



## Jurisdictional Update Report

**To:** Compensation and Benefits Committee  
**From:** Alberta Workers Compensation Board

**Date:** Sept 15, 2014

**Committee Member:** Bob Nebo

**Committee Mandate:** The AWCBC Compensation & Benefits Committee works collaboratively to share experiences, identify and improve claim-related outcomes and identify and action opportunities around operational, research and policy development initiatives.

### **Goals:**

- ✚ To share jurisdictional experiences and knowledge
- ✚ To put before the committee, emerging issues that are deemed high priority, for consideration of planning
- ✚ To be available to other AWCBC / national committees to provide input and or partner with when requested
- ✚ To provide feedback to AWCBC Executive when required or requested

**OBJECTIVE: Improving Return to Work Outcomes/Reducing Durations (Share work that is being done within your organization to support RTW, reduce duration etc)**

	<b>Action/Activities</b>
1. New Initiatives	<p>1. <b>NEW Engaging Worker in Modified Work (MW)</b> - The goal is to positively impact RTW outcomes by giving workers the education and information they need to engage fully in negotiation of their own modified work. The anticipated outcome is that more workers will remain job attached, will get safely back to work faster and, in many cases, without WCB leading the negotiation process with the employer. We have two deliverables for 2014:</p> <ul style="list-style-type: none"> <li>• An automated MW prompt intended to nudge the worker to discuss modified work with his employer very early in his case for a predefined pool of cases added to claim notice letters.</li> <li>• Development of education intended to help workers understand and participate actively in the negotiation of suitable modified work. <ul style="list-style-type: none"> <li>○ Focus on training CO's of how to use RTW Planning Meetings to support injured workers in strategies/actions they can take with employers to secure MW placement and early RTW.</li> <li>○ Wallet card has been developed and is available on line which educates workers on their role in working with their employer and health care provider to coordinate a return to modified employment.</li> <li>○ Modified work video for workers is now available on the WCB website.</li> <li>○ Presentations to Employer Industry Task Force and Labour Coalition in the fall to engage these bodies in this initiative.</li> </ul> </li> </ul>
2. Best Practices	<p><b>1. Best Practices in Health Care / Medical Management of Claims – RTW outcomes</b></p> <ul style="list-style-type: none"> <li>• <b>Continuum of care models</b> - designed for various injury types (backs, shoulders, traumatic psych, MTBI, Opioid management, etc.) Back Program Outcomes: 95% RTW within 12 weeks of DOA</li> <li>• <b>Expedited surgeries with Visiting Specialist Clinics</b> - where the worker meets with the specialist, surgery is confirmed, booked and completed within 15 days (over 1800 surgeries occurring each year that are expedited)</li> <li>• <b>Occupational Injury Service (see attached)</b> - expedited access to medical services at special OIS clinics throughout the province. Same day access to a physician with a background in occupational medicine and WCB-Alberta training (target wait time of 30 minutes or less) who provides: <ul style="list-style-type: none"> <li>○ Expedited diagnostic and treatment services</li> <li>○ Detailed communication to the worker, employer, worker's GP with injury assessment and treatment</li> <li>○ Individualized return to work plan</li> </ul> </li> </ul>

- Follow-up support

OIS Outcomes for 2,600 employer sites are currently signed up for OIS

- An average 18.8% higher modified work rate
- An average of 5.2 less duration days per claim
- An average of \$166.05 less health care costs per claim
- An average of \$404.17 less compensation costs per claim

**2. Each jurisdiction to provide an outline of what processes and or steps are in place to deal with the claim after you have identified the risks. You have identified a potential high risk claim – now what?**

**Back, Shoulder, Fracture Claims (see attached):** Claim risk management strategy focuses on **expediting a clear diagnosis of the injured worker's medical condition and work restrictions, and triaging best practice treatment plan to match the injury.** Specific injuries, like backs, shoulders, etc., need tailored approaches to physical exams, worker education and timing of triaging for subsequent services. Most back injuries improve without medical intervention. Educating the injured worker about his or her back injury is vital to their recovery.

