

Request For A Rotating Physician Or Chiropractor

State of Nevada - Department of Business and Industry - Division of Industrial Relations - Workers' Compensation Section
Fax: 702-486-8713 Email Questions to MedUnit@business.nv.gov

EXAMPLE

Body Part Code

Injury Side

fax

Subject: Incomplete/Inaccurate D-35

Date: March 3, 2020

To:

Phone Number:

Fax Number:

Re: Claim #:

The DIR Workers' Compensation Section received the attached D-35. Upon review, we are unable to process your request for the following reasons:

- Missing Information -
- Missing written agreement signed by TPA and injured employee/legal representation
- Missing letter of representation
- Missing previous PPD information
- Claim has not been indexed. Resubmit D-35 with TK number once the claim has been entered into CARDS, if it's already been indexed resubmit D35 with Tk #.
- Please UPDATE claim indexed in CARDS, then resubmit the D35 with the Tk #.

*****When resubmitting D35, please update the Request date to current date.**

Thank you,



Workers' Compensation

EMAIL ENROLLMENT REQUEST

The email enrollment form below allows you to sign up for email notification of the latest quarterly newsletter releases, upcoming trainings, and regulation changes, along with regulation hearings and workshops you can attend.

In addition, you may use this form to change your current contact information or be removed from our email database.

NEW SUBSCRIBER **UPDATE** **REMOVAL REQUEST**

PLEASE TYPE OR PRINT CLEARLY

Business Name:
Contact Name (First & Last):
Email Address:

CHECK THE **ONE** CATEGORY, WHICH BEST DESCRIBES YOUR BUSINESS

- Medical** **Third-party Administrator** **General – Employee/Employer** **Vocational Rehabilitation**
- Association** **Self-Insured** **Private Carrier** **Legal**

**PLEASE FILL OUT THE FORM ON THE WCS WEBSITE OR
EMAIL, MAIL OR FAX THIS COMPLETED FORM TO:**

Workers' Compensation Section (WCS)

Attn: Education Research & Analysis Unit
3360 W. Sahara Ave., Suite 250
Las Vegas, Nevada 89102

Fax: (702) 486-8712
Email: krissi.garcia@dir.nv.gov
<https://hal.nv.gov/form/DIRnvgov/>
[EMAIL ENROLLMENT REQUEST](#)

RULES FOR CLAIMS INDEXING

Claim Number* – must contain letters and numbers only.
The claim number search is an exact match. For claim number changes the insurer/TPA is required to notify WCS to convert claim numbers prior to any updates.

Claim Type* – Medical only or Lost Time. ****NOTES:** Use Medical Only for denied claims.

INJURED EMPLOYEE INFORMATION

First Name*
M.I.
Last Name*
Gender*
Date of Birth*
Zip Code*
Undocumented Injured Employee* - For use only for undocumented workers. (Not available in flat file option.)
Injured Employee SSN*

CLAIM INFORMATION

Date of Injury/Date of Disablement* - Use date of injury for NRS 616 claims and date of disablement for NRS 617 claim

Date C4 Received by Insurer/Claims Admin* - Must be on or after Date of Injury.

Date Accepted/Denied* - Must be on or after Date C4 Received.

Accepted* - **yes/no.** Accepted claims must have at least one accepted body part.

Type of Loss* - NRS 616- Traumatic Injury, NRS 617 – Occupational Disease, Cumulative Injury (Other than Disease).

Catastrophic – yes/no. refer to NRS 616A.077

Nature of Injury* - see addendum 2 in Indexing Manual

Cause of Injury* - see addendum 3 in Indexing Manual

Permanent Impairment Percentage – whole body

Death Date – Only if the injured worker is deceased otherwise leave blank (Death Result of Injury will also be required.)

Death Result of Injury – leave blank unless Death Date is completed. (Required with Death Date)

Benefit Type – see addendum 4 in Indexing Manual

Benefit period start date

Benefit period through date - For Lump Sum Payout use the same date as start date.

