo, OH United States
Marilyn A. Hansen	Hudson Extrusions, Inc.	Hudson, OH United States
Sandy L. Harper	ROKI AMERICA Co., Ltd.	Findlay, OH United States
Chris Hassmann	Warren Rupp, Inc.	Mansfield, OH United States
Amy Hayslip	Luminex Home Decor & Fragrance Co	Leesburg, OH United States
Eric Herrmann	M P C Plastics Inc	Brooklyn, OH United States
Victoria Jahnsz	Elyria Plastic Products	Elyria, OH United States
Karen James	The Ohio Manufacturers' Association	Columbus, OH United States
Matthew F. Johnston	Worthington Industries, Inc.	Columbus, OH United States
Laura Kalamets	Radici Plastics USA	Wadsworth, OH United States
Jamie Karl	The Ohio Manufacturers' Association	Columbus, OH United States
James Keplar	The Will-Burt Company	Orrville, OH United States
Marie-Joelle C. Khouzam	Bricker & Eckler LLP	Columbus, OH United States
Megan Kleinman	Rogue Fitness	Columbus, OH United States
Therese Kremer	Buckeye Shapeform	Columbus, OH United States

OMA Safety and Workers' Comp Committee - June 2021

Name	Company	Location
Cory Kriechbaum	Magnum Magnetics	Marietta, OH United States
Amanda LaCombe	Sur-Seal Inc.	Cincinnati, OH United States
Ashley Lewis	Stellantis	Monroe, MI United States
Jill Lifer	Johnson Bros.-West Salem, Inc.	West Salem, OH United States
Tina Lippiatt	Haltec Corporation	Salem, OH United States
Michael Lowe	Venture Products, Inc.	Orrville, OH United States
Jonathan Lutz, CIH, CSP	The Sherwin-Williams Company	Cleveland, OH United States
Greg Manger	Costume Specialists, Inc.	Columbus, OH United States
Joseph A. Matthews, MOD, PMP, COSS	Principle Business Enterprises, Inc.	Dunbridge, OH United States
Sue Mazzino	Apex Paper Box Company	Cleveland, OH United States
Jacob Metzger	Superior Forge & Steel Corporation	Lima, OH United States
Hannah Montana	Automatic Feed Company	Napoleon, OH United States
Tom Morrissey	D S V Solutions, L.H.S.C.	Little Hocking, OH United States
Hillary Mosher	Glister Inc. dba The Kingswood Company	Columbus, OH United States
Kevin Mueller	Rogue Fitness	Columbus, OH United States
Lisa Neenan	S & G Manufacturing Group, LLC	Hilliard, OH United States
Tom R. Nelson	Yoder Lumber Company, Inc.	Millersburg, OH United States
Steven Penrod	P. Graham Dunn, Inc.	Dalton, OH United States
Virginia Pickens	Kentak Products Company	East Liverpool, OH United States
Scott Pierstorff	Coldwater Machine Co.	Coldwater, OH United States
Linda Pocock	International Metal Hose Company	Bellevue, OH United States
Michael Pulsfort	Health Management Solutions, Inc.	Columbus, OH United States
Barbara Rardon	Sutphen Corporation	Amlin, OH United States
Chris Revak	Rhein Chemie Corp.	Chardon, OH United States
Crissy Roach	The Ohio Manufacturers' Association	Columbus, OH United States
Andrew Robinson	Plaskolite	Columbus, OH United States
Sue A. Roudebush	Bricker & Eckler LLP	Columbus, OH United States
Lora Rudy	Roconex Corp	Troy, OH United States
Patricia Schenker	Solon Manufacturing Company	Chardon, OH United States
Stacey Schultz	Sugar Creek Packing Company	Cincinnati, OH United States
Keith Schwarz	Superior Forge & Steel Corporation	Pittsburgh, PA United States
Jennine Seebach	United Surface Finishing	Canton, OH United States
Benjamin Smith	Willowood Global LLC	Mount Sterling, OH United States
Rod Sommer	R & J Cylinder & Machine, Inc.	New Philadelphia, OH United States
Werner Sapon	Panelmatic Cincinnati, Inc.	Fairfield, OH United States
Tracie Sorvillo	Sofidel America Corporation	Circleville, OH United States
Michael L. Squillace	Dinsmore & Shohl	Columbus, OH United States
Heather Stalnaker	Pyrotek, Inc.	Aurora, OH United States
Duane Steelman	Zaclon, LLC	Cleveland, OH United States
Joanne Stover	Ken Forging Inc.	Jefferson, OH United States
Denver W. Stufflebeam	Myers Controlled Power	North Canton, OH United States
Ronald Stupka	Calfee, Halter & Griswold LLP	Cleveland, OH United States
Shelby Sutphen	Sutphen Corporation	Dublin, OH United States
Bob Sutyak	The Lincoln Electric Company	Cleveland, OH United States
George Svaranowic	Clarke Fire Protection Products, Inc.	Cincinnati, OH United States
Brian Tarian	Roetzel & Andress	Columbus, OH United States
Keith Thomas	Emerson Commercial & Residential Solutions	Sidney, OH United States
Thomas Thompsen, Lt Col, USA (Ret)	The French Oil Mill Machinery Company	Piqua, OH United States
Edward Trenn	Molded Fiber Glass Companies	Ashtabula, OH United States
Maria Triozzi	Fredon Corporation	Mentor, OH United States
Tina Tschur	I N E O S	Lima, OH United States
Jessica Ulmer-West	Liberty Technology Company LLC	Delaware, OH United States
Stacie Varley	M H Eby, Inc.	West Jefferson, OH United States
Deborah Venci	Barium & Chemicals, Inc.	Steubenville, OH United States
Juliet Walker	The Ohio Manufacturers' Association	Columbus, OH United States
Thomas Walsh	Veolia	North Bend, OH United States
Heather Weddington	Seaway Bolt & Specials Corporation	Columbia Station, OH United States

OMA Safety and Workers' Comp Committee - June 2021

Name	Company	Location
Andy Welch	L T F Acquisition LLC dba Life-Time Fenders	Canfield, OH United States
Gene White	National Aerospace Processing, LLC	Stow, OH United States
Gene White	National Machine Co	Stow, OH United States
Dana D. Williams	Robin Industries, Inc.	Independence, OH United States
Jessi Wilson	BriskHeat Corporation	Columbus, OH United States
Doug Zabel	Barnes International	Rockford, IL United States

Total Participants 121

Jim Hughes, Chairman



Jim Hughes has spent his career demonstrating his passion for public service.

He was appointed by Governor Mike DeWine to be the chairman and employee member of the Ohio Industrial Commission for a term that began on July 1, 2019.

Jim brings decades of legal knowledge and public policy experience to his role as chairman. He began his career as a bailiff and court constable in the Franklin County Court of Common Pleas. He later served as assistant prosecutor in the City of Columbus Prosecutor's Office and then as assistant prosecutor for Franklin County. He also worked previously as an attorney and partner at the Isaac Wiles law firm in Columbus.

In 2000, he was appointed to the Ohio House of Representatives and was later elected to the Ohio Senate in 2008. During his 18 years in the Ohio General Assembly, Jim supported legislation that toughened criminal penalties, protected children, reformed taxes, streamlined regulations, and incentivized businesses to settle in Ohio. He also served on many legislative committees including Civil Justice, Insurance and Financial Institutions, Energy and Public Utilities, Transportation and Public Safety, and Criminal Justice.

Jim has received numerous accolades from several groups over the course of his career. He has been named Legislator of the Year by the FOP Capitol City Lodge No. 9, the Ohio Fire Chief's Association, the Ohio Nurses Association, the Ohio Association of Professional Firefighters and the AMVETS Department of Ohio. In addition, he has received the Ohio Association for Justice Workers Compensation Outstanding Service Award, and the Watchdog of the Treasury Award, among others.

Jim earned his Juris Doctorate at Capital University Law School after completing his bachelor's degree in business administration at The Ohio State University. He and his wife Susan live in Upper Arlington, and have a daughter, Kaela.

COVID 19 Emergency Standard

1. Applies to health care.
 - a. If you have a 'clinic' with medical staff, that portion of your business is covered.
 - b. OSHA 4125 Flow Chart
2. Issued updated guidance for non-health care.
 - a. <https://www.osha.gov/coronavirus/safework>
 - b. This guidance focuses only on protecting unvaccinated or otherwise at-risk workers in their workplaces (or well-defined portions of workplaces).
 - i. Time off to get vaccinated.
 - ii. Close contact with positive case – stays home.
 - iii. Physical distancing
 - iv. Face coverings
 - v. Educate and train.
 - vi. Customers and visitors wear face coverings during interactions.
 - vii. Maintain ventilation systems.
 - viii. Routine cleaning and disinfection
 - ix. Record work related COVID19 infections
 - x. Protection from retaliation

Noise and Hearing Conservation Regional Emphasis Program

The goal of the REP is to encourage employers to take steps to identify, reduce, and eliminate hazards associated with exposure to high levels of noise. The enforcement directive was issued on June 01, 2021. Prior to the initiation of enforcement, a three-month period of education and compliance assistance to the public will be conducted to support the efforts of the Agency in meeting the goals of the REP. During this period, OSHA will continue to respond to complaints, referrals, hospitalizations, and fatalities. Enforcement related to this REP will begin on September 01, 2021.

- Applies to NAIC 32 and 33
- Review OSHA log and noise data
- Evaluate written HCP.
- Walkthrough with SLM
- Dosimetry if SLM indicates appropriate.

OSHA Regulatory Agenda -

- Updated June 11, 2021
- Of interest – nothing expected in 2021.
 1. Process Safety
 2. Emergency Response
 3. Power Presses
 4. Heat Illness Prevention
 5. Hazard Communication
 6. LOTO



OSHA National News Release

U.S. Department of Labor

June 10, 2021

US Department of Labor's OSHA issues emergency temporary standard to protect health care workers from the coronavirus
OSHA also releases new guidance for all industries

WASHINGTON, DC – The U.S. Department of Labor's Occupational Safety and Health Administration has announced it will issue an [emergency temporary standard](#) to protect healthcare workers from contracting coronavirus. The standard focuses on healthcare workers most likely to have contact with someone infected with the virus. OSHA announced the new standard alongside new general industry guidance, both of which are aligned with Centers for Disease Control and Prevention guidance

"Too many of our frontline healthcare workers continue to be at high risk of contracting the coronavirus," said U.S. Secretary of Labor Marty Walsh. "As I said when I came to the department, we must follow the science. This standard follows the science, and will provide increased protections for those whose health is at heightened risk from coronavirus while they provide us with critical healthcare services. Given the pace of vaccinations, this standard, along with the guidance OSHA, the CDC and other agencies have released, will help us protect frontline healthcare workers and end this pandemic once and for all."

The emergency temporary standard establishes new requirements for settings where employees provide healthcare or health care support services, including skilled nursing homes and home healthcare, with some exemptions for healthcare providers who screen out patients who may have COVID-19. OSHA will update the standard, if necessary, to align with CDC guidelines and changes in the pandemic.

"This standard is necessary to give our healthcare workers deeply needed protections," said Acting Assistant Secretary of Labor for Occupational Safety and Health Jim Frederick. "This tailored standard allows OSHA to help the workers most in danger of contracting the virus, while the updated guidance will give other businesses across the country the information they need to help protect unvaccinated workers and continue mitigating spread in the workplace."

In addition to the healthcare-focused ETS, OSHA is issuing [updated guidance](#) to help employers and workers in other industries protect workers who are still not vaccinated, with a special emphasis on other industries noted for prolonged close-contacts like meat processing, manufacturing, seafood, and grocery and high-volume retail.

The health care emergency temporary standard is aimed at protecting workers facing the highest coronavirus hazards—those working in health care settings where suspected or confirmed coronavirus patients are treated. This includes employees in hospitals, nursing homes, and assisted living facilities; emergency responders; home health care workers; and employees in ambulatory care settings where suspected or confirmed coronavirus patients are treated.

The standard will require non-exempt facilities to conduct a hazard assessment and have a written plan to mitigate virus spread, and requires healthcare employers to provide some employees with N95 respirators or other personal protective equipment. In addition, covered employers must ensure 6 feet of distance between workers. In situations where this is not possible, employers should erect barriers between employees where feasible.

The standard also requires covered employees to provide workers with paid time off to get vaccinated and to recover from any side effects. Covered employees who have coronavirus or who may be contagious must work remotely or otherwise be separated from other workers if possible, or be given paid time off up to \$1400 per week. For most businesses with fewer than 500 employees, tax credits in the American Rescue Plan may be reimbursed through these provisions.

The ETS exempts fully vaccinated workers from masking, distancing and barrier requirements when in well-defined areas where there is no reasonable expectation that any person will be present with suspected or confirmed coronavirus.

The ETS is effective immediately upon publication in the Federal Register. Employers must comply with most provisions within 14 days and with the remaining provisions within 30 days. OSHA will use its enforcement discretion to avoid citing employers who miss a compliance deadline but are making a good faith effort to comply with the ETS. OSHA will continue to monitor trends in coronavirus transmission.

Under the Occupational Safety and Health Act of 1970, employers are responsible for providing safe and healthful workplaces for their employees. OSHA's role is to help ensure these conditions for America's workers by setting and enforcing standards, and providing training, education and assistance. [Learn more about OSHA.](#)

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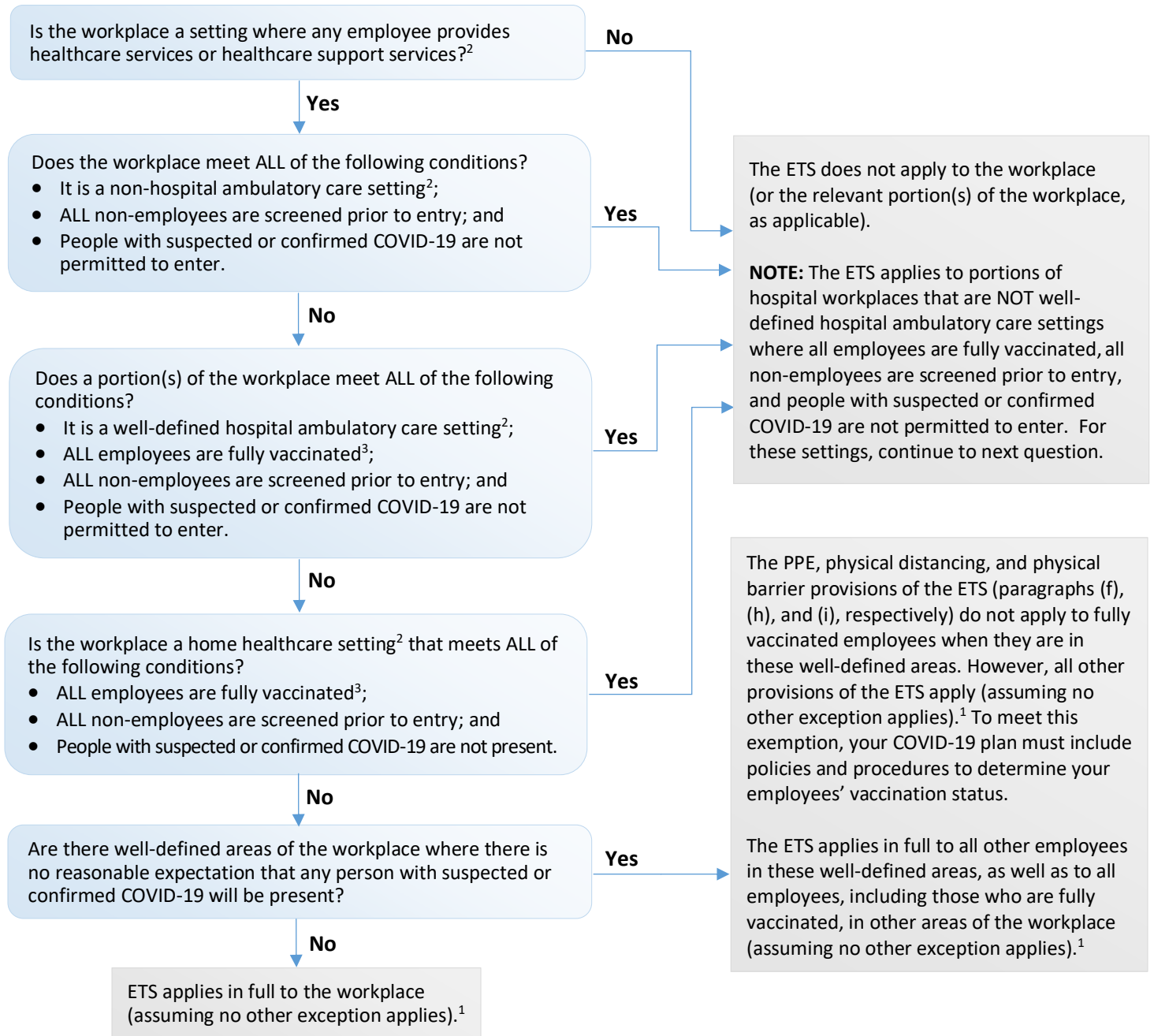
Release Number: 21-355-NAT

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Is your workplace covered by the COVID-19 Healthcare ETS?