This approach applies to back, shoulder, fracture claims where the body part/injury type and any wage loss triggers automatic tasks for **expedited medical exams and/or medical consultant reviews/assessments at the start of the claim.** The exam outcome establishes the diagnosis and identifies the best triage pathway.

This approach requires special training for practitioners doing the back or shoulder exams, and streams of service to triage treatment, education, RTW planning depending on the specific injury.

**Severe and Permanent Injuries:** Special Needs Teams are in place to manage severe injuries at claim registration (brain injury, occupational disease, spinal cord, etc.). They provide longer term care and rehabilitation services, RTW planning, etc. with checklist reviews to assess progress and to identify RTW/recovery barriers (physical, emotional, psych, social, etc.). **Traumatic Psych Injury Program:** The TPI Program was created to address the psychological, medical, functional, musculoskeletal and vocational needs of injured workers with high RTW barriers.

**Injured Worker – not attached to employer/job:** If the DOA employer will not confirm they have modified work and will be taking the worker back when fit for work, **VR services (job skills assessment, resume/job search prep) will be provided early in the claim.** This provides a RTW plan and focuses the worker on preparing for job search while in recovery.

**Individual Claim monitoring and escalation:**

- **Dashboards** – ADJ/CM//Sup/Mgr/ get daily dashboards showing key tasks at the claim owners desk level that are aging/uncompleted to help individuals manage maintaining service cycle times (EG. Un-adjudicated claims to ensure they meet 14 day first payment target; return phone calls within 1 day; case plan letter deadlines; etc.) and

Supervisors coach time and task management skills, etc. to keep timely adjudication on track.

- **Weekly ADJ/CM caseload volume reports** are produced for Sup/Mgrs/Directors to identify high caseloads that may need support and/or performance management. A structured work-share process is used to manage unusually high volumes of new and reopened claim assignments to teams, caseloads >45 active claim and staffing shortages. The excess work is distributed across teams who have capacity because of lower assignments or lower caseload with their industry/employer groups.
- **Path to RTW is an online claim tracking system** providing up to date summary of TTD/wage loss claims - includes information on Supervisor reviews, claim audits, case plan completed/updated/letters sent, etc. as tool to quickly assess quality/issues on active wage loss and longer duration claims. Supervisors use the database to create performance reporting, track duration objectives, identify claims with inappropriate benefits (EG. TTD vs.VR), identify claims that require RTW action, scrums, etc.
- **Case Plan Quality Reviews** – Supervisors complete 2-4 claim audits/month on durations claims that review for compensable injury, case plan goal and timeliness, appropriateness of medical and VR, whether RTW barriers identified and addressed, etc.
- **Scrums** – problem or stalled cases are discussed in open forums with Medical Consultants, VR specialists other CM's/Supervisors to review the RTW barriers and other specifics of the case to brainstorm potential RTW options.

### **3. Temporary Foreign Workers (TFW) – [doug.sackney@wcb.ab.ca](mailto:doug.sackney@wcb.ab.ca)**

The procedure has been updated to reflect current language/terminology and appropriate practices when working with temporary foreign workers who have work visas. Some important changes to note:

- Claim owners and workers should contact the Alberta Office for Temporary Foreign Workers with any questions regarding a worker's visa and ability to perform modified work.
- Many temporary foreign workers cannot participate in modified work as it is not written into their work visa. Claim owners, employers and workers with questions regarding the legality of modified work should contact the Temporary Foreign Worker office to confirm.
- If permanent restrictions are anticipated and a job change is required, the DOA employer (if they are accommodating) or a new employer will have to file for a new Labour Market Opinion from Service Canada and the worker will have to file for a new visa before a new position could begin. However, if this cannot happen (i.e. the worker needs to leave the country), **WCB will continue to manage the VR services and possible wage loss as if the worker were able to remain in Canada** and work the identified position.
- If a wage loss is anticipated, generally COs can use any location in Alberta to identify a position (as the worker did

not likely have a permanent home base in Alberta). This may not be the case for claimants with open work permits (where they can work for any employer or are not specifically limited by position).