RELATED ENTITIES

EMPLOYER
Employer Name*
Employer FEIN* - Employers is matched on FEIN.
Address Line 1*
Address Line 2
City*
State*
Postal Code*
Phone*
INSURER* - Populated based on chosen insurer.
TPA – Only Linked TPAs will be listed.

CLAIM CLOSED/REOPENED

Date Closed - *Required with NRS Close Code and Total Cost at Closure

NRS Close Code – NRS 616C.235_(1) or (2) Claim amounts over \$800 must use section (1) *Required with Date Closed and Total Cost at Closure

Total Cost at Closure – per NAC 616B.707 *Required with Date Closed and NRS Close Code.
Claim closures will not be accepted on DENIED claims. Accepted claims cannot have a \$0 cost.

Reopen Effective Date

Reopen Request Date - *Required with Reopen Effective Date.

Reopen Decision Date - *Required with Reopen Effective Date.

Reopen Decision - *Required with Reopen Effective Date.

PRIVATE CARRIER INFORMATION* (private carriers only)

Policy Effective Date*
Policy Expiration Date*
Policy Number* - must contain only letters and numbers.
Policy information must match what is reported to NCCI. Submitters can verify policy information at <https://www.ewccv.com/cvs>

INJURY INFORMATION

Body Part* - See addendum 5 in Indexing manual

REJECTED CLAIMS

The external user cannot change the CLAIM NUMBER, EMPLOYER, INSURER, or POLICY NUMBER fields. If they do not match, the claim will be rejected.



All claims are required to be reported to WCS pursuant to NRS 616B.018. WCS offers 2 methods for insurers to comply with this requirement.

CLAIMS INDEXING REPORTING METHODS

FLAT FILE

Insurers/TPAs are welcome to develop and use the flat file format at any time. Once your Flat File development is complete, WCS will test the file to ensure it is working correctly. Once the file passes testing you will be provided with log-in information and instructions to our FTP site.

WEB PORTAL

The CARDS portal launched April 2017. Insurers/TPAs using the portal have seen an increase in accepted claims indexing submissions from 20% to over 90%. Indexing rules built into the system allow users to submit and update claims with ease and accuracy. Insurers/TPAs also maintain their contacts and user permissions in CARDS and can obtain useful reports based on claims information submitted.

REPORTING TRIGGERS

INITIAL REPORTS:

Within 30 days of:

- ⇒ Claim Determination (Acceptance or Denial of Claim)

UPDATES:

Within 30 days of any of the following:

- ⇒ Benefit Start Date, End Date or Type Change (TTD, TPD, PPD, Rehab, PTD)
- ⇒ Change in claim determination (Denial to Acceptance or vice versa)
- ⇒ Claim Type change (Med Only to Lost Time/Indemnity)
- ⇒ Change to/from catastrophic claim status
- ⇒ PPD rating and award acceptance or ordered with appeals exhausted
- ⇒ Claim reopening
- ⇒ Injured employee death
- ⇒ Any correction to or update of the Injured Employee's information including name, gender, birthdate, SSN, employer, etc.
- ⇒ Any correction to or update of the claim information including claim number, date of injury, nature of injury, cause of injury, type of loss, body parts involved, etc.
- ⇒ Claim closure

**DIRECT CLAIMS INDEXING
QUESTIONS TO:
INDEXING@business.nv.gov**

CLAIMS INDEXING STATUTORY BACKGROUND

NRS 616B.018 requires the Administrator of the Division of Industrial Relations to "...establish a method of indexing claims for compensation that will make information concerning the claimants of an insurer available to other insurers and the Fraud Control Unit for Industrial Insurance established pursuant to [NRS 228.420](#)."

Additionally, NRS 612.265(10) requires DIR to periodically submit to the Nevada Department of Employment, Training and Rehabilitation (DETR) a list containing the name of each person who received workers' compensation benefits from the information in the index of claims established pursuant to NRS 616B.018.

