

## The mental side of an injured worker's recovery

Studies show psychological risk factors can explain as much as a 35%-40% variation in how a person responds to an injury or illness.

By **Steve Hallo** | December 13, 2022 at 08:29 AM

“In the past, if you presented to a doctor for a knee injury and they asked about previous depression or anxiety, that would not be expected and people might be reluctant to share information,” Jennifer Cogbill, senior vice president of GBCARE, says. “Globally people are talking about mental health issues more than ever. One of the most common medications prescribed now are antidepressants.” (Credit: Tadamichi)

Be it a fear of pain, catastrophizing an injury, blaming others for their accident, dissatisfaction with their job or just a general pessimistic outlook on life, a host of mental factors — whether preexisting or brought on by a workplace accident — can prolong an injured workers recovery, in turn, increase health care cost and ultimately impact claims.

“There are a number of studies out there that says psychological risk factors can explain as much as 35%-40% variance in how we respond to an injury or illness,” says Tammy Bradley, senior director of clinical product marketing for **Enlyte**, “That’s pretty astounding. The rest is made up of our genetics, social and environmental factors, and only a small part is really attributed to the health care we received.”

Further, **Studies have shown** that mental health issues can be used to predict recovery outcomes, including return-to-work timelines. For example, depression and PTSD onset shortly after an injury and at six months into the recovery can result in poorer quality of well-being, as measured by mobility, physical activity and social interests.

“A lot of times what keeps an individual from fully recovering after an injury or illness — sometimes it is a medical issue — but very often a psycho-social issue,” says **Dr. Marcos Iglesias**, chief medical director for Travelers Insurance. “Most of the time, what we find is the individual comes to an injury or illness having these ways of explaining their world. If I am more likely to blame others, what we call perceived injustice, I am probably going to blame my injury or circumstance on someone or something outside of me. That can affect the recovery.”

According to Iglesias, around 40% of workers that have an injury and lost some time have one or more mental barriers that could slow their recovery.

“We’ve developed an approach that understands that and acknowledges things other than a work injury that we can help an individual with,” Iglesias tells PropertyCasualty360.com. “We listen to them to identify some of these barriers and then help to find solutions to those barriers. It helps the injured employee recover their life, it helps the insured and it leads to better claims outcomes.”

While mental health has always impacted the recovery process, it is becoming a more prevalent topic in society today. This is making it easier for people to make the connection between mental health and recovery, according to Jennifer Cogbill, senior vice president of GBCARE, Gallagher Bassett’s medical management platform.

As discussions around mental health abound, injured workers have come to expect some questions about their mental state more so than they might have before.

“In the past, if you presented to a doctor for a knee injury and they asked about previous depression or anxiety, that would not be expected and people might be reluctant to share information,” Cogbill says. “Globally, people are talking about mental health issues more than ever. One of the most common medications prescribed now are antidepressants.”

While mental health is hardly as taboo a subject as it once was, some people still feel social pressures when it comes to their own psychological state.

“A lot of people aren’t ready to admit they have an issue, or they may be reluctant to disclose that to an employer fearing for job security or opportunity to advancement,” Cogbill says.

### **The role social determinants can play**

In addition to the mental health challenges discussed, social determinants such as economic stability, physical environment and social connections, can also factor into an injured worker’s recovery, according to Bradley.

What happens if someone doesn’t live in a safe area and their doctor prescribes a walking program, but they don’t feel safe walking? What if an injured worker is missing physical therapy or other appointments because they don’t have a personal vehicle and can’t access or maybe don’t feel safe using public transportation?

“All of those things are going to potentially delay the recovery if they aren’t identified and addressed in a timely manner,” Bradley says.

Another social factor that can influence recovery is access to health care, according to Iglesias, who notes this access is a critical role insurance carriers have in the recovery process.

As economic stability is also a social determinant of health, Iglesias says getting people back to the work they had before the injury, and quickly, should always be top of mind.

“Whether it is through the appropriate medical care, having conversations with the employer to facilitate returning to work, we believe those issues matter and it is something that is part and parcel of what we do every day,” he says.