### **Summary of Key Steps in Adjudicating TFW Claims:**

- Talk to the worker early about their plans and the terms of their work visa (i.e. when it expires and the terms of renewal)
- For Foreign Workers confirm if appropriate modified duties are available when determining fitness for work. Encourage the employer to put the modified work offer in writing, when appropriate (e.g., conflicting modified work duty information, identified return to work barriers, etc.), and have the worker and employer sign the modified work agreement. A copy of the agreement should be obtained for the file (see Procedure 31.5 - Modified Work Program). Ensure that the modified duties does not conflict with the work visa (egg Work Visa specifies ski instruction only)
- Develop a case plan and arrange all necessary medical assessments (e.g. MSE, FCE, and IME) before the worker's departure, if possible. Request vocational services such as a RTW Skills Profile (RWSP) if work restrictions are anticipated.
- Do Vocational Rehabilitation as early as possible in the claim when the worker's visa is expired you may have no access to an interpreter, services or a significant time difference which may make information gathering very difficult
- Schedule a meeting with the worker before the departure. Discuss WCB's expectations regarding frequency of medical treatment and reporting, vocational planning and RTW planning after the return to the province of origin. Explain that the worker is responsible for securing medical services following the return home and the implications of not attending all required appointments and treatment. Document the conversation in a letter to the worker.

The following links to government websites are provided to case managers:

<http://www.cic.gc.ca/english/work/extend-stay.asp>

<http://www.canadaworkpermit.com/>

### **TFW Claims Data (attachment):**

In 2013 there were 4,421 total claims for injured workers with SIN beginning with #9 (temporary SIN issued for non-Canadian citizens, TFW, foreign students, etc.)

- 1,036 LTC (23%) with cost and duration profiles that are slightly below averages for all LTC claims - \$3,072 compensation/claim, \$3,682 medical/claim, 9,278 total costs/claim, 17.6 TTD days (duration)/claim
- 2,271 NTL (51%) modified work or medical only claims - \$562 avg/claim with 88% <\$1000
- 1,114 Notice Only claims (26%) with no costs - injury not work related, not under WC Act, duplicate claims, first aid only – no medical, no wage loss, no costs.
- **64 claims (1.4%) have out of country address on file**
- 47 LTC claims (4.5%) required VR services as worker was not job attached
- 2 LTC's with permanent wage loss (ELP) and 2 fatalities

3. Outcomes - Q2/2014 KPI's

**RTW & Benefits:**

- RTW – 92% (% FFW and employable)
- First payment in 14 days – 88% (claim registration to first payment)
- Wage Quality – 74% (% permanent wage loss with >75% post/pre accident earnings)
- Modified Work – 53% (% disabling injury claims with MW)
- Back claims RTW – 96% (% RTW within 12 weeks of DOA)
- OIS claims with MW – 65% (% claims attending OIS clinic with MW)
- OIS off TTD 7 days after 1<sup>st</sup> visit – 94%

**Service & Quality:**

- Decision correctness – 93% (auditing decision letters)
- ADJ/CM return calls within 24 hours – 97%
- Call Centre average wait time – 14 seconds
- Medical Consultant reports in 7 days – 90% (% internal MC reports to claims owners)
- PT outcomes – 76% (% claims off TD at 7 days post PT discharge)
- Physician on time reporting – 75% (% within 5 working days from exam date)
- Appeals DRDRB (internal) completed in 40 days – 95% with 25% appeals resolved and 93% upheld rate
- Appeals Commission (external) reversals – 31%

**Customer & Staff:**

- Overall customer satisfaction - 81% injured worker / 92% employer
- Decision fairness satisfaction - 85% injured worker / 74% employer
- Treated with courtesy and respect - 90% injured worker / 94% employer
- Employee satisfaction – 95% (*WCB is good place to work*)
- CM/ADJ retention rate – 91%

Claims Data Summary	2014 Q2 YTD	vs 2013	vs 2014 Budget	2014 Budget
Total Claims Costs	\$334.5M	+\$0.4M (0.1%)	-\$20.2M (-5.7%)	\$354.6M
Health Care	\$144.6M	+\$9.1M (6.7%)	-\$6.3M (-4.2%)	\$151.0M
TTD	\$56.1M	+\$4.0M (7.6%)	-\$1.2M (2.0%)	\$57.3M