IMPORTANT REMINDER:

**REQUESTS FOR RATING
PHYSICIANS (D-35) CANNOT BE
PROCESSED UNLESS THE CLAIM
HAS BEEN INDEXED IN CARDS.**



CLAIMS INDEXING (D-38)

*CLAIMS AND REGULATORY
DATA SYSTEM*

WORKERS' COMPENSATION



<https://CARDS.nv.gov>

Email us at:
INDEXING@business.nv.gov

PUBLISHED BY:
STATE OF NEVADA
DEPARTMENT OF BUSINESS AND INDUSTRY
WORKERS' COMPENSATION SECTION

*This pamphlet is provided to inform stakeholders of
some significant points concerning workers'
compensation insurance in Nevada.*



NEVADA WORKERS' COMPENSATION CHRONICLE

Department of Business & Industry
A Publication of the Workers' Compensation Section

Division of Industrial Relations Fall Edition
(September -November 2020)

This newsletter is not intended to provide legal advice to the reader. Legal opinions or interpretations of statutes and regulations referenced should be sought from legal professionals.

Insurers' Provider Lists Due Soon

An approaching due date can certainly induce stress. Not all stress is bad though, as it can move us forward to complete an important project. In that manner, WCS respectfully reminds stakeholders of the October 1 deadline for all workers' compensation insurers in Nevada to submit their list of treating physicians and chiropractors to the Division of Industrial Relations (DIR) Workers' Compensation Section (WCS) for posting on the WCS website. This requirement originates from Nevada Revised Statutes (NRS) 616C.087(6) which states, in part:

Each insurer shall, not later than October 1 of each year, update the list of physicians and chiropractors and file the list with the Administrator. The list must be certified by an adjuster who is licensed pursuant to [chapter 684A](#) of NRS.

There are several important aspects of this mandate that may cause confusion. The first question is who must submit provider lists to WCS. Insurers are mandated to submit their provider lists and they will be posted on the WCS website by insurer name. Insurers includes private carriers, self-insured employers and associations of self-insured employers. If an insurer contracts with multiple third-party administrators (TPAs) using different provider lists, the insurer must submit a provider list for each of their TPAs. Each insurer will be listed on the WCS website with their TPAs listed below. Users will click on the TPA name to access the appropriate provider list. TPAs will not be listed apart from the insurer. Self-insured employers will be listed separately, and associations will also be listed separately.

The next question is exactly what must be included in the provider lists posted on the WCS website. Do they need to encompass all health care providers contracted with an insurer? Insurers' provider lists do not necessarily need to include all providers contracted with the insurer. NRS 616C.087 references treating physicians and chiropractors. The WCS Treating Panel of Physicians and Chiropractors is limited to providers licensed as MDs, DOs or DCs. The statute does not address other licensed health care providers that may be contracted with insurers to perform medical services.

Insurers should be aware there are some different requirements for the WCS Treating Panel and insurer provider lists. For instance, insurers' lists must be certified by an adjuster licensed pursuant to NRS 684A. County information is also necessary for insurers to meet specific requirements in NRS 616C.087(4). County information is available for providers listed on the WCS Treating Panel.

What if an insurer's treating provider list does not meet the statutory requirements? Insurers are responsible to ensure their lists comply with all pertinent requirements. If an insurer's list does not comply with the requirements, an injured employee may choose a treating physician or chiropractor from the WCS Treating Panel [NRS 616C.087(5)].

What format is required for insurers' provider lists? The only requirement is that insurers submit their lists in an ADA-compliant PDF format. WCS will post insurers' provider lists as they are submitted to WCS, noting the date each list is received.

(continued on page 2)

Victoria Carreon Appointed Division of Industrial Relations Administrator



Victoria "Tori" Carreon is the new Division of Industrial Relations Administrator. Tori has dedicated her career to public service and has worked at government agencies at the state, county, and city level. She has worked for three State Legislatures (Nevada, California, and Wisconsin) and two city governments (City of Las Vegas and City of Los Angeles). She has also worked on education policy at the San Diego County Office of Education and the Guinn Center for Policy Priorities. Most recently, she worked as an Administrative Officer for the City of Las Vegas. She has a BA from Stanford University and a Master's Degree in Public Policy from the University of California – Berkeley. To give back to the community, Tori volunteers for Public Service NV, a nonprofit that inspires CCSD high school students to do public service projects. When she is not at work, Tori enjoys cooking, yoga, and playing the piano.

