



ESSENTIALS OF RETURN TO WORK

Ensuring Quality Care

There are less than
3,000 board-certified
occupational medicine
physicians.

High-quality medical care is necessary for an injured worker's recovery and return to work. But what does *quality* care mean? And how does any one person help ensure it is achieved? These answers can be found by looking at the overt and hidden factors that influence treatment. These factors have a profound impact on claims outcomes, costs, and recovery.

Quality care is partly achieved by clinicians doing their job well. It equally requires that employers, adjusters, experienced case managers, and injured workers collaborate with clinicians to ensure the best outcomes.

ELEMENTS:

- › Specialty Networks
- › Utilization Review
- › Expert Consultations
- › Case Management
- › Pharmacy Benefit Management
- › Functional Evaluation

Challenges in Ensuring Quality Care

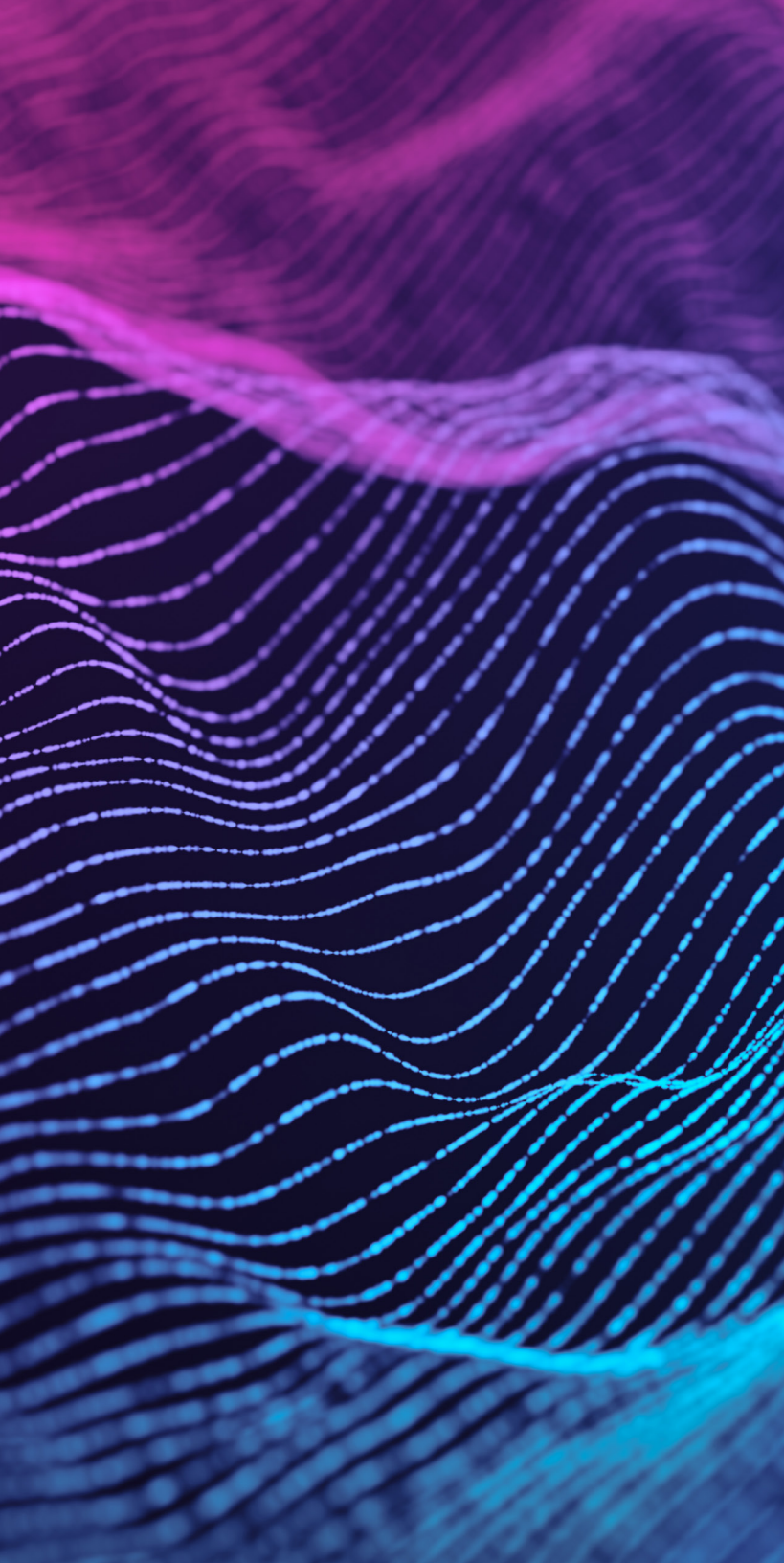
- › **Increasing rate of medically complex claims:** As the workforce ages, more injured workers have chronic conditions such as diabetes and hypertension. Powerful painkillers, more widely prescribed than ever before, introduce serious patient safety risks. The chances of a patient getting lost in a medical maze have increased exponentially. In response, it is important for case managers to identify the most trusted medical providers and to coach the patient while closely monitoring outcomes.
- › **Difficulty finding a doctor:** Access to physicians is deteriorating as medical economics have reduced the number of physicians interested in treating injured workers and shortened the length of office visits. The Affordable Care Act will potentially further reduce access.
- › **Be wary of over-medicalization:** Experts refer to “behavioral and circumstantial realities that create and prolong work disability,” such as a patient’s ambivalence about his/her job or poor coping skills. These personal attitudes and behaviors, not medical problems, may be driving duration of injury-related time off. It is important for everyone involved to be aware of the injured worker’s behavior so that the appropriate steps can be taken to keep the focus on the end goal of returning to work.
- › **One size does not fit all:** Medical providers are often tempted to apply the same treatment to every injured worker. Treatment plans should be created to address each patient’s specific needs.

