



Workers'
Compensation
Board

MOVING FORWARD: IMPROVEMENTS AT THE BOARD

FREIDA D. FOSTER, CHAIR
STEVEN M. SCOTTI, EXECUTIVE DIRECTOR

NYSIA ANNUAL MEETING – JANUARY 15, 2026

FREIDA D. FOSTER

- About me
- Changes at the Board
- My priorities moving forward



MY PRIORITIES AS CHAIR



Support the Governor's initiatives



Strengthen stakeholder communications



Continue our OnBoard modernization efforts



Further improve the claimant experience



HELP PEOPLE & do no harm



WORKING FOR NEW YORK

STEVEN M. SCOTTI, EXECUTIVE DIRECTOR

RFA-2: ELECTRONIC SUBMISSION MANDATE COMING SOON

Request for Further Action by Insurer or Employer (Form RFA-2)



- Requests are received and routed in seconds.
- Effective date will be announced at least four weeks in advance. (Electronic mandate for *RFA-1LC* was implemented in Dec. 2024)
- Once implemented, the electronic *RFA-2* can be submitted in eCase via an eForm (or via accepted XML filing) that is immediately validated and placed in electronic case folder.
- The Board will not accept paper after the effective date.
- Substantial outreach continuing with future webinars planned.

AVERAGE TIME TO HEARING FROM RFA REQUEST DATE

FORM	YEAR	YEAR	% DECREASE
	2024	2025	
RFA-1LC	66 days	37 days	<u>44</u> %
RFA-1LCx	49 days	36 days	<u>27</u> %
RFA-2	63 days	38 days	<u>39</u> %
RFA-2x	40 days	31 days	<u>23</u> %

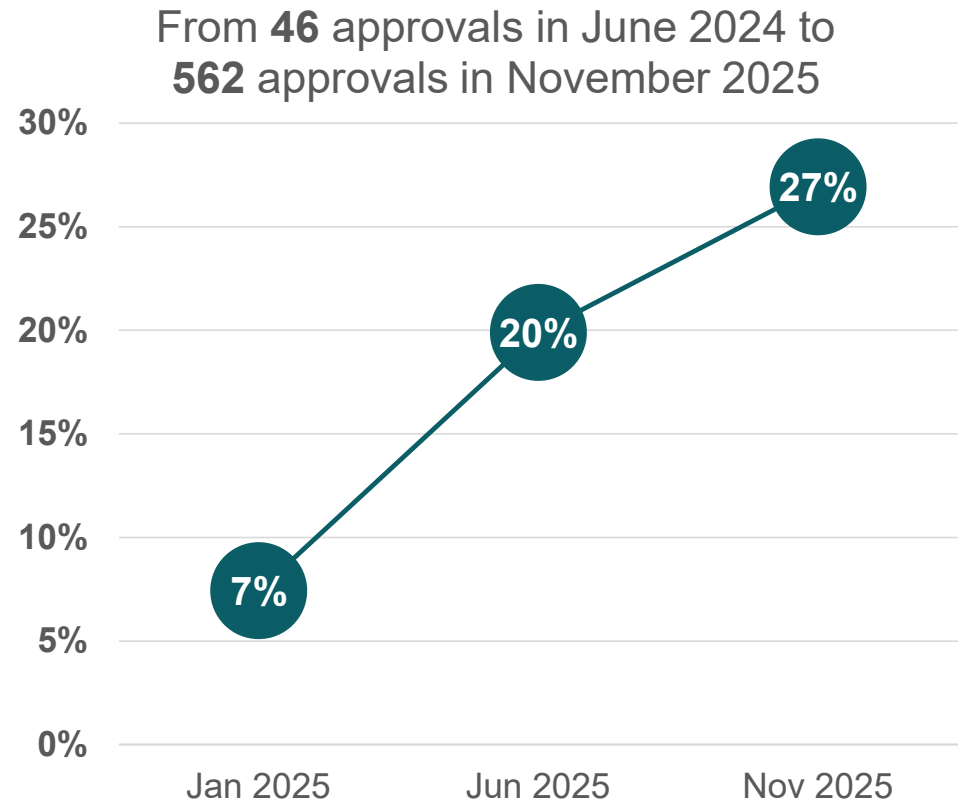
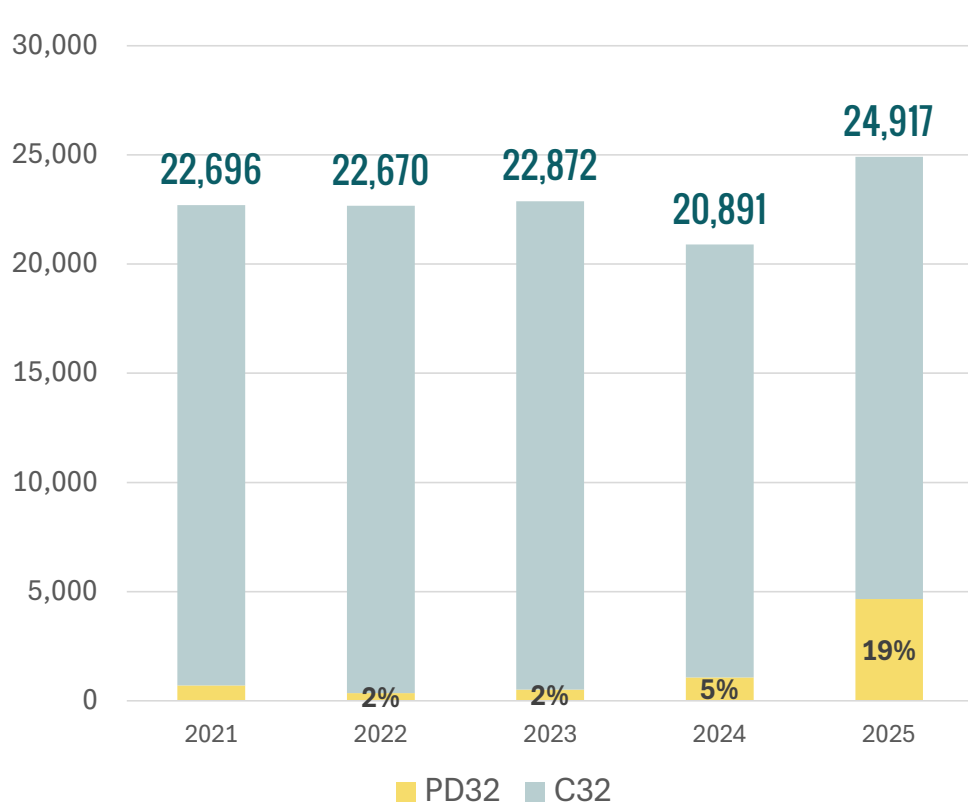
SECTION 32 WAIVER AGREEMENTS