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CARDS NEWS

WCS is pleased to announce our most recent CARDS updates, many of which are designed to streamline and improve user experience. Comprehensive instructions are available on our website, but here is a short description of the changes to be aware of:

Home Page Improvements:

- *More information about affiliated insurers/TPAs at your fingertips* – look under your insurer and TPA headers for useful information, such as: FEIN; Company ID; NCCI Carrier Code; Certificate of Authority, License, and NAIC numbers; effective, expiration and certification dates; and workers' comp status.
- *Claim numbers now display for all submitted D-38s* – on the Claim Submissions table, regardless of claim status (Pending, Rejected, or Corrections Required).

D-38 Claim Submission Options:

- *Resubmitting a "Rejected" claim is easier than ever* – start by opening the claim in the Claim Submissions table, then click "Create New Claim," select the insurer, and the new claim will appear with data from the previously rejected form pre-filled (just make sure to review all fields for accuracy).
- *Declutter Claim Submissions by deleting "Rejected" claims* – just open in the Claim Submissions table and click "Delete" (but if you wish to use the information to create a new one, make sure to do that first).

New Session Timeout Features:

- *Never get logged out without knowing again* – a warning now pops up after 15 minutes of inactivity in CARDS; if no action is taken in the next 5 minutes, the system times out and returns you to the login page.

Insurer & TPA Information Form Updates:

- *Include a "WC Safety Fund Assessment Contact" on the Insurer Information Form* – to assist the Nevada Dept. of Business & Industry with maintaining and providing accurate, up-to-date information related to insurer assessments.
- *More accurate expiration dates for insurer/TPA relationships* – when a "Relationship Expiration Date" is set, TPAs can now access the insurer's claim submissions until midnight on the day the relationship expires.
- *Add submitter information when updating the TPA Information Form* – to streamline communications during form processing.

Keep an eye out for even more CARDS updates coming later this month, including: improved accuracy in report calculations, ability to save and track the status of Insurer/TPA Information Forms, new D-38 gender options, \$0 cost FTP claim submissions, and insurer/TPA relationship effective dates displayed on your homepage.

Questions about CARDS?

CARDS@dir.nv.gov For general questions, issues with login, registration, account activation and permissions.

indexing@dir.nv.gov For questions and issues relating to Claims Indexing (D-38) processing, including web portal and flat file submissions, and Claim History Reports.

Insurers' Provider Lists Due Soon

(continued from page 1)

Some large insurer groups own multiple insurance companies that are distinct and separate entities. Each of these separate insurance companies must submit a separate provider list to WCS. Additionally, insurers must be careful to provide their full legal name on provider lists submitted to WCS.

How do insurers submit their treating provider lists to WCS? All insurers' provider lists should be submitted via email to medpanels@dir.nv.gov. Paper or hardcopy lists will not be accepted. To ensure provider lists are easily identified, please note in the subject line the insurer name and that the email contains a treating provider list.

It is not possible to review all the requirements involving insurers' provider lists in a newsletter article. WCS strongly encourages all interested stakeholders to review all applicable portions of NRS 616C.087.

Katherine Godwin, BSN, RN, Chief Medical Unit, Workers' Compensation Section



State Contractors Board Programs Help Contractors Navigate Licensing Process Before Starting Work In Nevada

As residential, commercial, and public works projects regain momentum in Nevada, the State Contractors Board (NSCB) stands ready to help construction businesses obtain the appropriate licensure to legally perform work in the state. Among the licensing assistance offered, the NSCB makes several programs available to applicants aimed to expedite the application process and help navigate licensure requirements in Nevada.

First time applicants in Nevada are encouraged to participate in the NSCB's Business Assistance Program (www.nscb.nv.gov/BAP.html); a virtual two-hour presentation held via Zoom on the fourth Friday of every month that provides a detailed overview of the contractor license application. A seasoned licensing analyst walks applicants through key licensure requirements, including how to obtain a Nevada Business ID, experience and financial documentation, examination requirements, bonds and assessments, as well as sharing helpful tips, resources, and pitfalls to avoid.