Essentials of Ensuring Quality Care

Seek out physicians who are experts in treating work injuries

Quality care starts with a physician who correctly diagnoses the injured worker’s condition and delivers the most appropriate treatment for that condition and individual. Quality care is delivered when the physician listens carefully to the patient and makes timely referrals to specialists to address issues outside of his/her scope of expertise. He/she helps the patient focus on vocational recovery while maintaining an open channel with the employer. It is also important that the physician stays involved to prevent the patient from “falling through the cracks.”

Employers and claims payors support quality care by closely watching the performance of medical providers. Insights should be drawn from adjusters, nurse case managers, and medical directors about individual clinical practices and their impact on the duration of disability and cost of treatment.



Evidence-based guidelines, available from several publishers and mandated by many states, serve to promote proven treatments. These guidelines arise from studies of actual cases, such as spinal surgery outcomes and the use of opioids for managing pain. The guidelines help claims payors gain a better understanding of the estimated plan of care, expected outcome, and estimated duration of treatment.

Keep the patient informed and engaged

Quality care is also dependent upon the injured worker staying informed about his/her treatment and personally committing to recovery.

The case manager plays a pivotal role in the relationships between the recovering worker, his or her physicians, and the employer, by keeping all parties informed of appointments, treatments, and progress. The case manager explains treatment options and medical instructions, along with setting realistic recovery goals. Additionally, workers with limited English proficiency need help from medical providers, adjusters, and case managers who are fluent in the worker's native language or who deploy language interpretation services.

Collaboratively plan for return to work

Quality care includes return-to-work planning that is coordinated by a case manager working in concert with the employer and the medical provider. The functional job description and modified duty assignment are shared with the physician, and data on the patient's work capacity is explained so that the claimant can be confidently released to the worksite prior to full recovery. Modified duty should be arranged if necessary.

Execute reports and assigned tasks on time

The case manager, medical provider, employer, and adjuster work together to manage their respective tasks in injury response, treatment, recovery, and return to work for the claimant.

Selected Sources

Stay-at-Work and Return-to-Work Committee, "Preventing Needless Work Disability by Helping People Stay Employed." American College of Occupational and Environmental Medicine, 2005.

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J. Ireland, et al., "Changes in Schedule II & Schedule III Opioid Prescriptions and Payments in California Workers' Compensation." California Workers' Compensation Institute, August 2012.



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