Employers may use the flow chart and footnote 1, below, to determine whether and how your workplace is covered by the ETS.¹ For the full text of the ETS, refer to **29 CFR 1910.502** at www.osha.gov/coronavirus/ets.



¹ The ETS does not apply to the following: the provision of first aid by an employee who is not a licensed healthcare provider, the dispensing of prescriptions by pharmacists in retail settings, healthcare support services not performed in a healthcare setting (e.g., off-site laundry, off-site medical billing), and telehealth services performed outside of a setting where direct patient care occurs. Furthermore, where a healthcare setting is embedded within a non-healthcare setting (e.g., medical clinic in a manufacturing facility, walk-in clinic in a retail setting), the ETS applies only to the embedded healthcare setting and not to the remainder of the physical location. Finally, where emergency responders or other licensed healthcare providers enter a non-healthcare setting to provide healthcare services, the ETS applies only to the provision of the healthcare services by that employee.

² Healthcare services mean services that are provided to individuals by professional healthcare practitioners for the purpose of promoting, maintaining, monitoring, or restoring health. Healthcare support services mean services that facilitate the provision of healthcare services. Ambulatory care means healthcare services performed on an outpatient basis, without admission to a hospital or other facility, but does not include home healthcare settings for the purposes of the ETS. A non-employee, for the purposes of the relevant exceptions, is any person who is not an employee of the employer who owns or controls the setting (e.g., contractors working on the HVAC system).

³ Fully vaccinated means 2 weeks or more following the final dose of a COVID-19 vaccine. OSHA does not intend to preclude the employers of employees who are unable to be vaccinated from the scope exemption in paragraphs (a)(2)(iv) and (a)(2)(v). See Note to 29 CFR 1910.502(a)(2)(iv) and (a)(2)(v).

OSHA 4125-06.2021



News Release

U.S. Department of Labor | June 14, 2021

OSHA initiative seeks to protect manufacturing workers in Midwest facilities from hazardous noise levels

More than half of workers don't use protective equipment to prevent hearing loss

CHICAGO – Nearly one in 10 people endure noise levels at work loud enough to cause hearing loss while seven in 10 experience moderately loud noise levels, reports the Bureau of Labor Statistics. Yet, the bureau's Occupational Requirements Survey, published in 2019, found that more than half of the nation's manufacturing workers reported not using personal protective equipment to protect their hearing.

To reduce these workplace dangers and promote hearing conservation programs, the U.S. Department of Labor's [Occupational Safety and Health Administration](#) regional office in Chicago has established a [Regional Emphasis Program](#) to raise awareness among Midwest manufacturing employers.

By law, OSHA requires employers to implement a hearing conservation program when the average noise exposure over eight working hours reaches or exceeds 85 decibels, which the [Centers for Disease Control compares to the sound of city traffic \(from inside the vehicle\) or a gas-powered leaf blower](#). To prevent noise-induced hearing loss, OSHA provides employers with [hearing conservation guidelines](#).

The REP's initial phase will include informational mailings to employers, professional associations, local safety councils, apprenticeship programs, local hospitals and occupational health clinics, and OSHA presentations to industry organizations and stakeholders. OSHA will also encourage employers to use the agency's free consultation services to help them implement noise safety strategies and ensure compliance with OSHA standards.

"Earning a living should not come at the expense of hearing loss," said OSHA Acting Regional Administrator William Donovan in Chicago. "Hearing conservation programs are designed to prevent workplace hearing loss, protect remaining hearing, and provide employers and workers with the knowledge and equipment to control and reduce exposure to noise."

OSHA encourages employers to take steps to identify, reduce and eliminate hazards related to high levels of noise during the REP's initial phase. Following its three-month outreach, that began June 1, 2021, the REP empowers OSHA to schedule and inspect select manufacturing industries in Illinois, Ohio and Wisconsin with hearing loss rates higher than the national average.

Learn more about [OSHA](#).

###

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Release Number: 21-994-CHI

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DOL/OSHA	Prerule Stage	Process Safety Management and Prevention of Major Chemical Accidents	1218-AC82
DOL/OSHA	Prerule Stage	Emergency Response	1218-AC91
DOL/OSHA	Prerule Stage	Mechanical Power Presses Update	1218-AC98
DOL/OSHA	Prerule Stage	Prevention of Workplace Violence in Health Care and Social Assistance	1218-AD08
DOL/OSHA	Prerule Stage	Blood Lead Level for Medical Removal	1218-AD10
DOL/OSHA	Prerule Stage	Heat Illness Prevention in Outdoor and Indoor Work Settings	1218-AD39
DOL/OSHA	Proposed Rule Stage	Infectious Diseases	1218-AC46
DOL/OSHA	Proposed Rule Stage	Amendments to the Cranes and Derricks in Construction Standard	1218-AC81
DOL/OSHA	Proposed Rule Stage	Shipyards Fall Protection--Scaffolds, Ladders and Other Working Surfaces	1218-AC85
DOL/OSHA	Proposed Rule Stage	Communication Tower Safety	1218-AC90
DOL/OSHA	Proposed Rule Stage	Update to the Hazard Communication Standard	1218-AC93
DOL/OSHA	Proposed Rule Stage	Lock-Out/Tag-Out Update	1218-AD00
DOL/OSHA	Proposed Rule Stage	Tree Care Standard	1218-AD04
DOL/OSHA	Proposed Rule Stage	Occupational Exposure to Crystalline Silica; Revisions to Table 1 in the Standard for Construction	1218-AD18
DOL/OSHA	Proposed Rule Stage	Welding in Construction Confined Spaces	1218-AD23
DOL/OSHA	Proposed Rule Stage	Personal Protective Equipment in Construction	1218-AD25
DOL/OSHA	Proposed Rule Stage	Powered Industrial Trucks Design Standard Update	1218-AD26
DOL/OSHA	Proposed Rule Stage	Walking Working Surfaces	1218-AD28
DOL/OSHA	Proposed Rule Stage	Occupational Exposure to Crystalline Silica: Revisions to Medical Surveillance Provisions for Medical Removal Protection	1218-AD31
DOL/OSHA	Proposed Rule Stage	Improve Tracking of Workplace Injuries and Illnesses	1218-AD40
DOL/OSHA	Final Rule Stage	Procedures for the Handling of Retaliation Complaints Under the Taxpayer First Act	1218-AD27
DOL/OSHA	Final Rule Stage	Procedures for Handling of Retaliation Complaints Under the Whistleblower Protection Statutes	1218-AD30
DOL/OSHA	Final Rule Stage	Discrimination Against Employees Exercising Rights Under the Williams-Steiger Occupational Safety and Health Act of 1970	1218-AD35
DOL/OSHA	Final Rule Stage	Subpart U--Emergency Temporary Standard--COVID-19	1218-AD36
DOL/OSHA	Final Rule Stage	Procedures for the Handling of Retaliation Complaints Under the Anti-Money Laundering Act	1218-AD37
DOL/OSHA	Final Rule Stage	Procedures for the Handling of Retaliation Complaints under the Criminal Antitrust Anti-Retaliation Act	1218-AD38
DOL/MSHA	Proposed Rule Stage	Respirable Crystalline Silica	1219-AB36
DOL/MSHA	Proposed Rule Stage	Alternatives to Petitions for Modification: Non-Permissible Surveying Equipment	1219-AB89
DOL/MSHA	Proposed Rule Stage	Safety Program for Surface Mobile Equipment	1219-AB91
DOL/MSHA	Final Rule Stage	Testing, Evaluation, and Approval of Electric Motor-Driven Mine Equipment and Accessories	1219-AB93

TO: OMA Safety and Workers' Compensation Committee
FROM: Rachael Carl
RE: Safety & Workers' Compensation Public Policy Report
DATE: June 22, 2021

Overview

OSHA has been busy recently releasing the long-awaited COVID-19 Emergency Temporary Standard (ETS) – which only applies to the health care industry – and issuing updated guidance. The new guidance comes on the heels of the latest recommendations from the CDC. Except for workplace settings covered by OSHA's ETS, most employers no longer need to take steps to protect their workers from COVID-19 exposure in the workplace where all employees are fully vaccinated. Employers should still take steps to protect unvaccinated or otherwise at-risk workers in their workplaces.

Also keeping busy, the House decided to not concur on the Senate's changes to the BWC's operating budget. Although the Industrial Commission's budget was recently signed by the governor, the BWC's budget hit a snag. The fight brews on over what information journalists should have access to regarding workers' compensation claimants. The BWC budget will now head to conference committee and hopefully finish up before the June 30th deadline.

Lastly, the BWC is working on a new rule to exclude COVID-19 claims from an employer's experience rating. At the end of May, the Bureau's Actuary Committee had a first reading of a proposed rule change. In an executive summary provided by the Bureau, they noted that experience rating is intended to measure an employer's success in maintaining a safe workplace. Further stating that using COVID-19 claims as a predictor of safety practices and future claims is unreliable and that when catastrophes (such as a pandemic) arise, they generally have been excluded in the experience rating process. The BWC is expected to have another reading this month and then send the rule through the formal rule-making process with JCARR.

Legislation and Rules

House Bill 17 – Workers' Compensation in Firefighter Cancer Claims

This bill would make changes to how compensation and benefits are paid out to a firefighter who contracted cancer. If the claim is paid from the state insurance fund, it shall be paid from the surplus fund account. If it is paid by a self-insuring employer, the amount would be paid from compensation that the employer reports to the Bureau of Workers' Compensation Administrator. So far, the bill has received one hearing in the House Insurance Committee.

House Bill 75 – State's Bureau of Workers' Compensation Budget

Picking up some amendments in the House, House Bill 75 includes several noteworthy reforms that have the OMA's support, including:

- Reducing the statute of limitations for occupational disease claims from two years to one year;
- Preventing claimants who were previously denied a permanent disability benefit from reapplying unless there is a change in circumstances; and
- Aligning permanent partial disability filing timelines for temporary total disability compensation and for claims where wages are paid in lieu of compensation.

Unfortunately, the bill also picked up some amendments in the Senate – one of which created some ruckus. The Senate included an amendment to walk back a provision in another recently passed bill dealing with public records. The provision would have allowed journalists to access the names of workers' compensation claimants, but the Senate decided that was too much.

The bill will now head to conference committee to settle the difference.

House Bill 76 – State's Industrial Commission Budget

As expected, the Commission's requested budget included no big policy changes nor big increases in appropriation. The bill was signed by the governor earlier this month.

House Bill 311 – Expand EEG/TMS Pilot Program

House Bill 311 is a companion bill to Senate Bill 153 (see more description below), and has yet to receive any hearings.

Senate Bill 66 – Career Pathways Apprentices Program

The bill would establish the Career Pathways Apprentices Program. The program would create partnerships between schools, businesses, and communities to develop career pathways for apprenticeships in various fields, including manufacturing, information technology, and healthcare, among others. The bill has had one hearing in the Senate Workforce & Higher Education Committee.

Senate Bill 69 – Noncredit Career-Technical Programs

This bill would require that career or technical certification programs offered at a community college be counted as a credit toward an associate degree in a related field. The Chancellor of Higher Education would establish the policies necessary for awarding those credits. The bill has had one hearing in the Senate Workforce & Higher Education Committee.

Senate Bill 153 – Expand EEG/TMS Pilot Program

Senate Bill 153 would allow for the continuation and expansion of the Transcranial Magnetic Stimulation (TMS) program funded in the state's previous operating budget. The expansion includes the requirement that EEG be used in combination with TMS treatments and allows for more participants to use this type of treatment. In a topic near and dear to the bill sponsor's heart, this pilot program was created to help veterans and first responders who suffer from PTSD.

The bill passed out of the Senate earlier this month and has also been amended into House Bill 110, the state's operating budget.

BWC Agency Notes

Ohio Ends COVID-19 Emergency

Gov. Mike DeWine has announced that Ohio will end its COVID-19 emergency declaration today, June 18, as cases and hospitalizations continue to decline.

The OMA's general counsel, Bricker & Eckler, has summarized what the end of the emergency means for manufacturers.

In short, while many of the state orders that impacted manufacturers — such as masking requirements — were rescinded earlier this month, today's move could affect manufacturers in some narrow aspects such as government procurement.

The firm advises manufacturers to continue to follow best practices where possible — and adhere to relevant CDC and OSHA guidance or other federal protocols as appropriate.

Study: Ohio Workers' Comp Costs Among Most Competitive in U.S.

Ohio employers pay, on average, the 12th lowest workers' compensation premium rates in the U.S. That's according to an updated study by the Oregon Department of Consumer and Business Services, which regularly compares the workers' comp premium rates of all 50 states and D.C. Ohio improved four spots from 2018.

Over the years, the OMA has worked hard to champion policies and practices that lower workers' comp costs. Last year, Ohio's index rate of \$1.11 per \$100 of payroll was 77% of the U.S. median, according to the study. If your company is not using OMA Workers' Compensation Services, learn how the OMA can help with your workers' comp responsibilities.

Industrial Commission to Resume In-Person Hearings

The Ohio Industrial Commission will return to in-person hearings effective July 6. According to the commission's website, parties and their representatives will still have the option to appear and participate by Webex. At this time, it is unclear whether in-person attendance at hearings will become mandatory.

BWC True-Up Begins July 1

Beginning July 1, the Bureau of Workers' Compensation (BWC) will require Ohio employers to reconcile their actual payroll for the prior policy year, as well as any differences in premium paid.

If your business has not already done so, the BWC is encouraging employers to review their payroll estimates for the current policy year to avoid surprises in the amount they might owe on premiums.

BWC Studying Mutualizing COVID-19 Claim Costs

This week, the Bureau of Workers' Compensation's (BWC) Actuarial Committee had a first reading of a proposed rule change to exclude COVID-19 claims costs from an employer's experience rating calculation.

An executive summary provided by the bureau noted that experience rating is intended to measure an employer's success in maintaining a safe workplace. Further stating that using COVID-19 claims as an indicator of safety and a predictor of future claims is unreliable and that when catastrophes (e.g. a pandemic) arise, they generally have been excluded from the experience rating process.

BWC Industry-Specific Safety Program Changes Coming July 1

The BWC's Division of Safety and Hygiene (DSH) has modified the Industry-Specific Safety Program (ISSP) — a program to encourage employers to use the DSH's array of safety services in exchange for a 3% credit — effective July 1.

Following a DSH safety and health consultation, the employer will now complete DSH follow-up activities before the end of the program year to earn loss prevention activity credits. Follow-up activities may include responding to a DSH action plan or completing a post-training survey. Previously, employers completed a post-consultation survey (SH-29).