Expansion of desk reviews in 2025

- Starting January 6, 2025, the Board expanded the desk review process to settlement amounts of **\$25,000 or less**, including medical and indemnity.
- Parties continue to be able to consent to desk reviews for any settlement amounts, including medical and indemnity, by simply checking the “consent” box on the *Waiver Agreement - Section 32 WCL (Form C-32)*.
- Section 32 waiver agreements are approved much faster via desk review versus having a hearing.



SECTION 32 AGREEMENTS: APPROVALS BY YEAR

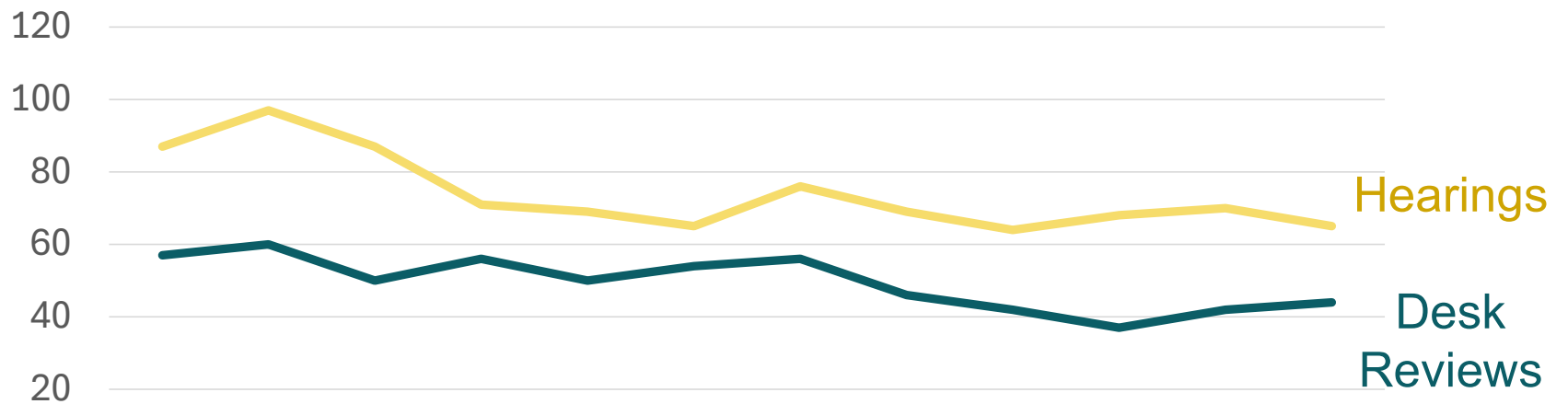


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SECTION 32 AVERAGE PROCESSING TIME FOR 2025