### **Spotting mental health barriers**

According to Cogbill, stress and anxiety aren’t uncommon reactions to a severe injury. However, it is vital to differentiate a normal reaction from one that might be a signal of a mental health issue.

One of the most obvious signs that an injured worker might be struggling is if they are not following customary timelines for recovery, according to Bradley, explaining: “If it is not the care they are receiving physically, there is something else mentally or socially going on.”

Another sign is noncompliance with treatment plans, Bradley says, noting the noncompliance might not necessarily be on purpose.

“If you go back to the example earlier: The person wasn’t able to get to the doctor or PT because they didn’t have transportation, and likely in that case didn’t know to ask or who to ask,” she says. “And it is something that could very simply be solved for.”

For claims handlers and case managers, the ongoing relationship and weekly conversations with injured workers can often yield clues about their mental status.

“You get to know that person very well. You’re able to pick up if they are more depressed or anxious than they previously were,” she says.

Other signs include withdrawal from conversations, lack of interest in social activities, and an increased alcohol intake or other substance abuse issues.

There are also more clinical approaches to uncovering psychosocial factors that could hinder a person’s recovery, including Orebro Musculoskeletal Pain Screening Questionnaire and the Functional Recovery Questionnaire, according to the Workers Compensation Research Institute, which released a paper on **behavioral health care in workers’ comp** co-authored by WCRI Policy Analyst Vennela Thumula, PhD, and Sebastian Negrusa, PhD, WCRI’s vice president of research.

“Clinicians, other providers and claims personnel administering the screening tools may use the information about risk factors to educate and counsel patients to better cope with and manage these risk factors,” Thumula and Negrusa explained in a written statement to PC360. “In more complex cases, they may direct workers to specialists who can provide the necessary care.”

For example, if screening indicates that a worker has severe psychological risk factors, a specialist can be brought in to conduct a comprehensive biopsychosocial assessment and provide appropriate behavioral treatments. If the barriers are work-related, then a work-focused intervention can be considered, according to the WCRI.

“Emerging evidence suggests that modifying treatment patterns to address psychosocial risk factors, that are identified by screening tools, results in patient outcome improvements,” Thumula and Negrusa wrote.

### **Holistically supporting injured workers**

Cogbill says that once an issue is identified, an active investigation should be undertaken to determine if the worker needs that additional help, rather than waiting for something to happen that could comprise the recovery and complicate the claim.

Among employers, some harbor fears that a mental health issue addressed after an injury could become a compensable part of a claim. Cogbill says this is a bias GBCARE is working to break through with its clients.

“When someone is a cancer survivor or has hypertension, we don’t neglect those issues during the recovery because we are fearful that they’re going to be part of the compensability,” Cogbill explains. “That is not what we’re doing. We are acknowledging that this is an extra need this individual has, and we need to give them that support so that we can help them get the best recovery and return to health that we can.”

Recognizing the impact mental health has on recovery, Travelers developed an app that uses an AI chat program to better understand the issues an injured worker could be dealing with. The AI then offers skill-building exercises to help them overcome the issue, whether it be an issue with managing stress or trouble sleeping at night.

People can use the application anonymously and whenever they have the need, which Iglesias says helps them feel more comfortable.

“By giving that skill training and those activities, it helps them overcome whatever their issue might be,” Iglesias says, continuing: “It might be, ‘I’m not sleeping very well,’ and through the app, we can help them develop some skills like sleep hygiene, and that might be what helps them work through their recovery.”

Travelers reports that through the use of its app, missed work days can be reduced by one-third.

While mental health is becoming a bigger topic of conversation in workers' comp and the world in general, GBCARE's Cogbill stresses that not every claim will have a psychosocial component to it.

"A lot of people don't need that help," she explains. "We are at a point right now where we are very good at identifying data points and our predictive modeling is very good. Merging those tools with training to focus on recovery and providing resources is critical so that we address it, but not in a way that we are wasteful in spending money on clinical resources for a claim."

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