BWC Enhances Transitional Work Program

The Bureau of Workers' Compensation (BWC) has enhanced its Transitional Work Grant (TWG) program for employers that actively participate in the recovery and return to work of their employees.

Beginning June 1, employers became eligible for a TWG every five years (instead of only one time). The 3:1 grant match reimbursement requirement has been removed. Grant reimbursement is now 100% of the submitted invoice up to the employer's maximum awarded grant, which is based on number of employees.

Unused grant monies are referred to as Implementation Funds and are available to use until the grant expires. Implementation funds can be used to purchase services needed to facilitate the transitional work program, including health and safety services related to COVID-19.

Safety Issues

OSHA Initiative Aims to Protect Hearing of Midwest Manufacturing Employees

OSHA has established a Regional Emphasis Program (REP) to raise hearing protection awareness among Midwest manufacturers. According to a news release, the REP's initial phase will include educating employers about hearing conservation, while encouraging the use of OSHA's free consultation services to implement noise safety strategies.

Following a three-month outreach period, OSHA personnel will be authorized to inspect manufacturing facilities in Ohio, Illinois, and Wisconsin with hearing loss rates higher than the U.S. average.

This is the perfect time to register for the OMA's July 1 webinar on OSHA's hearing protection requirements and noise-related health risks.

OSHA Updates COVID-19 Workplace Guidance

OSHA has released new guidance in response to the CDC's recently revised recommendations for vaccinated and unvaccinated workers. The changes focus protections on unvaccinated and otherwise at-risk workers.

Ohio Legislative Service Commission

Legislative Budget Office Office of Research and Drafting

[www.lsc.ohio.gov/Budget Central](http://www.lsc.ohio.gov/BudgetCentral)

Comparison Document

House Bill 75 —134th General Assembly

Bureau of Workers' Compensation Budget
(FY 2022-FY 2023)

As Introduced
As Passed by the House
As Passed by the Senate

June 2, 2021

Executive	As Passed By House	As Passed By Senate
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BWCCD24 Power of attorney

<p>No provision.</p>	<p>R.C. 4121.43 Permits the use of a power of attorney allowing an attorney to cash or endorse a check on behalf of a workers' compensation claimant, provided the power of attorney is narrowly tailored to apply to a specific check (current law prohibits using a power of attorney allowing an attorney to cash or endorse a check). Fiscal effect: None.</p>	<p>R.C. 4121.43 Same as the House, but removes the current law prohibition against a power of attorney allowing an attorney or employee to cash or endorse a check on behalf of a claimant. Fiscal effect: Same as the House.</p>
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BWCCD29 Alternate employer organizations

<p>No provision.</p>	<p>No provision.</p>	<p>R.C. 4123.03, 4133.07, and 4133.08 Suspends the current law prohibition against an alternate employer organization (AEO) holding itself out, advertising, or otherwise identifying itself in any way as a professional employer organization until January 1, 2022. Eliminates the ability of an AEO to use a bond to satisfy the continuing law security requirement for AEO registration with the Bureau of Workers' Compensation (current law requires an AEO to provide a bond or letter of credit in an amount determined by the Administrator to be adequate to meet the AEO's financial obligations under the Workers' Compensation Law, which must be at least \$1 million). Fiscal effect: None.</p>
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Executive

As Passed By House

As Passed By Senate

BWCCD25 Application for permanent partial disability

No provision.

R.C. 4123.57, Section 8

Prohibits an individual who receives wages in lieu of temporary total disability compensation from filing an application for permanent partial disability compensation until 26 weeks after payment of the wages ends or 26 weeks after the date of injury or occupational disease in absence of temporary total disability payments (current law) or wages in lieu of those payments. Applies to workers' compensation claims arising on or after the provision's effective date.

Fiscal effect: May result in decrease in benefits paid from the State Insurance Fund.

R.C. 4123.57, Section 8

Same as the House, but specifies that the prohibition also applies to claims pending on the provision's effective date.

Fiscal effect: Same as the House.

BWCCD18 Redetermination of permanent total disability

No provision.

R.C. 4123.58, Section 8

Requires, if the Industrial Commission has denied an application for permanent total disability (PTD) compensation, a claimant to present evidence of new and changed circumstances before the Commission may consider a subsequent PTD application based on the same injury or occupational disease. Applies to workers' compensation claims arising on or after the provision's effective date.

Fiscal effect: May result in increase in benefits paid from the State Insurance Fund.

R.C. 4123.58, Section 8

Same as the House, but specifies that the requirement also applies to claims pending on the provision's effective date.

Fiscal effect: Same as the House.

Executive

As Passed By House

As Passed By Senate

BWCCD15 Occupational disease statute of limitations

No provision.

R.C. 4123.85, Section 8

Reduces the time period for a workers' compensation claim based on an employee's occupational disease to be filed within one year after disability due to the occupational disease or death of the employee, instead of two years as under current law. Maintains current law with respect to allowing a period longer than one year after the disability began if that time period does not exceed six months after a licensed physician diagnoses the disease as occupational in origin. Applies to workers' compensation claims arising on or after the provision's effective date.

Fiscal effect: None.

R.C. 4123.85, Section 8

Same as the House.

Fiscal effect: Same as the House.

BWCCD30 Disclosure of claimant information and solicitation prohibition

No provision.

No provision.

R.C. 4123.88

Prohibits the Industrial Commission or the Bureau of Workers' Compensation from disclosing the name or names of claimants to a journalist under the continuing law exemption that allows a journalist to obtain claimant information otherwise prohibited from being disclosed.

No provision.

No provision.

Specifies that it is the intent of the General Assembly to supersede the amendments made by S.B. 4 of the 134th General Assembly (S.B. 4) that allowed the release of the name or names of claimants to journalists.

No provision.

No provision.

Retains the change made by S.B. 4 that excludes dependent information from the continuing law journalist exemption.

No provision.

No provision.

Prohibits a person other than an individual who obtains claimant information under the continuing law journalist exemption from recklessly possessing or obtaining claim

Executive

As Passed By House

As Passed By Senate

No provision.

No provision.

information that is not a public record, including the address or addresses and telephone number or numbers of claimants obtained by a journalist under the exemption.

Adds to the continuing law journalist exemption that a journalist must include in the written request for the claimant information a statement that the individual acknowledges that the requested claimant information is not a public record and that the individual will not disclose the information to any other person for any reason unrelated to journalism.

No provision.

No provision.

Eliminates the current law prohibition against a person soliciting a claimant or employer to take charge of or represent the claimant or employer in any claim or appeal which is or may be filed with the Bureau of Workers' Compensation or the Industrial Commission (the prohibition was declared unconstitutional in *Bevan & Assocs., LPA v. Yost*, 929 F.3d 366 (6th Cir. 2019) and is unenforceable).

Fiscal effect: None.

BWCCD1 Workers' Compensation Fraud Unit

Section: 1

Earmarks \$828,200 in each fiscal year from appropriation item 855410, Attorney General Payments, for the expenses of the Workers' Compensation Fraud Unit within the Attorney General's Office. Specifies that these payments must be processed at the beginning of each quarter of each fiscal year and deposited into the Workers' Compensation Section Fund (Fund 1950) used by the Attorney General.

Section: 1

Same as the Executive.

Section: 1

Same as the Executive.

Executive

As Passed By House

As Passed By Senate

BWCCD2 Safety and Hygiene

Section: 1

Requires the Treasurer of State to remit \$25,343,000 cash in FY 2022 and \$25,085,000 cash in FY 2023 from the State Insurance Fund to the state treasury to the credit of the Safety and Hygiene Fund (Fund 8260) to cover the operating expenses of the BWC's Division of Safety and Hygiene.

Section: 1

Same as the Executive.

Section: 1

Same as the Executive.

BWCCD3 Safety Grants

Section: 1

Requires the Treasurer of State to remit \$35.0 million cash in each fiscal year of the biennium from the State Insurance Fund to the state treasury to the credit of the Safety and Hygiene Fund (Fund 8260) to be used for Safety Grants.

Section: 1

Same as the Executive.

Section: 1

Same as the Executive.

BWCCD4 Health and Safety Initiative

Section: 1

Requires the Treasurer of State to remit \$3.0 million cash in each fiscal year of the biennium from the State Insurance Fund to the state treasury to the credit of the Safety and Hygiene Fund (Fund 8260). Requires that these amounts be used under appropriation item 855611, Health and Safety Initiative, for the purpose of creating and operating a health and wellness program.

Section: 1

Same as the Executive.

Section: 1

Same as the Executive.

Executive

As Passed By House

As Passed By Senate

BWCCD5 Safety Campaign

Section: 1

Requires the Treasurer of State to remit \$1.5 million cash in each fiscal year of the biennium from the State Insurance Fund to the state treasury to the credit of the Safety and Hygiene Fund (Fund 8260). Requires that these amounts be used under appropriation item 855612, Safety Campaign, for the purpose of creating and operating a statewide safety awareness and education campaign.

Section: 1

Same as the Executive.

Section: 1

Same as the Executive.

BWCCD6 Federal Grant Programs

Section: 1

Specifies that appropriation item 855609, Safety and Hygiene Operating, may be used to provide the state match for federal grant funding received by the Division of Safety and Hygiene.

Section: 1

Same as the Executive.

Section: 1

Same as the Executive.

BWCCD7 Vocational Rehabilitation

Section: 1

Allows the BWC and the Opportunities for Ohioans with Disabilities Agency to enter into an interagency agreement for the provision of vocational rehabilitation services and staff to mutually eligible clients. Allows the BWC to provide funds from the State Insurance Fund to fund vocational rehabilitation services and staff in accordance with the interagency agreement.

Section: 1

Same as the Executive.

Section: 1

Same as the Executive.

Executive

As Passed By House

As Passed By Senate

BWCCD8 Research Grants

Section: 1

Requires the Treasurer of State to remit \$3.0 million cash in FY 2022 and \$1.0 million cash in FY 2023 from the State Insurance Fund to the state treasury to the credit of the Safety and Hygiene Fund (Fund 8260). Requires that these amounts be used under appropriation item 855613, Research Grants, for the purpose of creating and operating the occupational safety and health research program.

Section: 1

Same as the Executive.

Section: 1

Same as the Executive.

BWCCD9 Substance Use Recovery and Workplace Safety Program

Section: 1

Requires the Treasurer of State to remit \$3.5 million cash in FY 2022 and \$4.0 million cash in FY 2023 from the State Insurance Fund to the state treasury to the credit of the Safety and Hygiene Fund (Fund 8260). Requires that these amounts be used under appropriation item 855618, Substance Use Recovery and Workplace Safety Program, for the purpose of creating and operating the opioid workplace safety program.

Section: 1

Same as the Executive.

Section: 1

Same as the Executive.

BWCCD10 Safety and Health Center of Excellence

Section: 1

Requires the Treasurer of State to remit \$15.0 million cash in each fiscal year of the biennium from the State Insurance Fund to the state treasury to the credit of the Safety and Hygiene Fund (Fund 8260). Requires that these amounts be used under appropriation item 855619, Safety and Health Center of Excellence, for the purpose of creating a center of excellence at the Ohio Center of Occupational Safety and Health.

Section: 1

Same as the Executive.

Section: 1

Same as the Executive.

Executive	As Passed By House	As Passed By Senate
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BWCCD11 Administrative Cost Fund

Section: 1
Requires the Treasurer of State to remit up to \$25.0 million cash in each fiscal year of the biennium from the State Insurance Fund to the state treasury to the credit of the Workers' Compensation Fund (Fund 7023).

Section: 1
Same as the Executive.

Section: 1
Same as the Executive.

BWCCD12 Deputy Inspector General for BWC and OIC Funding

Section: 2
Requires the Director of Budget and Management (OBM), on July 1, 2021, and January 1, 2022, or as soon as possible thereafter, to transfer \$212,500 cash from the Workers' Compensation Fund (Fund 7023) to the Deputy Inspector General for the Bureau of Workers' Compensation and Industrial Commission Fund (Fund 5FT0) for the FY 2022 costs related to the Deputy Inspector General for the Bureau of Workers' Compensation (BWC) and Ohio Industrial Commission (OIC). Requires the OBM Director, on July 1, 2022, and January 1, 2023, or as soon as possible thereafter, to transfer the same amount from Fund 7023 to Fund 5FT0 to pay for the corresponding costs in FY 2023. Specifies that if additional amounts are needed, the Inspector General may seek Controlling Board approval for additional transfers of cash and to increase the amount appropriated in appropriation item 965604, Deputy Inspector General for the Bureau of Workers' Compensation and Industrial Commission.

Section: 2
Same as the Executive.

Section: 2
Same as the Executive.

COVID-19 Claims

Below is a summary of claims filed by Ohio workers believing they contracted the coronavirus disease (COVID-19) on the job.

Total claims filed March 11, 2020 to May 17, 2021 = 3,757

Claims filed with Ohio BWC

Initial decision	Private employers	Public employers	Total
Accepted	558	324	882
Denied*	97	129	226
Dismissed**	972	202	1,174
Pending	29	28	57
Total	1,656	683	2,339

Claims filed with self-insured employers

BWC is not involved in these claim decisions.

Initial decision	Total
Certified	955
Rejected	350
Pending	113
Total	1,418

* **Denied claims:** In most cases, the claim did not include a diagnosis of COVID-19. In other cases, the evidence did not satisfy the definition of "occupational disease."

** **Dismissed claims:** Worker voluntarily withdrew claim (some filed in error, thinking they were applying for unemployment benefits, for example) or claim did not include a signed First Report of Injury.

Claims by occupation

Healthcare/First Responders	2,503
All Other	1,254
Total	3,757

Note: Generally, communicable diseases like COVID-19 are not workers' compensation claims because people are exposed in a variety of ways, and few jobs have a hazard or risk of getting the diseases in a greater degree or a different manner than the general public. However, if you work in a job that poses a special hazard or risk and contract COVID-19 from the work exposure, we could allow your claim. We have created a **special team** to handle COVID-19 claims to provide them with careful attention.

For more on BWC as it relates to COVID-19, please visit bwc.ohio.gov or email us at BWCCOVID19@bwc.state.oh.us.

For more on COVID-19, including prevention guidelines and its impact on Ohio, visit the Ohio Department of Health website coronavirus.ohio.gov.

Claims are not public record.

Common Sense Business Regulation (BWC Rules)

(Note: The below criteria apply to existing and newly developed rules)

Rule 4123-17-03

Rule Review

1. The rule is needed to implement an underlying statute.

Citation: _____

2. The rule achieves an Ohio specific public policy goal.

What goal(s): This rule change eliminates the impact of COVID-19 claims on the Experience Modification Factors of private employers and public employer taxing districts.

3. Existing federal regulation alone does not adequately regulate the subject matter.

4. The rule is effective, consistent and efficient.

5. The rule is not duplicative of rules already in existence.

6. The rule is consistent with other state regulations, flexible, and reasonably balances the regulatory objectives and burden.

7. The rule has been reviewed for unintended negative consequences.

8. Stakeholders, and those affected by the rule were provided opportunity for input as appropriate.

Explain: Stakeholder input will be gathered following the first reading of the rule

9. The rule was reviewed for clarity and for easy comprehension.

10. The rule promotes transparency and predictability of regulatory activity.

11. The rule is based on the best scientific and technical information and is designed so it can be applied consistently.

12. The rule is not unnecessarily burdensome or costly to those affected by rule.

If so, how does the need for the rule outweigh burden and cost? _____

13. The Chief Legal Officer, or his designee, has reviewed the rule for clarity and compliance with the Governor's Executive Order.

BWC Board of Directors Executive Summary

Exclusion of COVID-19 Claims in the Employer's Experience Rating Plan OAC Rule 4123-17-03

BACKGROUND

The World Health Organization categorized the COVID-19 outbreak as a pandemic on March 11, 2020, when the rates of infection continued to rise in many locations around the world and across the United States. Governor DeWine issued a State of Emergency order in March as well related to this pandemic situation.