How long does it take from “Incoming Mail Received” until “Section 32 Resolution Duly Filed”?

Hearing (EC-32.3) vs. Desk Review (PD-32)



	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
— PD32 days	57	60	50	56	50	54	56	46	42	37	42	44
— C32 days	87	97	87	71	69	65	76	69	64	68	70	65

— PD32 days — C32 days

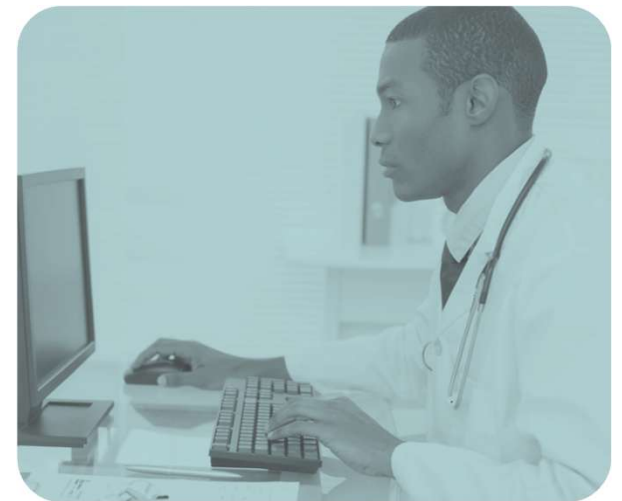
NOW IN EFFECT: NETWORK PHARMACY OPT-OUT REGULATION

- **Effective July 11, 2025**, payers must notify claimants they can use non-network pharmacies when the payer has a legal objection to medications for unaccepted injuries/conditions and **there is a refusal to dispense**.
- If the claimant goes out-of-network and medication is found compensable, a surcharge will apply to payment.
- Failure to give notice under the regulation can lead to a penalty.
- Regulation addresses the problem for claimants in non-controverted cases who are unable to get medication from their pharmacy network due to a legal objection.
- The Board's regulation cited in Governor Hochul's Dec. 5, 2025, veto to opt-out pharmacy legislation.



NOW IN EFFECT: CMS-1500 ELECTRONIC SUBMISSION MANDATE

- **Effective August 1, 2025**, medical providers must submit the *CMS-1500* universal medical billing form electronically through a Board-approved XML submission partner.
- This brings significant efficiencies:
 - Bill review process and payment expedited.
 - Providers receive payments much more quickly.
 - Electronic receipt eliminates receipt disputes.
 - Providers are notified of billing errors quickly, allowing for prompt resubmission.
 - Quality control and data analytic enhancements.
 - No or low cost to providers (e.g., \$1 billing code)
 - Reduced paper for all.



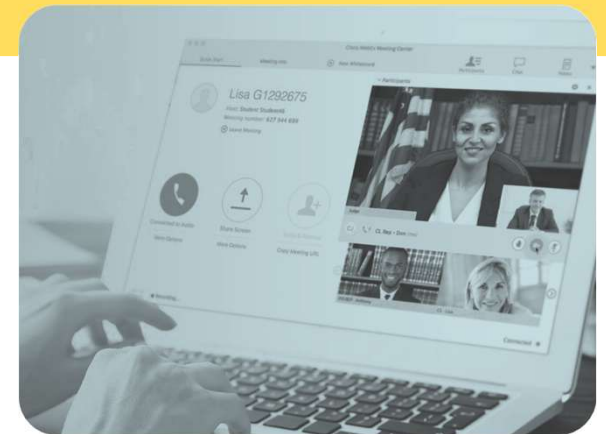
NOW IN EFFECT: C-8.1B NOTICE OF LEGAL OBJECTION