For contractors who have an active license in another state, the NSCB offers a License by Endorsement Program that may allow qualified applicants the ability to request endorsement of trade exam(s) and/or experience requirements. Published on the Board's website (www.nscb.nv.gov), applicants can review the Board's State Equivalency Chart, which lists states recognized by Nevada for having substantially similar trade exam and/or experience requirements. Specific license classifications recognized by Nevada will be outlined in the chart, allowing applicants to quickly determine if they meet the criteria to request endorsement of one or both of these licensure requirements.

Recognizing the sacrifices made by our state and nation's service members, the NSCB also offers a Veteran and Military Assistance Program (www.nscb.nv.gov/MAP.html), which is available to active service members, veterans, and military spouses. In support of initiatives directed by Nevada's Governor, this program connects current and former service members with a licensing analyst who specializes in reviewing and transferring military training, education, and experience to meet Nevada's contractor licensing requirements and expedite the application process.

Once licensure has been obtained, licensees have access to a variety of online services, which the Board is regularly working to expand. Among these services, contractors have the ability to renew their license online and make changes to business information, such as change of address or contact information. The NSCB has also revised certain requirements for existing contractors looking to expand their licensure classifications to help streamline the application process.

There are over 16,400 actively licensed construction entities across the state, and the NSCB is proud to serve every one of them. Each licensee is responsible for adhering to the statutory and regulatory expectations outlined in Nevada Revised Statute and Nevada Administrative Code Chapter 624, helping reinforce the importance licensure plays on the protection of the public's health and safety; a cornerstone of the NSCB's mission.

A Nevada licensed contractor is held accountable to every governing authority that may regulate the construction industry. Serving as a public protection agency, the NSCB has a dedicated Enforcement Department that responds to and investigates all complaints against licensed and unlicensed contractors the Board receives. The investigative process may determine the validity of alleged violations, order corrective action when necessary, and/or provide a path for recourse and discipline in the event a licensed contractor does not comply with the Board's orders.

Collaborating with local and state agencies is one of the vital aspects of the Board's investigative process to best protect the public's health, safety, and welfare. NRS 624.3011 authorizes the Board to take disciplinary action against a licensee who willfully disregards or violates the state's building laws, safety or labor laws, or laws regarding industrial insurance. When violations are alleged, the Board relies on adjudicated information from partnering agencies that demonstrates the contractor violated laws outside the Contractors Board jurisdiction.

As an example, NRS 624.256 requires licensees to provide proof of industrial insurance coverage and mandates the Board to summarily suspend the license if a contractor fails to demonstrate compliance with industrial insurance laws within 30 days of being notified by the NSCB.

These united efforts demonstrate support for Nevada's construction industry and serve to promote the integrity of Nevada's hardworking, law-abiding contractors. As you consider joining Nevada's construction workforce, know the NSCB is available to answer any questions you may have and welcomes the opportunity to help you become a licensed Nevada contractor.

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2310 Corporate Circle, Suite 200
Henderson, NV 89074
(702) 486-1100

Northern Nevada Office
5390 Kietzke Lane, Suite 102
Reno, NV 89511
(775) 688-1141

Margi Grein, Executive Officer, Nevada State Contractors Board



Why are we wearing face coverings?

On June 25, 2020, the Governor of Nevada issued Emergency Directive 024. This directive mandated that all employees and citizens, unless exempted by the directive, shall utilize a face covering when in public. A “face covering” is defined as a covering that fully covers a person’s nose and mouth, including without limitation, cloth face masks, surgical masks, towels, scarves, and bandanas. The directive does not require the use of masks rated as surgical grade, N95 or KN95.

The reason for the mandate is that current evidence suggests that COVID-19 is most commonly spread by respiratory droplets, especially when people cough and sneeze, entering through the eyes, nose, and mouth, either directly or by touching a contaminated surface. The risk of contracting COVID-19 is reduced when both the infected person, and those around them, are wearing a face covering. COVID-19 is highly contagious and, while the science is not yet definitive we are learning more each day, facial coverings reduce the chance of transmission and protect everyone against infection.