Pandemics have been rare and are generally considered catastrophes because of their scope and severity. The presence or absence of a pandemic in a recent historical period is not believed to be a reliable predictor of whether one will return in a given future year, after the current one runs its course. Pandemics share this aspect with other catastrophic perils in the workers' compensation line, such as terrorism and earthquakes. When catastrophes arise, they generally have been excluded in the experience rating process.

Experience rating is intended to measure an individual employer's success in maintaining a safe workplace by factoring the employer's payroll and loss history into a formula designed to project that employer's propensity for future losses. After careful consideration, BWC has determined that it is appropriate to exclude claims attributable to the COVID-19 pandemic from experience rating calculations for the following reasons:

- COVID-19 Pandemic Claims as a Predictor of Safety Practices—The primary purpose of the Experience Rating Plan (Plan) is to encourage safety practices by giving employers an incentive to keep a safe workplace as compared to other similar businesses. Employers with a higher number of COVID-19 claims may not be a good indicator of that employer's safety program as compared to similar businesses.
- COVID-19 Pandemic Claims as a Predictor of Future Claims—The occurrence of COVID-19 pandemic claims is unlikely to be a reliable predictor of an employer's future claims costs or whether there will be a pandemic in the future.

Similar to the reasons mentioned above, it is also appropriate to exclude claims attributable to the COVID-19 pandemic because our experience rating plan bases the applicable credit or debit percentage on the cost of claims reported during a specified period of time.

The COVID-19 pandemic has created unique workers compensation conditions that need to be addressed with our experience rating plan. As a result, BWC has determined that it is necessary to revise the following rule:

The following wording is proposed to be added as subsection (4) of Section G of Rule 4123-17-03 Employer's experience rating plan:

(4) Actual losses where COVID-19 was contracted by an employee arising during the emergency declared by Executive Order 2020-01D, issued March 9, 2020 and the fourteen-day period after the emergency ends shall be excluded from employer's experience for the purpose of experience rating calculations.

4123-17-03 ~~Effective 1/1/2021~~ Employer's experience rating plan.

(A) Definitions.

As used in this rule:

(1) "Experience period" means:

(a) For private employer policy years commencing on or after July 1, 2016, the oldest four of the latest five completed policy years immediately preceding the beginning of the policy year to which a rate is applicable.

(b) For public employer taxing districts policy years commencing on or after January 1, 2016, the oldest four of the last five completed calendar years immediately preceding the beginning of the policy year to which the rate is applicable.

(2) "Inactive employer" means an employer that satisfies all the following criteria:

(a) The employer is assigned a "cancelled" policy status or a "no coverage" policy, and

(b) As of the last day of September for private employers, or the last day of March for public employers, the employer is not paying premiums or assessments to the Ohio state insurance fund under either its own identity, the identity of any successor entity, or as a self-insured entity.

(3) "Significant negative impact" occurs when:

(a) An inactive employer reported ten per cent or more of the payroll in a manual classification during the experience period, and

(b) The base rate for the manual classification is higher by including the payroll and losses of such inactive employer in the calculation of that manual classification base rate, than the manual classification base rate is when the payroll and losses of the inactive employer are excluded. For the purpose of determining "significant negative impact," the bureau shall test each inactive employer separately.

(B) An employer's premium rates shall be the manual classification base rates as provided under rules [4123-17-02](#), [4123-17-06](#), and [4123-17-34](#) of the Administrative Code for each of the employer's manual classifications except as modified by the employer's experience rating, and shall apply for the twelve-month period beginning on the first of July for private employers and for the calendar year beginning on the first of January for public employer taxing districts.

(1) In calculating the manual classification base rate and the expected loss rate under this rule, the bureau shall exclude the experience in a manual classification of an inactive employer if the inclusion of

that inactive employer's experience in that manual classification would have a significant negative impact upon the remaining employers in a particular manual classification.

(2) The calculation of the manual classification base rate and the expected loss rate, as modified in paragraph (B)(1) of this rule, shall be applied to all employers reporting payroll in the manual classification.

(C) An experience-rated employer's manual classification experience-modified rate shall be determined by multiplying its experience modification (EM) as defined in paragraph (D) of this rule times the manual classification base rate for each of the employer's assigned manual classifications.

(D) An employer's EM is determined in accordance with the following formula:

$$EM = \left[\frac{(TML - TLL)}{TLL} \times C \right] + 1$$

TML = Actual losses of the employer for the experience period, limited in accordance with paragraph (G) of this rule.

TLL = Total limited losses = TEL multiplied by LLR

TEL = Total expected losses, determined by applying expected loss rate to the payroll of each manual classification in the employer's experience period, as provided in the appendix to rule 4123-17-05.1 of the Administrative Code for private employers and in the appendix to rule 4123-17-33.1 of the Administrative Code for public employer taxing districts. The total expected losses are then used to determine credibility group, credibility, and the maximum value of a loss.

LLR = Limited loss ratio, calculated for each credibility group within each industry group, as provided in appendix B to rule [4123-17-05](#) of the Administrative Code for private employers and appendix B to rule [4123-17-33](#) of the Administrative Code for public employer taxing districts.

C = Credibility given to an employer's own experience, determined by the employer's total expected losses, as provided in the appendix to rule 4123-17-05.1 of the Administrative Code for private employers and in the appendix to rule 4123-17-33.1 of the Administrative Code for public employer taxing districts.

(E) For a private employer that is not a professional employer organization as defined in section [4125.01](#) of the Revised Code, and who is individually experience rated, individually retrospective rated, group retrospective rated, or in a deductible program under rule [4123-17-72](#) of the Administrative Code, the employer's EM as calculated in paragraph (D) of this rule is further adjusted by multiplying the EM adjustment factor as provided in appendix to this rule and the employer's EM.

(F) For a public employer taxing district employer that is not a professional employer organization as defined in section [4125.01](#) of the Revised Code, and who is individually experience rated, individually

retrospective rated, group retrospective rated, or in a deductible program under rule [4123-17-72](#) of the Administrative Code, the employer's EM as calculated in paragraph (D) of this rule is further adjusted by multiplying the EM adjustment factor as provided in appendix B to this rule and the employer's EM.

(G) An employers' EM shall be subject to the following conditions and limitations:

(1) Actual losses shall include all incurred costs but shall be limited as provided in rule [4123-17-12](#) of the Administrative Code, and at the claim level to the amounts provided in the appendix to rule 4123-17-05.1 of the Administrative Code for private employers and the appendix to rule 4123-17-33.1 of the Administrative Code for public employer taxing districts according to the total expected losses of an employer; and

(2) An employer shall not be eligible for experience modification of manual classification base rates unless its expected losses are at least the minimum amount as provided in the appendix to rule 4123-17-05.1 of the Administrative Code for private employers and the appendix to rule 4123-17-33.1 of the Administrative Code for public employer taxing districts.

(3) The year-over-year increase in an employer's EM may be limited to one hundred per cent pursuant to rule 4123-17-03.2 of the Administrative Code.

(4) Actual losses where COVID-19 was contracted by an employee arising during the emergency declared by Executive Order 2020-01D, issued March 9, 2020 and the fourteen-day period after the emergency ends shall be excluded from employer's experience for the purpose of experience rating calculations.

[Click to view Appendix](#)

[Click to view Appendix](#)

Effective: 1/1/2021

Promulgated Under: [111.15](#)

Statutory Authority: [4121.12](#), [4121.121](#), [4121.13](#)

Rule Amplifies: [4121.12](#), [4121.121](#), [4123.29](#), [4123.34](#)

4123-17-73 Group retrospective rating program.

(A) Definitions.

As used in this rule:

(1) "Group retrospective rating" is a voluntary workers' compensation insurance program offered by the bureau. Group retrospective rating is designed to provide financial incentive to employer groups participating in the program that, through improvements in workplace safety and injured worker outcomes, are able to keep their claim costs below a predefined level.

(2) "Basic premium factor" is a component of the retrospective rating premium formula used to account for insurance charges and costs that are distributed across all employers. The basic premium factor ("BPF") is based upon charges for the cost of having retrospective premium limited by the selected maximum premium ratio, the cost of claims when they exceed the per claim maximum value and the cost of excluding surplus costs from incurred losses.

(3) "Developed losses" or "total incurred losses (developed)" are a component of the retrospective rating premium formula intended to account for the fact that total incurred losses in claims are likely to increase over time. This claim cost development results from a number of factors, including, but not limited to, reactivation of claims, additional claim awards, and claims that may be incurred but not reported for a substantial period, and result in costs that would otherwise not be covered by premium collected.

(4) "Evaluation period" means the three-year period beginning immediately after the end of the retro policy year. Annual evaluations will occur three times during the evaluation period at twelve, twenty-four, and thirty-six months after the end of the retro policy year.

(5) "Incurred losses" means compensation payments and medical payments paid to date as well as open case reserves. The total incurred losses will not include surplus costs **or COVID 19 cost as defined in 4123-17-03 (G)(4)** and will be limited on a per claim basis.

(6) "Loss development factor" means actuarially determined factors that are multiplied by incurred losses of non-PTD/death retro claims to produce developed losses. Loss development factors ("LDF") are unique to each retro policy year.

(7) "Maximum premium ratio" means a factor pre-selected by the retro group that is multiplied by the standard premium after application of the premium size factors to determine the maximum retrospective premium for the group.

(8) "Member of a retro group" means the individual employers that participate in a group retrospective rating plan of a sponsoring organization.

(9) "Reserve" means the bureau's estimate of the future cost of a claim at a specific point in time.

(10) "Retro policy year" means the policy year in which an employer is enrolled in group retrospective rating. Claim losses which occur during this year will be tracked for all retro group members, and refunds or assessments will be distributed based on those losses in the subsequent evaluation period. The retro policy year start and end date will match that of the rating policy year. For public employer taxing districts, the retro policy year shall be January first through December thirty-first of a year. For private employers, the retro policy year shall be July first through June thirtieth of the following year.

(11) "Standard premium" means the total premium paid by or on behalf of an employer for a given policy year including any premium size factor adjustment, excluding the assessments for the disabled workers' relief fund and the administrative cost fund. In determining standard premium, total premium paid will not be reduced by any rebates or dividends issued pursuant to rule 4123-17-10 of the Administrative Code.

(12) "Application deadline" means the application deadline for group retrospective rating as set forth in appendix A and appendix B to rule 4123-17-74 of the Administrative Code.

(B) Sponsor eligibility requirements.

Each sponsoring organization seeking to sponsor a retro group must be certified under the bureau's sponsor certification process as specified in rule 4123-17-61.1 of the Administrative Code.

(C) Retro group eligibility requirements.

Each retro group seeking to participate in the bureau group retrospective rating program shall meet the following standards:

(1) A retro group must be sponsored by a bureau certified sponsoring organization.

(2) The employers' business in the organization must be substantially similar such that the risks which are grouped are substantially homogeneous. A group shall be considered substantially homogeneous if the main operating classification codes of the risks as determined by the premium obligations for the rating year beginning two years prior to the retro policy year are assigned to the same or similar industry groups. Industry groups are determined by appendix A to rule 4123-17-05 of the Administrative Code. Industry groups seven and nine as well as eight and nine are considered similar. The bureau may allow an employer to move to a more homogeneous group when, after December thirty-first for private employer groups and June thirtieth for public employer taxing district groups, but before the application deadline, the employer:

(a) Is an employer without a full year of recorded premium;

(b) Is reclassified as a result of an audit; or

(c) Fully or partially combines with another employer.

(3) A retro group of employers must have aggregate standard premium in excess of one million dollars, as determined by the administrator based upon the last full policy year for which premium information is available.

(a) For employers without a full year of recorded premium, the bureau may use the employer's expected premium.

(b) The bureau shall calculate the premium based upon the experience modified premium of the individual employers excluding group rating discounts.

(4) The retro group must include at least two employers.

(5) The formation and operation of the retro group program by the organization must substantially improve accident prevention and claims handling for the employers in the retro group. The bureau shall require the retro group to document its safety plan or program for these purposes, and, for retro groups reapplying annually for group retrospective rating coverage, the results of prior programs. The safety plan must follow the guidelines and criteria set forth under rule 4123-17-68 of the Administrative Code.

(D) Employer eligibility requirements.

Each employer seeking to participate in the bureau group retrospective rating program must meet the following standards:

(1) The employer must be a private employer or public employer taxing district that participates in the state insurance fund. A self-insuring employer or a state agency public employer shall not be eligible for participation in the group retrospective rating program.

(2) Each employer seeking to enroll in a retro group for workers' compensation coverage must have active workers' compensation coverage according to the following standards:

(a) As of the application deadline, the employer must be current with respect to all payments due the bureau, as defined in paragraph (A)(1)(b) of rule 4123-17-14 of the Administrative Code.

(b) As of the application deadline for group retrospective rating, the employer must be current on the payment schedule of any part-pay agreement into which it has entered for payment of premiums or assessment obligations. Group

(c) The employer cannot have cumulative lapses in workers' compensation coverage in excess of forty days within the twelve months preceding the application deadline date for group retrospective rating.

(d) The employer must report actual payroll for the preceding policy year and pay any premium due upon reconciliation of estimated premium and actual premium for that policy year no later than the application deadline date set forth in rule 4123-17-74 of the Administrative Code.

(3) No employer may be a member of more than one retro group or a retro and non-retro group for the purpose of obtaining workers' compensation coverage. An employer who has been included on a group experience rating roster for the upcoming policy year may not elect to participate in group retrospective rating after the deadline for group experience rating set forth in rule 4123-17-74 of the Administrative Code.

(4) An employer must be homogeneous with the industry group of the retro group as defined in paragraph (C)(2) of this rule.

A member of a continuing retro group who initially satisfied the homogeneous requirement shall not be disqualified from participation in the continuing retro group for failure to continue to satisfy such requirement.

(E) A sponsoring organization shall make application for group retrospective rating on a form provided by the bureau and shall complete the application in its entirety with all documentation attached as required by the bureau. If the sponsoring organization fails to include all pertinent information, the bureau will reject the application.

(1) The group retrospective rating application (U-151) shall be signed each year by an officer of the sponsoring organization.

(2) The sponsoring organization shall identify each individual employer in the retro group on an employer roster for group retrospective rating plan (U-152).

(F) A retro group's application for group retrospective rating is applicable to only one policy year. The retro group must reapply each year for group retrospective rating coverage. Continuation of a plan for subsequent years is subject to timely filing of an application on a yearly basis and the meeting of eligibility requirements each year.

(G) Upon receipt of an application for retro group, the bureau shall do the following:

(1) Determine the industry classification of the retro group based upon the makeup of retro group employers submitted.

(2) Screen prospective retro group members to ensure that their business operations fit appropriately in the retro group's industry classification.

(3) In reviewing the retro group's application, if the bureau determines that individual employers in the retro group do not meet the eligibility requirements for group retrospective rating, the bureau will notify the individual employers and the retro group of this fact, and the retro group may continue in its application for group retrospective rating coverage without the disqualified employers.

(H) The group retrospective rating sponsor shall submit to the bureau an employer statement (U-153) each year for each employer that wishes to participate in group retrospective rating with the sponsor. Where an employer files a new employer statement form in the sixty days prior to the

application deadline, the bureau will presume that the latest filed employer statement form of the employer indicates the employer's intentions for group retrospective rating. An employer statement form shall remain effective until the end of the policy year as defined on the employer statement form.

(I) The bureau may request of individual employers or the retro group sponsor, additional information necessary for the bureau to rule upon the application for group retrospective rating participation. Failure or refusal of the retro group sponsor to provide the requested information on the forms or computer formats provided by the bureau shall be sufficient grounds for the bureau to reject the application and refuse the retro group's participation in group retrospective rating program.