- Effective January 5, 2026:
 - Payers using the *Notice of Objection to a Payment of a Bill for Treatment Provided (Form C-8.1B)* must provide a detailed explanation of their objections to bills for medical treatment in boxes 12 and 20 within Section C, Objection Reasons-Legal and Medical Treatment Guidelines (including applicable MTG reference codes).
 - Failure to provide explanation can result in denial of the objection.
- Explanation of benefits (EOB) replaces form use for:
 - Bill not payable due to Section 32 settlement.
 - Bill not payable due to third-party settlement.
 - Name of the claimant is incorrect.
- Updated *CARC/RARC guidance for form use
 - * *Claim Adjustment Reason and Remittance Advice Remark codes*



SUBJECT NUMBER 046-1784: ON-CAMERA REQUIREMENT FOR SCHEDULED TESTIMONY

- **Starting February 2, 2026**, all represented claimants and lay witnesses scheduled to testify in virtual hearings must testify by video. This requirement will be in Board hearing notices beginning January 8, 2026.
- Claimant's attorney is responsible for ensuring their client testifies at a virtual hearing by video; failure to do so may result in a penalty being assessed against counsel.
- Attorney and party are responsible for ensuring that their lay witness testifies at a virtual hearing by video; failure to do so may result in witness preclusion and a penalty being assessed against the attorney or party.
- Unrepresented claimants who cannot appear at a virtual hearing by video because they lack access to necessary technology may be permitted to testify at the scheduled hearing by telephone.



PROPOSED REGULATIONS IN STATE REGISTER FOR PUBLIC COMMENT

■ Medical Fee Schedule

- Phase one of the Medical Fee Schedule update published in the State Register 1/14/26.
- Phase one updates all of our CPT codes and reimbursement rates for the nine major evaluation and management (E&M) codes.
- Proposed updates for phase two are planned before year-end.

■ Fellows and Residents regulations published in the State Register 1/7/26.

■ Depositions regulations to be published in the State Register on 1/21/26.

- Addresses Court of Appeals decision in *Matter of Lazalee*, 40 NY3d 458 (2023) — “If the Board concludes that the WCLJ should have discretion under those circumstances, it is within the Board’s power to amend its rules”



COMING IN 2026: REGULATIONS FOR WCL § 21-a

- **Workers' Compensation Law Section 21-a payment** without liability provisions extended to medical-only claims. The legislative amendment was enacted in Governor Hochul's budget last year and is effective January 1, 2027.
- **Subject Number 046-1787** was issued on January 9, 2026, announcing amendment and forthcoming regulations to WCL Section 21-a.
- Runway needed to comply with IAIABC publication requirements and to give payers notice that for dates of accident on or after January 1, 2027, an Agreement to Compensate of null for "Medical-Only" claims will no longer be accepted once 21-a acceptance without liability goes into effect (which also avoids indexing of claim).
- Payers should review the eClaims Trading Partner table changes posted on the Board's eClaims webpage and update their systems accordingly.



GOVERNOR HOCHUL'S 2026 STATE OF THE STATE INCLUDES UNIVERSAL AUTHORIZATION FOR WC MEDICAL TREATMENT PROVIDERS


- Governor Hochul delivered the State of the State address on Jan. 13, 2026.
- The Universal Authorization proposal for WC treating providers is back!
 - Immediate access to more medical providers.
 - About 10% of New York eligible providers licensed and in good standing currently participate in the workers' compensation system.
 - Most New Yorkers have a primary care provider, but if they are injured on-the-job, they often must search for a new provider disrupting continuity of care by a provider they already trust.
 - Opens access up to providers in rural areas.
 - The Board authorization process is duplicative of other State agencies, and the Board will still regulate providers and maintain an exclusion list.



GOVERNOR HOCHUL'S 2026 STATE OF THE STATE INCLUDES PROVISION TO FIGHT WORKERS' COMPENSATION FRAUD

- Creates WCB competitive grant program to fund District Attorney Offices to prosecute workers' compensation fraud.
 - Funded by Section 151 Assessment.
 - Funds used by District Attorney offices to establish and staff dedicated workers' compensation fraud units.
 - Eliminates existing resource constraints on prosecutions and creates a dedicated and knowledgeable workforce.
 - WCB administers program.
 - Office of the Workers' Compensation Fraud Inspector General continues its role investigating WCL violations.



A sunset over the ocean with a teal border. The sun is partially obscured by clouds, and the sky transitions from orange to yellow. The text is centered and reads:

**TODAY IS BETTER
THAN YESTERDAY
&
TOMORROW WILL BE
BETTER THAN TODAY.**

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