WCB MANITOBA BEST PRACTICES

> CASE MANAGEMENT <u>LIFECYCLE</u>

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OUR VERY BEST

WCB MANITOBA Best Practice is . . .

- > to promote the worker ownership of their recovery and return to work
- > to confirm the worker's treatment is effective and the worker is recovering as expected

OVERVIEW

In preparation for returning the worker to work the Case Manager continually assesses the worker's medical status, treatment and recovery. The Case Manager works with the worker and their healthcare provider to clarify the workers medical status, confirm treatment is effective and assess recovery. When beneficial the Case Manager will utilize WCB Healthcare Services to address the worker's medical status. Finally, the Case Manager ensures that entitlement decisions continue to reflect the nature of the worker's medical status.

CASE MANAGEMENT LIFECYCLE

ASSESSING	PLANNING	MANAGING	CLOSING
		Medical Management follows Claim Assessment and Worker Assessment	
		Medical Management is addressed in the development of the Case Plan; the Case Plan is used to address treatment and any challenges to recovery	
		Medical Management continues until the worker is recovered or entitlement ends	

KEY CONSIDERATIONS

In addition to the Best Practices outlined above, following are key considerations of this Best Practice:

- > To assess worker abilities as the worker's recovery progresses
- > To verify entitlements on an ongoing basis on the worker's medical status, treatment and recovery

KEY DECISIONS SUMMARY

	D.6.1	Is the worker's treatment effective? Is the worker recovering as expected?
		Should WCB Healthcare Services be used to assist with addressing the worker's medical condition?

PERFORMANCE GUIDELINES

P.6.1	The claim file is up to date with: a) diagnosis b) restrictions c) related medical issues d) treatment plan & progress e) recovery status f) Return to Work status, and g) entitlement decisions
P.6.2	Communications with the worker, their healthcare provider or WCB Healthcare Services, including any healthcare provider reports, are documented to the claim file

KEY ACTIVITIES

The Case Manager seeks to clearly address each of the following six aspects of the worker's medical status:

		Source		
		Worker	Healthcare Provider	WCB Healthcare
1. DIAGNOSIS	What is the worker's diagnosis? Is the diagnosis clear? Is the relationship between the injury and the diagnosis clear?		Primary Source	As required
2. RELATED MEDICAL ISSUES	Does the worker have other medical issues? Medical issues not related to the injury? Medical issues complicated by the injury?	Secondary Source	Primary Source	As required
3. TREATMENT	Is there a treatment plan? What is the expected duration of treatment? What are the expected results of the treatment? Is the treatment achieving its intended results?	Primary Source	Primary Source	As required
4. RECOVERY	When is the worker expected to recover? What has the worker's healthcare provider indicated? What recovery timeframe is indicated by Medical Norms? Is the worker recovering as expected?	Primary Source	Primary Source	As required
5. RESTRICTIONS	What are the worker's restrictions? What job duties can the worker perform? When can the worker to go back to work?	Secondary Source	Primary Source	As required
6. ENTITLEMENTS	Based on the worker's medical status and treatment, what entitlement decisions are there?			

The Case Manager works to address each of these six aspects of the worker's medical status with the worker and the worker's healthcare provider. As beneficial, the Case Manager may use WCB Healthcare Services to more effectively address these aspects of the worker's medical status.

Note in some instances employers with established Return to Work programs request a "Functional Abilities Form" (FAF) be completed by worker's healthcare provider and may be able to provide the Case Manager with this information.

ACTIVITY 1 WORKER COMMUNICATION

The Case Manager's communication with the worker regarding their medical status unfolds in two ways. First, the Case Manager may obtain medical information from the worker in addition to their healthcare provider. Second, the worker may want to obtain information about their medical status from the Case Manager rather than their healthcare provider.

PART A > COMMUNICATION FROM THE WORKER

While the worker's healthcare provider may be the primary source of information, the worker is also a source of information regarding their medical status. In particular, the worker is a primary source of information regarding their treatment and recovery. Also, sometimes information may be obtained from the worker on a timelier basis than from the worker's healthcare provider.

PART B > COMMUNICATION TO THE WORKER

Sometimes the worker is not provided with medical information by their healthcare provider, for example their healthcare provider does not provide the worker with copies of their WCB medical reports. Sometimes the worker does not fully understand their medical status and will ask the Case Manager questions for clarification.

WCB MANITOBA Best Practice is to promote the worker ownership of their recovery and return to work

The worker should obtain information about their medical status from their healthcare provider. The Case Manager's encourages the worker to address their medical status with their healthcare provider. This includes encouraging the worker to ask their healthcare provider for copies of their medical reports or coaching the worker with the kinds of questions they should ask their healthcare provider.