(J) Individual employers who are not included on the final retro group roster or do not have an individual employer application (U-153) for the same retro group or another retro group sponsored by the same sponsoring organization on file by the application deadline, will not be considered for the group retrospective rating plan for that policy year; however, the bureau may waive this requirement for good cause shown due to clerical or administrative error, so long as no employer is added to a retro group after the application deadline. The group retrospective rating sponsor shall submit all information to the bureau by the application deadline.

(K) Once a retro group has applied for group retrospective rating, the organization may not voluntarily terminate the application. All changes to the original application must be filed on a bureau form provided for the application for the group retrospective rating plan and must be filed prior to the filing deadline. Any rescissions made must be completed in writing, signed by an officer of the sponsoring organization and filed prior to the filing deadline. The retro group may make no changes to the application after the last day for filing the application. Any changes received by the bureau after the filing deadline will not be honored. The latest application form or rescission received by the bureau prior to the filing deadline will be used in determining the premium obligation.

(L) After the group retrospective rating application deadline but before the end of the policy year for the retro group, the sponsoring organization may notify the bureau that it wishes to remove a member of a retro group from participation in the retro group. The sponsoring organization may request that the member of a retro group be removed from the retro group after the application deadline only for the gross misrepresentation of the member of a retro group on its application to the retro group.

(1) "Gross misrepresentation" is an act by an **employer** applicant for group retrospective rating or a member of a retro group that would cause financial harm to the other members of the retro group and is limited to any of the following:

(a) The sponsoring organization discovers that the employer applicant for group retrospective rating or a member of a retro group has recently merged with one or more entities without disclosing such merger on the employer's application for membership in the retro group, and such merger adversely affects the employer's risk of future losses.

(b) The sponsoring organization discovers that the employer applicant for group retrospective rating or a member of a retro group has failed to disclose the true nature of the employer's business pursuit on its application for membership in the retro group, and this failure adversely affects the loss potential of the retro group.

(2) The sponsoring organization must provide sufficient documentation, as determined by the bureau, to support its request to remove an employer from a retro group.

(3) The employer shall be removed from the group only with the bureau's approval.

(M) An employer will be removed from the group retrospective rating program for the current policy year for failure to report actual payroll for the preceding policy year and pay any premium due upon reconciliation of estimated premium and actual premium for that policy year no later than the date set forth in rule 4123-17-14 of the Administrative Code. An employer will be deemed to have met this requirement if the bureau receives the payroll report and the employer pays premium associated with that payroll report before the expiration of any grace period established by the administrator pursuant to paragraph (B) of rule 4123-17-16 of the Administrative Code. Should an employer not comply with the provisions of this paragraph, the following will apply:

(1) Claims costs according to this rule for all injuries incurred from the beginning of the policy year in which the employer participated in group retrospective rating through the date of removal from the program shall be included in the group retrospective rating calculation; and

(2) Only premium from the beginning of the policy year through the date of removal will be included in the group retrospective rating calculation for the participation policy year.

(N) A retro group formed for the purpose of group retrospective rating may not voluntarily terminate a plan during the policy year. A change in the name of the retro group will not constitute a new retro group. A change of the organization sponsoring a retro group or moving a retro group to a new sponsoring organization shall constitute a new retro group, and the members of the new retro group must meet the homogeneity requirement of paragraph (C)(2) of this rule. A retro group shall be considered a continuing retro group if more than fifty per cent of the members of the retro group in the previous rating year are members of the retro group in the current rating year.

(O) Selection of an authorized representative for the retro group shall meet the following requirements:

(1) A retro group that has been established and has been accepted by the bureau for the purpose of group retrospective rating shall have no more than one permanent authorized representative for representation of the retro group and the individual employers of the retro group before the bureau and the industrial commission in any and all policy-related matters pertaining to participation in the state insurance fund.

(2) The selection of an authorized representative must be made by submission of a completed form U-151, and any change or termination of the authorized representative can be made only by a subsequent submission of form U-151. Only an officer of the sponsoring organization may sign a U-151.

(P) The bureau shall consider an employer individually when assessing the premium payments for the retro policy year. The retro group will be considered a single entity for purposes of calculating group retrospective rating premium adjustments.

(Q) The group retrospective rating premium calculation will occur at twelve, twenty-four, and thirty-six months following the end of the group retrospective rating policy year.

(1) On the evaluation date, the bureau will evaluate all claims with injury dates that fall within the retro policy year. The incurred losses and reserves that have been established for these claims are "captured" or "frozen." The group's retrospective premium will be calculated based on the developed incurred losses of the group. The group retrospective rating premium will be compared to the group standard premium, which is the combined standard premiums of retro group members for the retro policy year as defined in paragraph (A) (11) of this rule and all subsequent group retrospective rating refunds-and assessments. The difference will be distributed or billed to employers as a refund or assessment.

(a) These assessments will be limited per a maximum premium ratio selected during the group retrospective rating application process.

(b) Effective with policy years beginning on or after January 1, 2022, premium refunds, premium rebates, and premium dividends provided to group retrospective rating employers for a policy year may not exceed, in their cumulative total, one hundred percent of the actual premium following reporting of actual payroll and reconciliation of estimated premium and actual premium in accordance with paragraph (M) of this rule.

(c) Any reserving method that suppresses some portion of an employer's costs for the purpose of calculating an experience modification will not apply in the calculation of incurred losses for group retrospective rating.

(d) The bureau may hold a portion of refunds or defer assessments owed in the first and second evaluation periods to minimize the volatility of refunds and assessments. Any net refund or assessment will be fully distributed or billed by the bureau in the third evaluation period.

(2) Incurred losses used in the group retrospective rating premium calculation will be limited to five hundred thousand dollars per claim.

(3) Incurred losses will not include surplus or violation of a specific safety requirement ("VSSR") costs.

(R) The retrospective premium calculation that will occur at various evaluation points after the retro policy year end is calculated by the following formula, with standard premium and developed incurred losses are for the total of the entire retro group:

Group retrospective rating premium =

(Basic premium factor x standard premium as defined in paragraph (A)(11) of this rule)

+

developed incurred losses

(1) A group will elect a maximum premium ratio for the group each year as part of the group retrospective rating application process. This ratio will determine the maximum amount of total premium a retro group may pay after refunds and assessments.

(2) Options for the maximum premium ratio and the corresponding basic premium factor will be as set forth in appendix A and appendix B to this rule.

(3) A basic premium factor is applied in the retro premium calculation to account for insurance costs, surplus costs, and a per claim cap. The basic premium factor is determined using the following factors: group size by standard premium as defined in paragraph (A)(11) of this rule as set forth in appendix D to this rule and maximum premium ratio.

(4) Developed incurred losses are created by totaling incurred losses and reserves for the entire retro group and applying an actuarially determined loss development factor as defined in appendix C to this rule.

(5) Refunds and assessments will be distributed directly to group retrospective rating employers. The amount refunded or assessed to an individual employer will be based upon the percentage of the total group standard premium paid by the employer at the time of evaluation. The refund or assessment will be multiplied by this percentage and the resulting amount will be distributed or billed to the employer.

(6) Within four months of the evaluation date, if entitled, the bureau will send premium refunds.

(7) If additional premium is owed, the additional premium is **included** in the employer's next invoice and must be paid by the due date stated on the invoice. The bureau will charge penalties on any additional premium not paid when it is due. If the member of a retro group is entitled to a refund for one retro policy year and owes any additional monies to the bureau, the bureau will deduct the monies due the bureau from the refund. The bureau will refund the difference to the member of a retro group. In the event that this adjustment still leaves a premium balance due, the bureau will send a bill for the balance.

(S) Terminations, transfers, and change of ownership are addressed with regard to group retrospective rating as follows:

(1) Predecessor: enrolled in group retrospective rating program.

Successor: new entity.

Where there is a combination or experience transfer during the current policy year or the sixty days preceding the application deadline for the upcoming policy year, wherein the predecessor was a participant in or applicant for the group retrospective rating program, and the successor is assigned a new policy with the bureau, the successor may be considered a member of the group retrospective rating program if agreed to by both the succeeding employer and the group retrospective rating sponsor. Written agreement signed by both the succeeding employer and the group retrospective rating sponsor must be received by the bureau within thirty days of the date of succession. If the succeeding employer and the group sponsor agree to successor joining the retro group, the successor's group retrospective rating evaluation shall be based on the group's reported payroll and claims incurred. Notwithstanding this election, the successor shall be responsible for any and all existing or future rights and obligations stemming from the predecessor's participation in the group retrospective rating program prior to the date that the bureau was notified of the transfer as prescribed under paragraph (C) of rule 4123-17-02 of the Administrative Code.

(2) Predecessor: not enrolled in group retrospective rating program.

Successor: enrolled in group retrospective rating program.

Where one legal entity that has established coverage and is enrolled in the group retrospective rating program, wholly succeeds one or more legal entities having established coverage and the predecessor entities are not enrolled in the group retrospective rating program at the date of succession, the payroll reported and claims incurred by the predecessor from the date of succession to the end of the policy year, shall be included in successor's retrospective rating plan. If the predecessor had at any time participated in a group retrospective rating program, the successor shall be responsible for any and all existing or future rights and obligations stemming from the predecessor's participation in the group retrospective rating program prior to the date that the bureau was notified of the transfer as prescribed under paragraph (C) of rule 4123-17-02 of the Administrative Code.

(3) Predecessor: enrolled in group retrospective rating program.

Successor: not enrolled in group retrospective rating program.

Where one legal entity that has established coverage and is not currently enrolled in a group retrospective rating plan wholly succeeds one or more entities that are enrolled in a group retrospective rating plan, predecessor's plan(s) shall terminate as of the ending date of the evaluation period. Payroll reported and claims incurred on or after the date of succession will be the responsibility of the successor under its current rating plan. The successor shall be responsible for any and all existing or future rights and obligations stemming from the predecessor's participation in the group retrospective rating program prior to the date that the

bureau was notified of the transfer as prescribed under paragraph (C) of rule 4123-17-02 of the Administrative Code.

(4) Predecessor: enrolled in group retrospective rating program.

Successor: enrolled in different group retrospective rating program.

Where one legal entity that has established coverage and is enrolled in a group retrospective rating plan wholly succeeds one or more entities that are enrolled in a group retrospective rating plan, predecessor's plan(s) shall terminate as of the ending date of the evaluation period. Payroll reported and claims incurred on or after the date of succession will be the responsibility of the successor under its group retrospective rating plan. The successor shall be responsible for any and all existing or future rights and obligations stemming from the predecessor's participation in the group retrospective rating program prior to the date that the bureau was notified of the transfer as prescribed under paragraph (C) of rule 4123-17-02 of the Administrative Code.

(5) Predecessor: enrolled in group retrospective rating program.

Successor: enrolled in same group retrospective rating program.

Where one legal entity that has established coverage and is enrolled in a group retrospective rating plan wholly succeeds one or more entities that are enrolled in the same group retrospective rating plan, the successor shall be responsible for any and all existing or future liabilities stemming from the predecessor's participation in the group retrospective rating program prior to the date that the bureau was notified of the transfer as prescribed under paragraph (C) of rule 4123-17-02 of the Administrative Code. If the predecessor had at any time participated in a different group retrospective rating program, the successor shall be responsible for any and all existing or future rights and obligations stemming from the predecessor's participation in the group retrospective rating program prior to the date that the bureau was notified of the transfer as prescribed under paragraph (C) of rule 4123-17-02 of the Administrative Code.

(6) Successor: cancels coverage and was enrolled in group retrospective rating program.

Predecessor: no predecessor.

If the successor cancels coverage and there is no predecessor, the premium and losses of the canceling employer will remain with the retro group for future retrospective premium calculations. The resulting refund or assessment will be collected from the remaining members of the retro group.

Group retrospective rating sponsors and authorized representatives have the right to represent the interest of the canceled employer on behalf of the group with regard to claims which occurred during the year or years the employer was active in a retro group sponsored by the organization.

(7) Successor and/or predecessor: open group retrospective rating policy years in the evaluation period.

If the successor and predecessor are not currently enrolled in the group retrospective rating program, but either or both have open group retrospective rating policy years in the evaluation period, the successor shall be responsible for any and all existing or future rights and obligations stemming from the predecessor's participation in the group retrospective rating program prior to the date that the bureau was notified of the transfer as prescribed under paragraph (C) of rule 4123-17-02 of the Administrative Code.

(8) Partial transfer.

If an entity partially succeeds another entity and the predecessor entity has any group retrospective rating policy years in the evaluation period, the predecessor entity will retain any rights to assessments or refunds. If the successor is enrolled in the group retrospective rating program, payroll reported and claims incurred on or after the date of the partial transfer will be the responsibility of the successor under its group retrospective rating plan.

(9) Successor: files a petition for bankruptcy.

Predecessor: no predecessor.

If a current or previously group retrospective rating program employer with open retro policy years files a petition for bankruptcy under chapter seven or chapter eleven of the federal bankruptcy law, that employer shall notify the bureau legal division by certified mail within five working days from the date of the bankruptcy filing. The bureau will petition the bankruptcy court to take appropriate action to protect the state insurance fund and other related funds.



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TO: The Ohio Manufacturers' Association

FROM: Bricker & Eckler

DATE: June 17, 2021

RE: Governor DeWine to Rescind COVID-19 Declaration of Emergency

Ohio Governor Mike DeWine announced that he is ending the [Declaration of a State of Emergency](#) related to COVID-19 on Friday June 18, 2021. The move signifies the final step in lifting the many COVID-19 related emergency orders and rules the DeWine administration implemented to combat the global pandemic. While many of the orders impacting manufacturers, like the requirements for masks and social distancing were previously repealed, the move does impact manufacturers.

Government Procurement

The emergency declaration authorized public entities to suspend normal purchasing and contracting requirements for obtaining any necessary supplies or resources for the health, safety, and welfare of the Ohioans. With the emergency declaration lifted, state agencies resume the normal bidding and procurement processes required by Chapters 125 and 153 of the Ohio Revised Code.

Emergency Orders

The emergency declaration authorized the Ohio Department of Health to issue Director's Orders and Guidelines for private businesses. That authorization ends on June 18. Again, the Director's Orders that primarily impacted manufacturers were already rescinded, but with the lifting of the emergency declaration no new orders can be issued unless a new emergency is declared by the Governor.

Income Tax Withholding

One area impacting manufacturers and employers across the state is municipal income tax withholdings. Under a temporary law provision enacted in 133-H.B.197, employees who are working remotely as a result of the pandemic were treated, for municipal income tax purposes, as working at their primary worksite (the location where the employee reports to work on a regular and ordinary basis). This provision allowed employers to avoid withholding income taxes for that employee in the municipality where the employee resided (or was otherwise performing their job remotely).

Ohio COVID-19: Governor DeWine to Rescind COVID-19 Declaration of Emergency

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Section 29 of 133-H.B.197 authorized the modified municipal income tax withholding during the declared emergency. The modified withholding expires 30 days after the governor lifts the order.

However, in the current state operating budget legislation, H.B. 110, the Ohio Senate inserted a provision that extends the modified withholding authorization through December 31, 2021, regardless of when the declaration ends. If the extension remains in the legislation, the legislative language applies the authorization for modified municipal income tax withholding for the period between March 9, 2020 and December 31, 2021, meaning there will likely be no immediate impact to employers and employee withholdings of municipal income taxes.

Conclusion

Governor DeWine initially declared a state of emergency due to COVID-19 on March 9, 2020. With falling case rates and increased vaccination rates, Governor DeWine is signaling that Ohio has successfully emerged from the pandemic in a way that no longer requires extraordinary measures. Manufacturers should still follow and adhere to best practices where possible and follow relevant Centers for Disease Control and Prevention guidance or other federal protocols as appropriate.