The main role of a face covering is to reduce the release of infectious particles into the air when a person speaks, coughs, or sneezes. While no one single intervention offers complete protection, when combined with proper handwashing, social distancing and staying home when sick, face coverings can reduce the spread of COVID-19 in communities.

Research is still being conducted on whether improvised facial coverings prevent exposure to COVID-19, but it has been established that face coverings can reduce the spread of the virus from infected symptomatic and asymptomatic individuals.

People can be contagious before the onset of symptoms. Proper coverage of the nose and mouth is a critical component in decreasing the risk of spreading or contracting COVID-19.

People who are asymptomatic or pre-symptomatic can spread the virus and, when combined with social distancing and other preventative measures, face coverings can offer additional protection to the public. Face coverings protect both the wearer and individuals the wearer may interact with either directly or indirectly while in a public space.

Bob Harris, Consultation Supervisor, SCATS

COVID-19 Workers' Compensation Claims

In response to COVID-19, new codes were added to the acceptable codes for reporting D-38 Claims Indexing data to allow WCS to better track claims relating to the virus. The new codes Nature of Injury: 83 - COVID-19 and Cause of Injury: 83 – Pandemic, were added in March 2020 and may be used for reporting applicable claims December 2019 or later. The codes correspond to those adopted by the Workers' Compensation Insurance Organizations (WCIO) and are used by the International Association of Industrial Accidents Boards and Commissions (IAIABC). By adopting these codes for D-38 Claims Indexing reporting, Nevada may be able to, over time, compare COVID-19 claim data with other states that use the IAIABC standard.

Nevada claims submitted and processed in CARDS that include one or both COVID-19 identifiers, through August 31, 2020:

COVID-19/Pandemic Claims	Count	Percent
Filed/Processed in CARDS	341	
Accepted	133	39.0%
Denied	208	61.0%

PTD and Survivors' COLA Reimbursement

Beginning January 1, 2020 and every January 1 thereafter, all Permanent Total Disability (PTD) and Survivors' Benefits Claims are entitled to receive an annual increase of 2.3% to their monthly benefit rate. The amount that is a result of the COLA (the amount of the increase) is paid by the insurer but may be reimbursable depending on the date of injury or occupational disease disablement:

- PTD Claims: dates of injury or occupational disease disablement prior to January 1, 2004
- Survivors' Benefits Claims: dates of injury or occupational disease disablement prior to July 1, 2019

To be considered for reimbursement by the DIR, eligible claims must be submitted to DIR/WCS for one-time verification of correct AMW/Monthly Rate calculation. **Due to the volume of claims affected, DIR/WCS strongly urges insurers planning to request reimbursement to submit AMW/Rate Verification for applicable claims as soon as possible but not later than December 31, 2020 to avoid processing delays.** Visit our website for instructions, forms and FAQs: <http://dir.nv.gov/WCS/Insurers/>. Direct questions to: COLAS@dir.nv.gov.

Reporting Reminders

The 2020 quarterly editions of the Reporting Reminders column will feature detailed information on one reporting requirement and the ins and outs of that requirement. We hope to address some of the commonly asked questions and give you some guidance on how to avoid errors, follow up requests for clarification and report rejection.



Fiscal Year (FY) Claims Activity Report/Statement of Inactivity

Background:

The [FY WCS Workers' Compensation Claims Activity Report](#) and [Statement of Inactivity](#) is clearly the most detailed and comprehensive data call we require of insurers. Although each insurer's individual data is kept confidential, the data in aggregate is valuable to DIR/WCS as it is the only source of claims expenditure data we collect. The data is used to monitor costs associated with various benefits, compare relative costs year-over-year, answer questions from the public and other government entities within and outside the state, respond to legislative questions and requests for data, respond to industry surveys and provide analysis of the effects of new legislation.