Vocational Rehab	\$16.7M	-\$1.9M (10.0%)	-\$2.7M (14.0%)	\$19.4M
Economic Loss	\$48.4M	-\$6.5M (13.3%)	-\$5.9M (12.3%)	\$47.8M
Duration	34.4 days	+0.2 days (0.6%)	+1.4 days (4.2%)	33 days
Lost Time Claims	14,198 claims	+172 claims (1.2%)	-251 claims (1.7%)	14,449 claims

**OBJECTIVE: Service Delivery / Quality Initiatives (Share what is being done in your organization to improve customer service delivery and to support quality service/ decisions to stakeholder)**

Action/Activities	
1. New Initiatives	<p><b>Customer Relationship Index:</b> Building better relationships with workers and employers through more proactive in-person/on-phone contact to keep them informed and engaged in the RTW process. Why? Customer satisfaction surveys say we don't do as good job including workers and employers in building and implementing their RTW plans like we think we do - they don't feel they have an impact on RTW plans and therefore don't always buy-in.</p> <ul style="list-style-type: none"> <li>• Promote <b>building good relationships</b> with claimants and employers as a means to customer satisfaction and positive claims outcomes and as a means to reinforce fairness and to facilitate RTW.</li> <li>• Promote <b>high quality conversations</b> and customer service interactions promote a customer service culture that strives for good relationships with our customers</li> </ul> <p>2014 Initiatives:</p> <ul style="list-style-type: none"> <li>• Claims owners to add <b>structured/scripted file note to document key messages/conversations</b> with customers - provides a means to track timeliness and quality (content) of worker and employer contact</li> <li>• Claim audits will have <b>additional questions on claim owner relationships building/conversation quality</b> with the worker and employer focused on including the worker/employer in RTW planning.</li> <li>• <b>Claims Supervisors &amp; Managers contact 2 employers each month</b> inquiring about the timeliness and quality of communications from the WCB, how we are doing to engage employers in the RTW process, and what the employer can do to improved their RTW practices.</li> <li>• <b>Employer Contact Scorecard Objective</b> – 90% initial contact in 7 days and 90% subsequent contact within 6 weeks - Goal sharing (pay for performance ) metric for Supervisors and Managers</li> <li>• <b>Ongoing Relationship Building workshops</b> designed for claims teams to attend - What makes a relationship effective? What roles do integrity and trust play in developing healthy relationships with your customers? Provides tips and strategies to improve relationship building skills and how this is critical to personalizing customer service.</li> </ul>

2. Electronic HC Provider Reporting - Upgraded

**Rapid Report System** (also known as Electronic Injury Reporting) 2 release system upgrade in progress– Phase 1 Sept/2014 to workers, employers, physical therapists and chiropractors - Phase 2 Nov/2014 to physicians. Along with the technology change, enhanced reporting will provide WCB with better information about the worker’s abilities and restrictions.

**Optimizing RTW** – better information about worker capabilities with more structured reporting

- Medical providers will no longer be asked the yes/no question about fitness for modified work. Instead, they will be required to provide detailed work abilities and restrictions that will assist in RTW planning. Reporting will provide **more detailed information about in injured worker’s work abilities and work restrictions.** Example:

<b>RETURN TO WORK</b>		
<b>Time missed beyond date of accident?</b>		
Yes		
<b>Current Work Status</b>		
Patient has not returned to work		
<b>Able</b>	<b>Unable</b>	<b>Limited (approx.)</b>
Sitting	Kneeling/Squatting	Standing (4 hrs)
Bending	Driving	Walking (2 hrs)
Twisting		Lifting (Limited (<5 kg/11 lbs))
Climbing		
Pushing/Pulling		
Overhead reaching		
<b>Hospitalized</b>		
No		
<b>Other Reasons Why the Patient Cannot Work</b>		
None		
<b>Other Restrictions or Additional Comments/Special Considerations</b>		
<b>Estimated Date You Expect the Patient Will be Able to Perform Pre-Accident Work</b>		
2014-05-31		

- Injury Details in addition to injury description, diagnosis....
  - Drop down boxes for part of body, nature of injury, etc.
  - Occupational (EG. repetitive nature of work) and non-occupational (EG pre-existing medical conditions) risk factors (potential RTW barrier)s
- Treatment Plan