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Ohio Manufacturers' Association
Workers' Compensation Counsel Report
June 22, 2021

Sue A. Roudebush, Esq.
Bricker & Eckler LLP

Regulatory Actions:

Effective April 1, 2021:

- | | |
|--------------|--|
| 4123-6-01 | Definitions |
| 4123-6-01.1 | Applicability of medical rules |
| 4123-6-02 | Provider access to the HPP – generally |
| 4123-6-02.21 | Provider access to the HPP - non-certified provider enrollment |
| 4123-6-02.3 | Provider access to the HPP – provider application and credentialing |
| 4123-6-02.4 | Provider access to the HPP - provider re-credentialing and recertification |
| 4123-6-02.5 | Provider access to the HPP - provider not certified |
| 4123-6-02.51 | Provider access to the HPP -- Denial of provider, entity or MCO certification based on criminal conviction or civil action |
| 4123-6-02.6 | Provider access to the HPP -- selection by an MCO |
| 4123-6-02.7 | Provider access to the HPP - provider decertification procedures |
| 4123-6-02.8 | Provider requirement to notify of injury |
| 4123-6-02.9 | Provider access to the HPP - provider marketing |
| 4123-6-03.4 | MCO participation in the HPP - MCO certification |
| 4123-6-04.3 | MCO scope of services - MCO medical management and claims management assistance |

- 4123-6-04.4 MCO scope of services - fee bill review and audit process
- 4123-6-04.5 MCO scope of services - bureau claims management
- 4123-6-04.6 Thirty-day return to work assessment
- 4123-6-05.3 Employer access to the HPP; certain solicitation practices by MCOs prohibited
- 4123-6-05.4 Employer access to the HPP; payment for referrals prohibited
- 4123-6-06.1 Employee access to medical services -- employee education by MCO and employer
- 4123-6-07 Services and supplies never covered
- 4123-6-10 Payment to providers
- 4123-6-14 MCO bill submission to bureau
- 4123-6-14.1 Records to be retained by MCO
- 4123-6-15 Confidentiality of records
- 4123-6-16 Alternative dispute resolution for HPP medical issues
- 4123-6-16.2 Medical treatment reimbursement requests
- 4123-6-16.3 Reimbursement of retroactive medical treatment reimbursement requests
- 4123-6-17 Bureau refusal to certify or recertify, action to decertify a provider or MCO - standards and procedures for adjudication hearings
- 4123-6-18 Data gathering and reporting
- 4123-6-20 Obligation for submitting medical documentation and reports
- 4123-6-20.1 Charges for copies of medical reports
- 4123-6-21.1 Payment for outpatient medication by self-insuring employer

Effective May 6, 2021:

- 4123-6-08 Bureau Fee Schedule
- 4123.-6-37.2 Payment of hospital outpatient services
- 4123-6-37.3 Payment of ambulatory surgical center services

Effective May 9, 2021:

- 4123-17-03.2 Experience modification cap
- 4123-17-14.3 Go green rebate
- 4123-17-56.3 Industry-specific safety program
- 4123-17-58 Drug-free safety program (DFSP) and comparable program
- 4123-17-16 Criteria for group experience rating
- 4123-17-69 Grow Ohio incentive program
- 4123-17-71 One claim program
- 4123-17-72 Deductible rule
- 4123-17-73 Group retrospective rating program

Effective June 1, 2021:

- 4123-17-55 Transitional work development grant and performance bonus

Effective June 12, 2021:

- 4123-17-41 Retrospective rating definitions applicable to any employer
- 4123-17-42 Eligibility for retrospective rating
- 4123-17-43 Application for retrospective rating plan
- 4123-17-44 Minimum premium

4123-17-45	Initial computation
4123-17-46	Premium adjustments
4123-17-47	Final settlement
4123-17-48	Penalties
4123-17-49	Handicap reimbursement
4123-17-51	Termination and transfers
4123-17-52	Parameters of the retrospective rating plan

Effective July 1, 2021:

4123-17-05	Private employer industry group and limited loss ratio tables.
4123-17-06	Private employer contributions to the state insurance fund.
4123-17-19	Employer contribution to the marine industry fund.
4123-17-32	Self-insuring employer assessment based upon paid compensation.
4123-17-36	Administrative cost contribution.

Legislative Actions

H.B. 17 Regards workers' compensation in firefighter cancer claims

Proposed bill would require the BWC to charge compensation and benefits paid from the State Insurance Fund for workers' compensation claims involving firefighters disabled by cancer to the Surplus Fund Account.

In a claim involving a firefighter disabled by cancer where the employer is self-insured, the bill proposes the compensation and benefits payable to the firefighter paid by the self-insured employer would be deducted from the paid compensation reported to the BWC.

H.B. 75 BWC Budget To make appropriations for the Ohio Bureau of Workers' Compensation for the biennium beginning July 1, 2021 and ending June 30, 2023. Reform issues includes are a reduction in the statute of limitations for occupational disease claims from two years to one year, and a provision to prevent claimants who were previously denied permanent and total disability benefits from reapplying absent a change in circumstances.

H.B. 76 IC Budget To make appropriations for the Ohio Industrial Commission for the biennium beginning July 1, 2021, and ending June 30, 2023, and to provide authorization and conditions for the operation of Commission programs.

Judicial Decisions

Supreme Court:

State ex rel. U.S. Tubular Products, Inc. v. Industrial Commission, 2021-Ohio-1174

U.S. Tubular Products, Inc. (“Employer”) appealed to the Ohio Supreme Court from a decision of the Tenth District Court of Appeals (“Tenth District”) seeking a writ of mandamus ordering the Industrial Commission (“Commission”) to vacate its order finding the employer had violated a specific safety requirement (“VSSR”), and that the violation was a proximate cause of the injuries to Claimant. The Supreme Court denied the employer’s appeal, finding some evidence to support the Commission’s decision.

The Claimant sustained a work-related injury on December 10, 2014, when he and another worker were attempting to operate a hydro-tester, which checks pipes for pressure leaks. In operating the hydro-tester, Claimant mistakenly believed the co-worker communicated it was safe to approach the pipe and remove the swage, or cap. Claimant unsafely approached a pressurized pipe and attempted to remove the swage, causing him to suffer extensive injuries when the pipe exploded.

On May 23, 2017, a Staff Hearing Officer (“SHO”) determined the employer failed to comply with Ohio Administrative Code (“OAC”) 4123:1-5-05(D)(1), finding the argument that Claimant was a “test-hand”, and not the operator of the hydro-tester, unpersuasive. Instead, the SHO focused on Claimant’s job duties, and determined he was the second test operator of the pipe under the OAC’s definition of operator in 4123:1-5-01(B)(92). Based upon the fact that Claimant was an operator under the OAC, and that the controls of the machine were located twelve (12) feet from the Claimant at the time of operation, the SHO found the employer violated OAC 4123:1-5-05(D)(1). Finally, the SHO found the employer’s VSSR was the proximate cause of Claimant’s injuries. The Commission granted the employer’s request for reconsideration of the SHO’s order, and determined it did not have authority to exercise continuing jurisdiction.

The employer ultimately appealed to the Tenth District, which referred the case to a magistrate. The magistrate recommended the Tenth District grant Claimant’s requested writ concluding the Commission abused its discretion in (i) determining Claimant to be an operator of the hydro-tester and (ii) finding Claimant’s lack of means

of turning the pipes' power off was the proximate cause of his injuries. In considering whether the Claimant was an operator of the hydro-tester, the magistrate took issue with the Commission's ignoring *State ex rel. Platt v. Diamond Internat'l Corp.* and *State ex rel. Owens-Corning Fiberglass Corp.*¹ The magistrate relied on this case law in holding that the determining factor in the inquiry is not the Claimant's job duties but whether he was authorized to operate the machine. The magistrate then addressed the Commission's finding that Claimant's inability to turn off the hydro-tester's power was the proximate cause of the Claimant's injuries.

Despite objections filed by the Employer, the Tenth District agreed with the Magistrate finding that the Commission relied upon some evidence in determining that the Claimant was an operator of the hydro-tester per OAC 4123:1-5-01(B)(92), as well as in declining to exercise continuing jurisdiction based upon Claimant's status as an operator. The Employer appealed to the Supreme Court was also denied, for the same reasons noted above, finding some evidence to support the Commission's decision.

Tenth District Court of Appeals:

***State ex rel. Lori R. Prater, Relator v. Industrial Commission of Ohio et al., Respondents* 2021-Ohio-1890 (Decision Rendered on June 3, 2021)**

On October 28, 1997, Prater sustained an industrial injury during the course of her employment with CV Materials Ltd. Her workers' compensation claim was allowed for the following conditions: sprain lumbar region; L3-L4, herniated disc; post laminectomy syndrome-lumbar; post-surgical infection at site of spinal cord stimulator; recurrent depressive psychosis-moderate; and psychogenic pain.

On April 11, 2017, Prater filed an application for permanent total disability ("PTD"). Although the commission first issued a tentative order granting PTD compensation, the Staff Hearing Officer ("SHO") later vacated the tentative order after the Administrator for the Ohio Bureau of Workers' Compensation ("BWC") timely objected. On December 7, 2017, the SHO denied Prater's PTD application based on the medical evidence and an assessment of vocational disability factors. The SHO concluded that Prater had capacity to perform sedentary work, and she was qualified by age, education, and work history to obtain and perform work at this level.

On August 21, 2019, Prater filed a complaint for writ of mandamus with the Tenth District Court of Appeals ("Court of Appeals"). A Magistrate with the Court of Appeals recommended a denial of Prater's request for a writ of mandamus indicating

¹ Full citations: *State ex rel. Platt v. Diamond Internat'l Corp. v. Indus. Comm.*, 10th Dist. No. 85AP-979 (Jan. 29, 1987) and *State ex rel. Owens-Corning Fiberglass Corp. v. Indus. Comm.*, 62 Ohio St.2d 145 (1980).

that in order for the court to issue a writ of mandamus, Prater must show a clear legal right to the relief sought, a clear legal duty on the part of the respondent to provide such relief, and the lack of an adequate remedy in the ordinary course of the law, and a court must give deference to the commission's decision as long as that decision is supported by "some evidence."

Prater made several arguments on the basis of due process, but the Magistrate rejected all of them. First, the commission committed no error in granting the interlocutory order as the order complied with the procedure set forth in the Ohio Administrative Code and Memo G3, which indicates that if a party files an objection, a hearing will be held before an SHO. A hearing was held before an SHO.

The court found Prater's second due process argument is meritless. Due process demands a claimant have sufficient notice that an issue has been raised and an opportunity to present evidence on that issue. Prater was provided with notice of the hearing's subject matter; she was made aware that PTD was at issue; and, the medical evidence involved was properly filed in the claim file prior to the hearing. The Magistrate reasoned that this is not a situation in which a completely new issue was determined by the commission without notice to a party, finding the interlocutory order was sufficient to comport with due process.

No objections were filed to the Magistrate's Order, and the Court of Appeals adopted same. If no timely objections are filed, the court may adopt a magistrate's decision, unless it determines that there is an error of law or other defect evidence on the face of the magistrate's decision. The Court's review of the Magistrate's decision reveals no error of law or other evident defect, and ultimately, Prater's request for a writ of mandamus was denied.

State ex rel. Tonia E. Hamilton, Relator v. Industrial Commission of Ohio et al., Respondents 2021-Ohio-1824 (Decision Rendered on May 27, 2021)

On February 16, 2012, Hamilton suffered injuries during the course of her employment with the Franklin County Board of Developmental Disabilities ("BDD") A district hearing officer ("DHO") approved Hamilton's temporary total disability ("TTD") application on June 14, 2017. On August 14, 2017, BDD appealed the DHO's grant of Hamilton's TTD application, and a staff hearing officer ("SHO") hearing was held on the matter.

Meanwhile, due to a workplace disciplinary process initiated regarding Hamilton, her employment was terminated by BDD on December 14, 2016. In a mediation hearing that took place on March 14, 2017, Hamilton agreed to backdate a resignation in lieu of termination with an effective resignation date of December 14, 2016. The August 14 SHO hearing focused on BDD's assertion that Hamilton had voluntarily abandoned her

employment through resignation. Based on this argument, the SHO vacated the DHO's order granting Hamilton a TTD award. Hamilton filed an Appeal with the Tenth District Court of Appeals ("Court of Appeals") requesting a writ of mandamus on August 2, 2019.

The issue before the court of Appeals is whether the Commission's finding of voluntary abandonment is legally supported. The Court in *Klein* created a bright-line rule that would bar TTD in cases of voluntary abandonment, without reference to the claimant's physical ability to work. The Ohio legislature then passed H.B. No. 81, effective September 15, 2019, modifying R.C. 4123.56 which includes the following language: "It is the intent of the general assembly to supersede any previous judicial decision that applied the doctrine of voluntary abandonment to a claim brought under this section." Thus, the issue becomes whether H.B. 81 may be applied retroactively.

The analysis of this issue involves two parts. First, the Court of Appeals must determine as a threshold matter whether the statute is expressly made retroactive. Second, if the statute is expressly retroactive, the Court of Appeals must determine under the Ohio Constitution whether the statute is substantive or remedial and if retroactive application impairs a vested contractual right.

The Magistrate concluded that H.B. 81 did not apply to the present case. First, the first factor is not met because the statute is not expressly retroactive. The statute does not indicate that it must be applied to cases currently under consideration. The absence of the specific language weighs against retroactivity. Even if the statute expressly indicated retroactivity, it would exceed the constitutional limitation when applied retroactively in the present case. An award or denial of TTD affects a substantive right. Thus, under the second factor, the statute cannot be applied retroactively. The Magistrate correctly applied *Klein* and concluded that Hamilton's voluntary abandonment of employment fell within *Klein*'s prohibition on TTD for all cases of voluntary abandonment.

State ex rel. Cuong Le, Relator v. Industrial Commission of Ohio et al., Respondents

2021-Ohio-1169 (Decision Rendered on April 6, 2021)

On December 24, 1998. Le was injured in the course and scope of his employment with Interior Products Company while working as a cabinet maker. Le suffered from a closed fracture right radius with ulna and right carpal tunnel syndrome. Due to the extent of his injuries, Le left his job as a cabinet maker and worked intermittently for approximately 15 years as a manicurist.

On June 12, 2018, Le filed his application for permanent total disability ("PTD") compensation. On December 13, 2018, a Staff Hearing Officer ("SHO") issued an order

denying Le's PTD application based on the finding that Le was capable of sustained remunerative employment at the sedentary level as a manicurist, his former occupation. Le filed appealed to the Tenth District Court of Appeals ("Court of Appeals") requesting a writ of mandamus. The Magistrate determined that the Industrial Commission ("Commission") did not abuse its discretion in denying Le's PTD application, as there was some evidence to rely upon for its conclusion.

Although Le presented objections to the Magistrate's Decision, the Court of Appeals adopted the Magistrate's decision finding that the commission's decision was based on "some evidence." Both the medical evidence and Stephenson factors, (i.e. age, work history, and education) were properly evaluated. Le's request for a writ of mandamus was denied.

State ex rel. Edward W. Mitton, Relator v. Industrial Commission of Ohio et al., Respondents 2021-Ohio-1640 (Decision Rendered on May 11, 2021)

On February 18, 2016, Mitton was injured during the course of his employment with Sunfield, Inc. when his right arm was caught in a die press. The injury resulted in the amputation of his right arm between his right shoulder and elbow. On February 4, 2019, Mitton filed an applicaiton for permanent total disability ("PTD"), which was denied by a staff hearing officer ("SHO") after a hearing on July 25, 2019. On December 5, 2019, Mitton appealed to the Tenth District Court of Appeals ("Court of Appeals") requesting a writ of mandamus.

A Magistrate recommended that this court deny Mitton's request for a writ of mandamus finding that the SHO's Order was based on "some evidence." The relevant inquiry in a PTD determination is the claimant's ability to do any sustained remunerative employment."The threshold issue for the court to determine is whether the commission abused its discretion in denying the PTD application. The court will defer to the commission's decision if the decision was based on "some evidence" supporting a denial of the PTD application.