The report is organized in 7 Parts: Claims Information, Compensation Expenditures, Medical Expenditures, Rehabilitation Expenditures, Recoveries, Summary and Identification Information, with detail information requested for each part. Because of its many uses, new line items may be added or existing line items may change slightly from year to year to enable DIR/WCS to best track the workers' compensation system. For instance, changes to the Nevada Medical Fee Schedule may result in reporting category changes or additions in Part 3 – Medical Expenditures. New legislation may result in new claim count categories in Part 1 – Claims Information and Part 2 – Compensation Expenditures.

Requirement:

- ◆ Statutory Requirement: NRS 616B.009 and NAC 616B.016
- ◆ Effective: 1979 (amended in 1981, 1993, 1995)
- ◆ Who Must Report: All insurers current and former (private carriers, self-insured employers, and associations of self-insured employers)
- ◆ Failure to Report: May result in administrative fines pursuant to NAC 616D.415(1)(d) and (2)

Method of Reporting:

- ◆ NOT reported in the CARDS portal
- ◆ Forms and instructions are located on the WCS website on the [Insurer-TPA Reporting](#) Information page
- ◆ ***FY__ Claims Activity Report*** – submitted if insurer has claims activity during the fiscal year, OR
- ◆ ***Statement of Inactivity*** – submitted only if no claims activity during the fiscal year
- ◆ The forms and instructions remain on the website until updated the next year with the new forms.
- ◆ Email forms to wcsra@dir.nv.gov as attachments

Reporting Frequency:

- ◆ Annually, for the previous fiscal year ending June 30
- ◆ DIR/WCS will email insurers and TPAs when report forms and instructions are available on the website
- ◆ Due 45 calendar days from the email request, generally during the last quarter of the calendar year

Common Mistakes:

- ◆ **Not completing the Identification Information Section at the end of the report** - We need to know which insurer the report is for and who is submitting it in case we have questions. Submitters should include accurate contact information in case WCS has to follow up.
- ◆ **Reporting late/not communicating** – Make sure you submit either the *Statement of Inactivity* or *FY__ Claims Activity Report* form by the due date to avoid possible fines. If you run into problems and don't think you will be able to meet the deadline, you may request a short extension by emailing wcsra@dir.nv.gov.
- ◆ **Submitting BOTH the *FY__ Claims Activity Report* forms AND the *Statement of Inactivity*** - submit one form OR the other. You cannot have activity and no activity for the same year!
- ◆ **Submitting incomplete reports** – make sure all fields are completed. Do not leave cells blank! Enter '0' for line items with no activity to report.

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Reporting Reminders

(continued from page 5)

- ◆ **Reporting expenditures that are not considered “claims expenditures”** – claims expenditures are covered in NAC 616B.707. Do not report administrative costs as defined in NAC 616B.707.
- ◆ **Reporting conflicting information** – While DIR/WCS does not have the resources to audit each report submitted, we do perform reasonableness checks for each report and will require corrections or additional information from the submitter if necessary. For instance, if you reported in Part 1 paying death benefits to 5 claimants during the fiscal year, you should have death benefit expenditures reported in Part 2 – Compensation Expenditures. If you reported paying Rehab benefits on 2 claims in Part 1, you should have reported rehabilitation expenditures in Part 4. Review your report for accuracy before submitting.
- ◆ **Submitting multiple reports for the same insurer** - Insurers must ensure that reporting is done timely and accurately. If an insurer uses more than one TPA or changes TPAs during the year, the insurer is responsible for ensuring that the annual report reflects the activity for the entire year. **DIR/WCS will not accept multiple reports for the same insurer.** The reports will be rejected, and the insurer will be required to submit one, aggregate report representing their activity for the year.
- ◆ **Not asking questions** – This is a detailed and extensive data call. Please ask questions if you are unsure about how to report. We are happy to answer your questions if it results in getting more accurate data. Email your questions to wcsra@dir.nv.gov.



General Reporting Information:

Information on reporting requirements and forms can be found on our website at <http://dir.nv.gov/WCS/Home/> under “Insurer and TPA Reporting” or go directly to our page at http://dir.nv.gov/WCS/Insurer-TPA_Reporting/. Contact the WCS Research and Analysis Unit by phone at (702) 486-9080 or by email at wcsra@dir.nv.gov if we can be of any assistance.