- Gathers information on whether narcotics/opioids are prescribed; if YES then details of prescription, strength, amount must be reported. Opioid Medical Management form now online
- Offers providers ability to request WCB services on the claims (EG. Consultation, Referral to Specialist, Investigation)
- Occupational Injury Service reporting will provide specific work restriction details (EG Lifting – Above Shoulder – Restricted to 10 lbs.)
- RTW Planning
  - Notification to employer that the Employer copy of Physicians First Report is available to view online.
  - PT/Chiro ability to provide PT Assessment copy to worker to take back to employer.
  - Employer/Worker Injury Reports – MW availability? If no why? Has worker been offered MW? Will the worker be kept on full or partial pay while on MW?

**Improving External User Satisfaction** – incorporated feedback from users - easier to use, navigate and submit reports and invoices - more structured reporting - drop down boxes and less written narrative - option to submit attachments with to supplement reporting (EG Chart Notes; MRI report; etc.)

- Dynamic reporting features added where
  - Answers to initial questions triggering different form types to be opened for completion and submission (EG. Has the worker returned to work? If YES the form will not ask the physician to provide the workers current capabilities. If NO then capabilities need to be provided – like sit, stand, walk, bend, lift, etc. with rationale)
  - Answers to questions in form/drop down boxes with trigger requirements for more information only when required (EG. NTL claims reporting is reduced - no wage loss information is required)
  - Notifies providers of denied claims before they proceed to complete and submit any medical report
  - Allows providers to lookup existing reports to pre-populate follow-up reports
- Search capabilities – providers can look up existing reports, save draft of reports to complete later, look up claims and worker name to prompt pre-populated demographic information (worker name address, claim number) etc.

**Accessing the Data Warehouse** - Improved data collection for claim monitoring, trending and performance management

- Auto generates reports (EG. PT Program Evaluation when treatment cycle is completed; Employer copy of Physicians First Report)
- Allows payment remittance reports to be retrieved by providers for payment reconciliation (managing account receivables)
- More claim data captured in structured format for reporting and analysis (EG. OIS clinic usage; RTW status on claims; Date of Service comparisons to date of report to identify late reporting providers; etc.)

	<p><b>Change Management –</b></p> <ul style="list-style-type: none"> <li>○ External Providers - Proactive involvement included web-based story boards, video tutorials, information sessions/presentations, hands-on provider demos to demonstrate ease of use and less time/effort to submit, etc. Change management and technical support for External Software Vendors (batch submitters) for their system upgrades in order to be and accredited vendor.</li> <li>○ Internal Users – Process changes implemented as required; story boards/demos/training sessions/etc.</li> </ul>
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**OBJECTIVE: Human Resources / Training (Share information on staff related issues including training, recruitment, management oversight etc)**

	<b>Action/Activities</b>
<p>1. HC Practitioner Training</p>	<p><b>Prolonged Exposure Therapy Workshop</b> - We are exploring the possibility of hosting another Prolonged Exposure (PE) Therapy Workshop in January 2015. The four-day (Thursday-Sunday) session would be open to all practitioners who treat trauma survivors. Exposure therapy is an effective, evidence based form of treatment</p> <p>Led by Dr. Yadin from the Center for the Treatment &amp; Study of Anxiety at the University of Pennsylvania, this workshop will teach you:</p> <ul style="list-style-type: none"> <li>• The diagnosis, psychopathology, empirically-supported psychotherapeutic treatments of PTSD and the comparative efficacy of these treatment approaches.</li> <li>• How clients are helped to emotionally engage in and process traumatic memories, with the aim of reducing trauma-related symptoms and difficulties.</li> <li>• How to implement all of the treatment components of prolonged exposure therapy for PTSD.</li> <li>• Participants will be presented detailed case vignettes that illustrate the use of PE in the treatment of trauma survivors with chronic PTSD, and will see segments of videotaped therapy sessions conducted by experts that illustrate all PE therapy components. You will practice PE procedures with other attendees, receive feedback from faculty trainers, and receive detailed treatment manuals and supporting materials that can be used in providing the therapy.</li> </ul> <p>The approximate cost of the four-day workshop is \$1,000.</p>
<p>2. Professional Development</p>	<p>The <b>Meredith Lecture</b> is named after Justice Meredith who established the principles for Canadian Workers' Compensation in 1913. This annual lecture series was initiated to promote knowledge of workers' compensation issues with a target audience of physicians and other interested parties. Sept 2014 - <b>David M. Studdert</b> is considered a leading expert in the fields of health law and experimental legal research. He has authored more than</p>