The SHO's decision was based on (1) Dr. Sadaka's medical report and (2) non-medical disability factors such as Mitton's age, education, and work experience. The Court of Appeals concluded that the Commission did not abuse its discretion in denying Mitton's PTD application. The commission relied on Dr. Sadaka's report which clearly indicated that Mitton "was capable of sedentary work even considering certain limitations on the use of his right-arm prosthesis." Additionally, Dr. Sadaka's report "appropriately considered the limitations imposed by [Mitton's] allowed conditions." Thus, relying on Dr. Sadaka's report satisfied the "some evidence" requirement for the commission's decision.

Safety & Workers' Compensation

Ohio Ends COVID-19 Emergency

June 18, 2021

Gov. Mike DeWine **has announced** that Ohio will end its COVID-19 emergency declaration today, June 18, as cases and hospitalizations continue to decline.

The OMA's general counsel, Bricker & Eckler, **has prepared this memo** to summarize what the end of the emergency means for manufacturers.

In short, while many of the state orders that impacted manufacturers — such as masking requirements — were rescinded earlier this month, today's move could affect manufacturers in some narrow aspects such as government procurement. (**Read the memo** for details.)

The firm advises manufacturers to continue to follow best practices where possible — and adhere to relevant **CDC** and **OSHA** guidance or other federal protocols as appropriate. *6/18/2021*

Study: Ohio Workers' Comp Costs Among Most Competitive in U.S.

June 18, 2021

Ohio employers pay, on average, the 12th lowest workers' compensation premium rates in the U.S. That's according to an **updated study** by the Oregon Department of Consumer and Business Services, which regularly compares the workers' comp premium rates of all 50 states and D.C. Ohio improved four spots from 2018.

Over the years, the OMA has worked hard to champion policies and practices that lower workers' comp costs. Last year, Ohio's index rate of \$1.11 per \$100 of payroll was 77% of the U.S. median, according to the study. If your company is not using OMA Workers' Compensation Services, **learn how** the OMA can help with your workers' comp responsibilities. *6/15/2021*

OSHA Initiative Aims to Protect Hearing of Midwest Manufacturing Employees

June 18, 2021

OSHA has established a **Regional Emphasis Program** (REP) to raise hearing protection awareness among Midwest manufacturers. According to a **news release**, the REP's initial phase will include educating employers about **hearing conservation**, while encouraging the use of OSHA's free consultation services to implement noise safety strategies.

Following a three-month outreach period, OSHA personnel will be authorized to inspect manufacturing facilities in Ohio, Illinois, and Wisconsin with hearing loss rates higher than the U.S. average.

This is the perfect time to register for the **OMA's July 1 webinar** on OSHA's hearing protection requirements and noise-related health risks. **Learn more.** *6/15/2021*

Industrial Commission to Resume In-Person Hearings

June 18, 2021

The Ohio Industrial Commission will return to in-person hearings effective July 6. According to the commission's **website**, parties and their representatives will still have the option to appear and participate by Webex. At this time, it is unclear whether in-person attendance at hearings will become mandatory. *6/16/2021*

Key BWC Dates and Opportunities

June 18, 2021

Here are some upcoming key BWC dates and opportunities for OMA members:

- **June 21:** Private employer **first installment due.**
- **June 22:** Virtual training — effective safety teams, half-day **workshop.**

- **June 24:** Employer update **webinar**.
- **June 28:** MCO open-enrollment changes become effective.
- **June 30:** Deadline for **Industry-Specific Safety Program** loss prevention activities and **SH-29** forms.
- **June 30:** Deadline for 2020 two-hour training.
- **July 1:** Start of 2021 policy year.
- **July 1:** Private employer payroll true-up period begins.
- **July 1:** Private employer **early-payment discount**.

Employers should note that their true-up must be completed by Aug. 15. *6/17/2021*

Drug Tests Show Marijuana Use Continues to Increase, Raising Workplace Safety Concerns

June 18, 2021

OMA Connections Partner *Working Partners*® has published **this summary** of a large-scale analysis of drug test results that identify trends in the U.S. workforce. The study found that despite a decrease in positivity rates for many substances, the double-digit increase in marijuana positivity rates kept overall rates at historically high levels.

In states that allow recreational use, marijuana positivity surged 118.2% from 2012 to 2020 (2.2% in 2012 versus 4.8% in 2020). In states with only medical marijuana statutes, such as Ohio, marijuana positivity increased 68.4% (1.9% versus 3.2%). *6/15/2021*

OSHA Updates COVID-19 Workplace Guidance

June 11, 2021

OSHA has released **new guidance** in response to the CDC's recently revised recommendations

for vaccinated and unvaccinated workers. OSHA says the guidance is to help employers protect workers who are still not vaccinated.

In case you missed it, here's the **June 10 edition** of the *OMA's COVID-19 Update*, which includes a summary of OSHA's new guidance. *6/10/2021*

Resources for National Safety Month

June 11, 2021

June is **National Safety Month**. (For manufacturers, every month is safety month, of course.) Now is a good time for members to check out the **Bureau of Workers' Compensation's resources** that help employers create a safe and healthy workplace.

National Safety Month is also a great time to review the OMA's on-demand safety webinars (recorded for members' convenience).

The **OMA's online video library** offers more than two dozen webinars conducted by the experts at OMA Connections Partner Safex. *6/9/2021*

BWC True-Up Begins July 1

June 11, 2021

Beginning July 1 — in less than three weeks — the Bureau of Workers' Compensation (BWC) will require Ohio employers to reconcile their actual payroll for the prior policy year, as well as any differences in premium paid.

If your business has not already done so, the BWC is encouraging employers to review their payroll estimates for the current policy year to avoid surprises in the amount they might owe on premiums. **Here are the details.** *6/9/2021*

COVID-19 Health Orders Have Been Lifted – What's Next for Ohio Employers?

June 4, 2021

Gov. Mike DeWine has lifted Ohio's COVID-19 health orders, but employers still have questions regarding what's next when it comes to safety protocols and managing vaccinated and unvaccinated employees. Thursday, June 10, from 11 a.m. to noon, OMA Connections Partner Fisher Phillips will host a free webinar to discuss topics such as:

- the future of masking;
- proof of vaccination and tracking vaccine status;
- anti-retaliation and anti-harassment; and
- understanding CDC, EEOC, and OSHA guidance under Ohio laws and regulations.

Learn more and register. *6/3/2021*

BWC Budget Wins Senate Approval

June 4, 2021

This week, the Ohio Senate unanimously approved **House Bill 75**, the two-year, \$715 million operating budget of the Bureau of Workers' Compensation's (BWC). The measure, **supported by the OMA**, contains noteworthy reforms, including a reduction in the statute of limitations for occupational disease claims from two years to one year, and a provision to prevent claimants who were previously denied a permanent disability benefit from reapplying unless there's a change in circumstances.

HB 75 now goes back to the House, which will consider the Senate's changes.

Also this week, Gov. Mike DeWine signed **House Bill 76**, the Ohio Industrial Commission budget. *6/2/20*

OMA Testifies in Support of BWC

Budget Bill

May 28, 2021

The OMA **testified this week** in support of the Bureau of Workers' Compensation's (BWC) proposed two-year operating budget, **House Bill 75**. The House added several noteworthy reforms to the bill that have OMA's support, including:

- Reducing the statute of limitations for occupational disease claims from two years to one year;
- Preventing claimants who were previously denied a permanent

disability benefit from reapplying unless there is a change in circumstances; and

- Aligning permanent partial disability filing timelines for temporary total disability compensation and for claims where wages are paid in lieu of compensation.

The BWC budget bill is expected to be voted out of the Senate Insurance Committee next week and will head to the Senate floor shortly thereafter. *5/27/2021*

BWC Studying Mutualizing COVID-19

Claim Costs

May 28, 2021

This week, the Bureau of Workers' Compensation's (BWC) Actuarial Committee had a first reading of a **proposed rule change** to exclude COVID-19 claims costs from an employer's experience rating calculation.

An executive summary provided by the bureau noted that experience rating is intended to measure an employer's success in maintaining a safe workplace. Further stating that using COVID-19 claims as an indicator of safety and a predictor of future claims is unreliable and that when catastrophes (e.g. a pandemic) arise, they generally have been excluded from the experience rating process.

Here's a **snapshot of COVID-19 claims** filed with the BWC from March 11, 2020 to May 17, 2021. *5/27/2021*

MCO Open Enrollment Closes Today – Not Too Late to Switch!

May 28, 2021

The open enrollment period for Ohio employers to select a new managed care organization (MCO) to oversee the medical management of workers injured on the job closes today, Friday, May 28.

OMA's only endorsed MCO for manufacturers is **Health Management Solutions (HMS)** due to

its best-in-class return-to-work scores. The return-to-work score — which is **measured and reported by the Bureau of Workers' Compensation** — is the most important metric as it measures an MCO's record of safely returning workers to duty.

It's **not too late to switch**. Any claims will be smoothly transitioned on June 28. Contact OMA's **Crissy Roach** with questions. *5/28/2021*

BWC Industry-Specific Safety Program Changes Coming July 1

May 28, 2021

The BWC's Division of Safety and Hygiene (DSH) has modified the **Industry-Specific Safety Program (ISSP)** — a program to encourage employers to use the DSH's array of safety services in exchange for a 3% credit — effective July 1.

Following a DSH safety and health consultation, the employer will now complete DSH follow-up activities before the end of the program year to earn loss prevention activity credits. Follow-up activities may include responding to a DSH action plan or completing a post-training survey. Previously, employers completed a post-consultation survey (SH-29). *5/21/2021*

BWC Enhances Transitional Work Program

May 28, 2021

The Bureau of Workers' Compensation (BWC) has enhanced its Transitional Work Grant (TWG) program for employers that actively participate in the recovery and return to work of their employees.

Beginning June 1, employers are eligible for a TWG every five years (instead of only one time). The 3:1 grant match reimbursement requirement has been removed. Grant reimbursement is now 100% of the submitted invoice up to the employer's maximum awarded grant, which is based on number of employees.

Unused grant monies are referred to as Implementation Funds and are available to use until the grant expires. Implementation funds can be used to purchase services needed to facilitate the transitional work program, including health and safety services related to COVID-19.

Learn **more here** or **email the BWC transitional work unit**. *5/21/2021*

A Plug for BWC's No-charge Electrical Safety Services

May 28, 2021

According to a recent BWC blog post, in 2019, there were 166 fatalities and 1,900 injuries requiring days away from work in the U.S. related to electrical injuries. There were three electrocutions in Ohio last year, an increase from previous years. The majority of electrical fatalities occur in construction and maintenance.

BWC's Division of Safety and Hygiene (DSH) offers no-charge resources to help employers improve electrical workplace safety, including educational courses, safety talks and consulting. **Check it out**. *5/25/2021*

OSHA Finalizes 'Top 10' Citations List

May 21, 2021

OSHA recently published its "**Top 10 Most Frequently Cited Standards**" for 2020. The annual list is a good reminder for employers and managers to re-evaluate their workplace safety practices. Meanwhile, OSHA also recently updated its **enforcement summary** for 2020.

If you haven't already, **register now** for the OMA's June 3 safety webinar, "Preventing Falls: Ladders, Walking/Working Surfaces, and More." *5/18/2021*

Weighing Your Options With New Mask Guidance

May 21, 2021

Masking policies are changing fast and furiously following the CDC's revised guidance. OMA Connections Partner Safex **has published this update** on what employers need to know to navigate the change. Safex notes that employers have the right to follow CDC guidelines or not.

Also, check out this "**seven-step blueprint for a maskless workplace**" from OMA Connections Partner Fisher Phillips. *5/18/2021*

Light Duty Can Be a Useful Claim Management Strategy

May 21, 2021

OMA general counsel Bricker & Eckler has posted **this insight** regarding the utility of light duty when managing a workers' compensation claim. A proper light-duty job offer is a safe and strategic way of returning an employee to work while also saving in claim costs. Ohio workers' compensation laws provide that a light duty job offer can prevent or terminate temporary total disability (TTD) compensation, but it must be done properly.

Consult with an OMA workers' compensation **account manager** for specific advice. *5/17/2021*

Take Steps to Protect Workers from Extreme Heat

May 21, 2021

OSHA this week reminded employers that they are responsible for protecting workers from temperature extremes and should establish a heat illness prevention program if workers are exposed to conditions that can cause heat illness. **Learn more here.** *5/18/2021*

Industrial Commission Budget Sent to Governor

May 21, 2021

The Ohio Industrial Commission's two-year, \$109.6 million operating budget (**House Bill 76**) was approved by the Senate this week. The measure is now before Gov. Mike DeWine for his consideration. The Industrial Commission budget — which funds the operations of the adjudicating body that resolves disputed workers' compensation claims — is considered the simplest of the four operating budgets. Financing of the commission comes through employer assessments. *5/19/2021*

CDC Lifts Indoor Mask Guidelines for Fully Vaccinated People

May 14, 2021

On Thursday, May 13, the CDC announced **new guidance** that **fully vaccinated people**, for the most part, no longer need to wear masks indoors. The agency also said fully vaccinated

people don't have to wear masks outdoors, even in crowded spaces.

The revised guidelines say fully vaccinated people **must still wear a mask** in health care settings, transportation hubs such as airports and stations, and public transportation. That includes planes, buses, and trains. *5/13/2021*

House Advances Workers' Comp Budget

May 14, 2021

The House this week approved its version (**House Bill 75**) of the \$715 million budget for the Ohio Bureau of Workers' Compensation (BWC). HB 75 contains notable reforms, including moving the statute of limitations for occupational diseases to one year from two years, aligning it with that for injuries and preventing claimants who were previously denied a permanent disability benefit from reapplying unless there is a change in circumstances.

During floor debate, the House rejected an amendment that would have extended traditional workers' comp coverage to first responders with PTSD and without an accompanying physical injury. Also defeated was an amendment to define COVID-19 as an occupational disease for first responders and food service workers.

Last year, the BWC — funded 100% by Ohio employers — provided coverage to 249,000 employers, approved 71,519 new injury claims, and paid \$1.35 billion in wage loss and medical benefits, according to a report by Gongwer News Service. The BWC has issued \$9.2 billion in dividends to employers since 2019, while reducing rates on several occasions. Claims numbers are down about 25% over the last year. *5/14/2021*

Busy Time of Year for BWC Policy Management

May 14, 2021

This is a busy time of year for managing your Bureau of Workers' Compensation (BWC) policy. Here's a recap of upcoming key dates:

- May 3 – May 28: **MCO open enrollment.**
- May 15: Last day to change installment schedule for policy year 2021 (begins July 1). **Contact BWC or log into your policy.**
- May 28: Application deadline for **Drug-free Safety Program (DFSP), Industry-Specific Safety Program (ISSP), and Transitional Work Bonus Program.**
- May 31: Deadline for **Policy Activity Rebate (PAR)** program participants to complete requirements.
- June 1: First invoice sent for policy year 2021.
- June 21: First installment payment due for policy year 2021.
- June 30: Safety-compliance deadline for employers participating in a group plan and that had a claim between July 1, 2018 and Sept. 30, 2019. Attend two hours of safety training or complete BWC's online accident analysis form and course.
- July 1: Policy year 2021 starts.

Also in June, BWC will send a reminder to true-up your payroll for the 2020 policy year. Payroll true-up starts on July 1 with a deadline of August 16.

If you have questions about anything workers' comp, contact your **account manager** or **Brian Jackson**. We're happy to help. *5/12/2021*

OMA Endorses HMS as MCO for Manufacturers

May 7, 2021

The Ohio Bureau of Workers' Compensation (BWC) is offering Managed Care Organization (MCO) open enrollment this month. But why does your choice of MCO matter?