FY 2021 Maximum Compensation Guidelines Posted



The state's maximum average monthly wage memo for fiscal year 2021, effective July 1, 2020, has been posted on the WCS web site. The FY 2021 maximum monthly disability compensation is \$4,183.82, an increase from last year's figure.

The FY21 Maximum Compensation Guidelines memo is located on the “Important Changes” page which is accessed via the link under “What’s Hot!” on the WCS home page. The link provides a chart with Maximum Compensation rates going back to FY 1975.

<http://dir.nv.gov/uploadedFiles/dirnv.gov/content/WCS/ImportantDocs/Max%20Comp%20FY21%20Memo%20Signed.pdf>

FY 2021 Actuarial Annuity Table Posted

Victoria Carreon, Administrator of the Division of Industrial Relations, adopted the Actuarial Annuity Table for fiscal year 2021, effective July 1, 2020.

The table has been posted on the WCS web site and can be found under “What’s Hot!” on the WCS home page.

<http://dir.nv.gov/uploadedFiles/dirnv.gov/content/WCS/ImportantDocs/WCS%20Actuarial%20Annuity%20Table%207.1.20-6.30.21%20signed.pdf>

Pursuant to NRS 616C.495(5), the table must be reviewed annually by a consulting actuary.

WCS remains closed to the public but is providing services and will observe these holidays

Labor Day
Monday, September 7, 2020

Nevada Day (Observed)
Friday, October 30, 2020

Veterans Day
Wednesday, November 11, 2020

Thanksgiving
Thursday, November 26, 2020

Family Day
Friday, November 27, 2020

CONTACT WCS

Department of Business and Industry
 Division of Industrial Relations
 Workers' Compensation Section

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 (702) 486-9080 / Fax: (702) 486-8712

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 (775) 684-7270 / Fax: (775) 687-6305

<http://dir.nv.gov/WCS/Home/>

WCSHelp@dir.nv.gov

Direct comments or suggestions about this newsletter to:

Workers' Compensation Section
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Ruth Ryan, Editor
Krissi Lowry, Assistant Editor
 (702) 486-9105

rryan@dir.nv.gov
krissi.garcia@dir.nv.gov



W e l c o m e

Hails and Farewells and Promotions

Congratulations!

After 34 years of State service, **Debbie Atkinson** retired August 28, 2020. Debbie worked in the Workers' Compensation Section for 16 years. Her previous positions for the State include Administrative Assistant in the Immunization Program for Health and Human Services, Provider Relations Supervisor for Employers Insurance Company of Nevada (formally known as State Industrial Insurance System (SIIS)), Medical Payment Section Supervisor, and several years of processing medical bills for SIIS claims. She will greatly be missed by WCS!



2020 Training Sessions


The following classes will be taught online via **Webex**

WCS Basic Orientation
 October 15, 2020 at 9:00 am
 October 15, 2020 at 1:30 pm

Delving into the D-35
 October 28, 2020 at 9:00 am

C-4 Process & Using CVS
 November 4, 2020 at 9:00 am

Medical Billing
 November 4, 2020 at 1:30 pm



To view or register for classes
<http://dir.nv.gov/WCS/Training/>

Or email
krissi.garcia@dir.nv.gov

CARDS
 Claims and Regulatory Data System

<<Click here to login or register>>

Questions about Workers' Compensation?
 Click Here!



WCSHelp@dir.nv.gov

Office for Consumer Health
 has moved:

3320 West Sahara Avenue, Suite 100
 Las Vegas, NV 89102
 Phone (702) 486-3587
 Fax (888) 333-1597
 Email Cha@govcha.nv.gov



WCS MISSION STATEMENT

The purpose of the Workers' Compensation Section is to impartially serve the interests of Nevada employers and employees by providing assistance, information, and a fair and consistent regulatory structure focused on:

- Ensuring the timely and accurate delivery of workers' compensation benefits.
- Ensuring employer compliance with the mandatory coverage provisions.