	<p>150 articles and book chapters, with his work appearing in prominent medical, law and health policy publications. He has done extensive research in the field of workers' compensation and is one of the co-authors of an Australian study called <b><i>Relationship Between Stressfulness of Claiming for Injury Compensation and Long-Term Recovery</i></b>. Dr. Studdert is a professor of both medicine and law at Stanford University.</p>
<p>3. Training</p>	<p>Alberta WCB internal training is custom designed for specific jobs and career path development, making it difficult for others outside the organization to attend.</p> <p><b>Business Training:</b> Adjudicator and Case Manager training are 16 week programs where the learner has a caseload of actual claims to complete live claim work starting in the first week (entitlement decisions, contacting customers, sending letters, payments, tasks completion, etc.). The training plans integrate technical, policy, procedure and behavioral training throughout the course – new material is taught in the mornings and practiced on live claims in the afternoon. Learners require secure access to claims desktop matching their job/role and authority level for learning while completing real work in the production environment. Learners have 1-1 coaches for the duration of training and receive periodic evaluation on how they are progressing. Skills competency is tracked in individual passports that supports salary adjustments from start to job rate..</p> <p>Sample Courses in the ADJ/CM training program: <i>RTW Planning 1, 2 &amp; 3; Managing Your Workload – Caseload Management; Decision Writing; Relationship Building- MBTI, Integrity Trust and Your Customer, TKI/Addressing Conflict; Keep the Cap on Opioids; Problem Solving - Decision Making; Psychological Barriers; etc.</i></p> <p><b>Corporate Training (leslie.henkel@wcb.ab.ca):</b> Online corporate training calendar with 2 hour to full day courses and workshops with topics ranging from technical computer training to leadership and professional career development. Courses are scheduled throughout the year with staff registering on a first come basis with Supervisor approvals where required. Additional courses are schedule based on demand/waiting lists/ trainer availability.</p> <p>Sample - Four suites of Professional Development Certificates (brochure attached)</p> <ul style="list-style-type: none"> <li>• Exploring Leadership (6 of 9 courses required for certificate)</li> <li>• Building Relationships (5 of 9 courses required for certificate)</li> <li>• Customer Focus (5 of 8 courses required for certificate)</li> <li>• Developing Professional Effectiveness (5 of 11 courses required for certificate)</li> </ul>



**IT STARTS AT THE TOP**

CEO Guy Kerr has signed the **Corporate Wellness Statement** and every leader in the company must ensure that employees have a safe and healthy workplace.



**HAZARD ASSESSMENT**

The company does annual, **job-specific hazard assessments**.



**“NOT MYSELF TODAY”**

This campaign was designed to raise **awareness about mental health issues** in the workplace.



**ONSITE ZUMBA**

WCB provides **free fitness classes**, including Zumba, cardio workouts, strength training, yoga and meditation.



**CYCLE TO WORK**

On-site secure bicycle parking and **free annual bike tune-up events**.



**SAFETY TRAINING**

Every new employee gets a **three-hour health and safety orientation** and there is ongoing education and training about typical work hazards.



**DISABILITY MANAGEMENT**

A focus on providing early help to injured or sick employees saved 3,398 workdays in 2013, equalling almost \$1 million in savings.



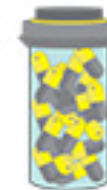
**QUIT SMOKING**

WCB will **reimburse up to \$300 per year in smoking cessation aids**. It also provides on-site massages and an annual flu clinic.



**EMERGENCY LOCKDOWN**

Every floor in all buildings has an **emergency response station** with a first aid kit, eyewash station, resuscitation mask and more.



**HEALTH CARE**

Pays **90 per cent of the cost of prescription drugs** and for a private hospital room.