A primary role of the MCO is to provide medical management of workplace injuries or illnesses. Therefore, it makes sense to work with the MCO with the best record of safely returning workers to duty while controlling costs that affect billed premiums.

Health Management Solutions (HMS) is the only OMA-endorsed MCO. HMS has the **best-in-class return-to-work performance**, according to the BWC's **2021 MCO Report Card** (and six of the last seven report cards). It's simple to switch to HMS and have your claims expertly managed. Just **click here** or **here**. Claims will be smoothly transitioned to HMS effective June 28.

Open enrollment only occurs every two years; the current open enrollment period ends May 28. Choosing an MCO costs nothing and your choice of MCO doesn't affect any relationship you may have with a workers' compensation third-party administrator or your group discount participation.

Contact your OMA **account manager, Brian Jackson**, or **Crissy Roach** if you have questions. *5/7/2021*

OSHA to Host Pandemic Safety Summit (Virtually)

May 7, 2021

OSHA will host an online summit May 10-13 to address workplace safety during COVID-19. There is **no cost to register** for this event, which is titled "Building a Safer Future – Workplaces During the Pandemic." *5/6/2021*

BWC Publishes 2021 MCO Report Card

April 30, 2021

The open enrollment period for Ohio employers to select a managed care organization (MCO) to oversee the medical management for workers

injured on the job begins this Monday, May 3 and continues through Friday, May 28.

While there are no out-of-pocket costs to **elect an MCO**, the choice of an MCO is important since it allows employers to direct quality medical management on behalf of their workers. Find details in the BWC's **MCO Selection Guide** and new **BWC MCO Report Card** — an objective source of information that summarizes each MCO's performance in quality of medical management, return-to-work strategies, and timeliness of service. MCO changes will be effective June 28. *4/29/2021*

BWC Videos on Hazard Communication Training April 30, 2021

The Ohio Bureau of Workers' Compensation (BWC) has produced a four-part micro-video series — only 3-5 minutes each — on hazard communication training. The videos cover the following areas:

- **Intro to basic hazard communication;**
- **Safety data sheets;**
- **Hazard communication training requirements;** and
- **Secondary labeling for hazardous chemicals.**

The BWC has also created a **training guide** and **knowledge assessment** to help employers verify competence and document training. *4/27/2021*

BWC Maintains Healthy Reserve at \$7.6 Billion April 30, 2021

Gov. Mike DeWine has **reappointed** three members of the Ohio Bureau of Workers' Compensation (BWC) board whose terms expire in June.

Meanwhile, during the BWC's April 22 board meeting, the agency reported a drop in revenue from \$958 million a year ago to \$768 million in March 2021 due to the **reductions in premium**

rates. The BWC's net position was still \$7.6 billion in March, according to Hannah News Service. *4/26/2021*

BWC Sees Reduced Prescriptions, Pharmacy Costs April 30, 2021

The Bureau of Workers' Compensation (BWC) **reports** the number of injured workers receiving prescription drugs, including opioids, continued to fall in 2020, as did the overall cost of the BWC's pharmacy program. The number of injured workers receiving a prescription dropped 16% compared to 2019, while the number receiving opioids dropped 18%. The BWC's expenses for prescriptions dropped 28%. *4/27/2021*

Employers: Get Ready for True-Up April 30, 2021

With the true-up period opening in about 60 days (July 1), the Bureau of Workers' Compensation (BWC) is encouraging Ohio employers to review their payroll estimates for the current policy year to avoid surprises in the amount they might owe on premiums. **Get the details here.** *4/27/2021*

OMA Webinar: Aging Workforce and Ergonomics April 30, 2021

At 10 a.m. Thursday, May 6, the OMA will host a webinar addressing older workers and ergonomics. Presented by OMA Connections Partner Safex, this learning event will examine preventative measures that should be part of your workplace safety program, as well as the benefits of a well-planned return-to-work program. **Learn more and register.** *4/28/2021*

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Contact your OMA **account manager, Brian Jackson, or Crissy Roach** if you have questions. *5/7/2021*

OSHA to Host Pandemic Safety Summit (Virtually)

May 7, 2021

OSHA will host an online summit May 10-13 to address workplace safety during COVID-19. There is **no cost to register** for this event, which is titled "Building a Safer Future – Workplaces During the Pandemic." *5/6/2021*

Webinar: OSHA Updates and the Possible ETS

April 30, 2021

OMA Connections Partner Dinsmore will host a **free webinar** Wednesday, May 5 to address important health and safety concerns for employers — specifically, how to stay in compliance should OSHA issue an Emergency Temporary Standard during COVID-19. Topics will include updated requirements for employers and vaccination dilemmas. *4/29/2021*

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April 30, 2021

Gov. Mike DeWine has **reappointed** three members of the Ohio Bureau of Workers' Compensation (BWC) board whose terms expire in June.

Meanwhile, during the BWC's April 22 board meeting, the agency reported a drop in revenue from \$958 million a year ago to \$768 million in March 2021 due to the **reductions in premium rates**. The BWC's net position was still \$7.6

billion in March, according to Hannah News Service. *4/26/2021*

BWC Sees Reduced Prescriptions, Pharmacy Costs

April 30, 2021

The Bureau of Workers' Compensation (BWC) **reports** the number of injured workers receiving prescription drugs, including opioids, continued to fall in 2020, as did the overall cost of the BWC's pharmacy program. The number of injured workers receiving a prescription dropped 16% compared to 2019, while the number receiving opioids dropped 18%. The BWC's expenses for prescriptions dropped 28%. *4/27/2021*

Employers: Get Ready for True-Up

April 30, 2021

With the true-up period opening in about 60 days (July 1), the Bureau of Workers' Compensation (BWC) is encouraging Ohio employers to review their payroll estimates for the current policy year to avoid surprises in the amount they might owe on premiums. **Get the details here.** *4/27/2021*

ODH Updates COVID-19 Guidance for Manufacturers

April 23, 2021

The Ohio Department of Health recently updated **Ohio's safety guidance for manufacturers** based on the DeWine administration's consolidated public health orders. The guidance points out that masks are required, with some exceptions, while making recommendations on employee arrivals, shift patterns and physical spacing. *4/19/2021*

OSHA's COVID-19 ETS Officially on Hold

April 23, 2021

Weeks after President Joe Biden's March 15 deadline, a U.S. Labor Department spokesperson recently told **Bloomberg Law** that the issuance of a COVID-19 Emergency Temporary Standard (ETS) is on hold at the request of Secretary Marty Walsh. **According** to OMA Connections Partner Roetzel, Walsh wants OSHA to evaluate the newest information from the CDC regarding the

state of vaccinations and coronavirus variants. *4/22/2021c*

DOL to Solicit Public Input on OSHA Whistleblower Program

April 23, 2021

The U.S. Department of Labor will hold a teleconference meeting May 19 to solicit public comments and suggestions on key issues facing OSHA's Whistleblower Protection Program. Those interested in joining or participating in the meeting must register by May 12. Written or electronic comments must also be submitted by May 12. **Learn more.** *4/21/2021*

New Appointment to Ohio Industrial Commission

April 23, 2021

Gov. Mike DeWine has appointed Daniel Massey of Columbus to the **Ohio Industrial Commission**, the three-member adjudicating body for employers and employees with disputed workers' compensation claims. Massey is an attorney with Murray Murphy Moul & Basil LLP, where he practices in the area of government affairs. His term begins July 1 and ends June 30, 2027. *4/22/2021*

Biden Taps California Safety Chief to Lead OSHA

April 16, 2021

The White House recently announced that President Biden will nominate Doug Parker, chief of California's Division of Occupational Safety and Health (Cal/OSHA), to serve as assistant secretary of labor for OSHA.

Parker helped craft California's broad COVID-19 enforcement initiative, which compared to parallel regulations in other states is considered the most burdensome for employers. This as the Biden administration has made it clear that they intend "double the number of OSHA investigators." **Read more** from OMA Connections Partner Fisher Phillips. *4/14/2021*

Online Training: PPE Selection & Documentation

April 16, 2021

Individuals responsible for hazard assessment of the workplace and the selection of required

personal protective equipment (PPE) for eyes, face, head, feet, and hands should consider registering for a **free virtual training event** offered by the Bureau of Workers' Compensation.

Among other things, the April 28 event will provide instruction on how to perform a workplace assessment to determine if PPE is needed; criteria for selecting appropriate PPE; and information on the documentation needed for OSHA compliance. 4/14/2021

Webinar: Engaging Millennials in Workplace Safety

April 16, 2021

On April 20, the Bureau of Workers' Compensation will host a **free webinar** to discuss how best to train, educate, and reinforce safety principles for the millennial generation. The webinar will also discuss best practices in engaging other age groups within your workforce. 4/15/2021

BWC Computer Systems, Phones Down This Weekend

April 16, 2021

Employers should note that all Bureau of Workers' Compensation computer services, including phones, will be unavailable statewide this Saturday, April 24, due to scheduled maintenance. All functionality will be restored by Monday morning, April 26. 4/14/2021

What Does Your Policy Say About Alcohol?

April 16, 2021

What are your business' guidelines on alcohol consumption? OMA Connections Partner *Working Partners*® says that simply relying on the best judgment of your employees could be a liability for your company. **This video** points out some common situations that your business may want to include in its rules. 4/14/2021

Nearly Half of Ohio's COVID-19 Workers' Comp Claims Have Been Denied

April 9, 2021

Nearly 3,600 Ohio employees have filed workers' compensation claims saying that they contracted COVID-19 while on the job, according to the **latest summary** provided by the Bureau of Workers' Compensation (BWC). The bulk of these claims (2,385) have been filed by health care employees and first responders.

As of March 31, more than 1,650 of these claims had been rejected, denied or dismissed, according to the BWC. The agency notes that communicable diseases like COVID-19 are generally not workers' compensation claims because people are exposed in a variety of ways, and few jobs have a hazard or risk of getting the diseases in a greater degree or a different manner than the general public. 4/8/2021

Summary of Ohio's Consolidated COVID-19 Health Order

April 9, 2021

In case you missed it, the OMA's general counsel Bricker & Eckler **has produced this summary** of the DeWine administration's **consolidated COVID-19 health order**, issued earlier this week.

While the consolidated order likely presents no new impacts to daily operations for Ohio manufacturers, OMA members are encouraged to review this brief memo, which, among other things, summarizes the order's requirements on masking, social distancing, sanitizing, and reporting COVID-19 cases.

The memo notes that the administration plans to re-issue industry-specific guidance, including for manufacturers. 4/8/2021

Webinar on Demand: Lockout/Tagout – Meeting the OSHA Regulations

April 2, 2021

Here is a **webinar recorded this week** (and **handouts**) that covers lockout/tagout considerations for:

- Training your authorized and affected employees;
- Developing equipment-specific energy isolation procedures; and
- Conducting a periodic lockout/tagout audit.

The subject matter expert is **Brian Basbagill** a Certified Safety Professional with OMA Connections Partner Safex. The webinar has 60 minutes of content followed by 15 minutes of Q&A. *4/1/2021*

Check Out BWC’s Calendar of Safety Events

April 2, 2021

The Bureau of Workers’ Compensation (BWC) offers a robust schedule of no-charge safety training events and webinars. Click the image to scan the options. For your convenience, this image/link is always in the sidebar of OMA’s *Leadership Briefing*. *4/1/2021*



BWC Updates COVID-19 FAQs

March 26, 2021

The Ohio BWC has updated its **COVID-19 FAQs**, which includes several questions from employers. New questions include topics such as sick/family paid leave under the American Rescue Plan (Question 25) and why self-insured

employers did not receive BWC dividends (Question 29). *3/25/2021*

OMA Members Hear From BWC Leader
March 19, 2021

This week, the OMA’s Safety and Workers’ Comp Committee held its first meeting of 2021 via Zoom.

Chaired by Matt Shurte, general counsel for **Lancaster Colony Corp.**, the meeting featured a visit from **John Logue**, interim administrator of the Ohio BWC. Logue said the BWC had approved more than 800 COVID-19-related claims worth approximately \$2.25 million, but that claims had recently fallen to an average of five to seven per day compared to 70 to 80 per day earlier this winter. He also said the BWC could allow claims of employees who are required to get COVID-19 vaccinations as a condition of employment if those employees experience adverse reactions.

Other presenters included public health expert Martin Tremmel, who reviewed **COVID-19-related considerations for employers** as vaccines become more widely available.

The **next committee meeting** is set for June 22. *3/17/2021*

Be Prepared for OSHA’s COVID-19 Inspection Program

March 19, 2021

Last Friday, March 12, OSHA **announced** it was launching a “**national emphasis program**” to focus its inspection efforts on companies that are failing to properly implement COVID-19 precautions, as well as businesses that retaliate against employees for filing complaints.

OMA Connections Partner Fisher Phillips has published new insight to provide **five steps for employers** to prepare for more COVID-19-related OSHA inspections this spring and summer. *3/17/2021*

Workers' Compensation Legislation
Prepared by: The Ohio Manufacturers' Association
Report created on June 21, 2021

- HB17** **WORKERS' COMPENSATION IN FIREFIGHTER CANCER CLAIMS** (PATTON T) Regarding charging workers' compensation experience in firefighter cancer claims.
Current Status: 3/10/2021 - House Insurance, (First Hearing)
State Bill Page: <https://www.legislature.ohio.gov/legislation/legislation-summary?id=GA134-HB-17>
- HB75** **ENACT FY22-23 WORKERS' COMPENSATION BUDGET** (OELSLAGER S) To make appropriations for the Bureau of Workers' Compensation for the biennium beginning July 1, 2021, and ending June 30, 2023, to provide authorization and conditions for the operation of the Bureau's programs, and to make changes to the Workers' Compensation Law.
Current Status: 6/10/2021 - Consideration of Senate Amendments; House Does Not Concur, Vote 34-60
State Bill Page: <https://www.legislature.ohio.gov/legislation/legislation-summary?id=GA134-HB-75>
- HB76** **ENACT FY22-23 INDUSTRIAL COMMISSION BUDGET** (OELSLAGER S) To make appropriations for the Industrial Commission for the biennium beginning July 1, 2021, and ending June 30, 2023, and to provide authorization and conditions for the operation of Commission programs.
Current Status: 6/2/2021 - **SIGNED BY GOVERNOR**; eff. July 1, 2021
State Bill Page: <https://www.legislature.ohio.gov/legislation/legislation-summary?id=GA134-HB-76>
- HB311** **EXPAND EEG/ TMS PILOT PROGRAM** (GHANBARI H, MILLER A) To expand the Electroencephalogram (EEG) Transcranial Magnetic Stimulation (TMS) Pilot Program and to make an appropriation.
Current Status: 5/19/2021 - Referred to Committee House Finance
State Bill Page: <https://www.legislature.ohio.gov/legislation/legislation-summary?id=GA134-HB-311>
- SB66** **CAREER PATHWAYS APPRENTICE PROGRAM** (WILLIAMS S) To establish a career pathways apprentice program.
Current Status: 3/10/2021 - Senate Workforce and Higher Education, (First Hearing)
State Bill Page: <https://www.legislature.ohio.gov/legislation/legislation-summary?id=GA134-SB-66>
- SB69** **NONCREDIT CAREER-TECHNICAL PROGRAMS** (WILLIAMS S) Regarding noncredit career-technical programs at community colleges and state community colleges.
Current Status: 3/24/2021 - Senate Workforce and Higher Education, (First Hearing)
State Bill Page: <https://www.legislature.ohio.gov/legislation/legislation-summary?id=GA134-SB-69>
- SB153** **TMS PILOT PROGRAM** (HOAGLAND F) To expand the Electroencephalogram Transcranial Magnetic Stimulation Pilot Program and to make an appropriation.
Current Status: 6/16/2021 - Referred to Committee House Finance
State Bill Page: <https://www.legislature.ohio.gov/legislation/legislation-summary?id=GA134-SB-153>