There are some things the Case Manager does to assist the worker with understanding their medical status:

- > The Case Manager provides the worker's healthcare provider with a copy of entitlement decision letters, decisions which are based on the healthcare provider's medical reports. This allows the worker together with their healthcare provider to have a more focused discussion regarding the worker's medical status.
- > The Case Manager reviews WCB Healthcare Services file review or call in exam results with the worker once the exam results are finalized.
- > WCB Healthcare Services provides the worker's healthcare provider with a copy of their call-in exam results.
- > If there is a difference of opinion between WCB Healthcare Services and the worker's healthcare provider, WCB Healthcare Services will call the worker's healthcare provider to discuss.

PART C > WHEN COMMUNICATION WITH THE WORKER OCCURS

The Case Manager and worker communicate regarding the worker's medical status over the course of the worker's treatment and recovery. Given a Case Plan is completed, the Case Plan addresses key activities in the worker's recovery and return to work and drives when the Case Manager and worker communicate. Following are some key points in time when the Case Manager and the worker communicate regarding the worker's medical status:

Initially as part of the Worker Assessment, seeking clarification of the worker's medical status from the worker		
Ongoing communication with the worker as agreed upon in the Worker Assessment		
Based on recovery milestones outlined in the Case Plan		
Following worker medical appointments with their healthcare provider		
To review treatment plan progress (beginning, middle, end) or where is a change in treatment		
To review an internal healthcare opinion (e.g. file review, call-in exam)		
At minimum once a month as recovery progresses		

ACTIVITY 2 HEALTHCARE PROVIDER COMMUNICATION

The Case Manager communicates with the worker's chosen healthcare provider(s) to address the worker's medical status. Importantly, the Case Manager always attempts to work with the worker's chosen healthcare provider before utilizing WCB Healthcare Services.

- While not all healthcare providers are aware of or attentive to the requirements of the WCB, the worker is free to choose their own healthcare provider and may value their relationship with their healthcare provider. Respecting this relationship contributes the working relationship between the Case Manager and the worker.
- > The Case Manager promotes the worker ownership of their recovery. This includes the worker seeking out their own healthcare providers.

The Case Manager typically requests and receives reports from the worker's healthcare provider regarding the worker's medical status and treatment. As required, the Case Manager will contact the worker's healthcare provider directly to seek clarification or address concerns. Typically a narrative request is most effective as it is difficult to reach healthcare providers by phone.

Following are some key points when the Case Manager and the worker's healthcare provider may communicate regarding the worker's medical status:

Clarification of diagnosis, restrictions, related medical issues, treatment
Report following medical exam by healthcare provider or specialist
Treatment plan progress report, beginning, middle, end
Concerns regarding effectiveness of treatment or timeliness of recovery

DECISION 1 IS THE WORKER'S TREATMENT EFFECTIVE? IS THE WORKER RECOVERING AS EXPECTED?

WCB MANITOBA Best Practice is to confirm the worker's treatment is effective and the worker is recovering as expected

Based on the worker's medical information and recovery Medical Norms the Case Manager has established a Case Plan Goal Date (see <u>Case Planning</u>), a date when the worker is sufficiently recovered to return to work in some capacity.

The Case Manager monitors the worker's treatment to confirm it is achieving its intended results. The Case Manager monitors the worker's recovery to assess whether the Case Plan Goal Date is achievable. The Case Manager monitors treatment and recovery through discussion with the worker and through reports from the worker's healthcare provider. Using this information the Case Manager assesses if the treatment is achieving its intended results and the worker is recovering as expected.

If treatment is not achieving its intended results and the worker is not recovering as expected, the Case Manager contacts the worker's healthcare provider directly to assess the worker's treatment and recovery. The Case Manager generally attempts to assess the worker's medical status with their healthcare provider first before utilizing WCB Healthcare Services.

DECISION 2 SHOULD WCB HEALTHCARE SERVICES BE USED TO ADDRESS THE WORKER'S MEDICAL SITUATION?

WCB Healthcare Services may be utilized when:

- > There is an opportunity to expedite delivery of healthcare services to the worker.
- > Information cannot be obtained from the worker's healthcare provider on a timely basis.
- > Information obtained from the worker's healthcare provider is inadequate for the purposes of managing the claim.
- > The worker's treatment is not achieving its intended results and the worker is not recovering as expected.

ACTIVITY 3 below provides a more detailed list of instances where the Case Manager may utilize WCB Healthcare Services.

WCB Healthcare Services does not assume responsibility for treating the worker. WCB Healthcare Services may provide an alternate opinion and/or recommendation. WCB Healthcare services and the Case Manager continue to work with the worker's healthcare provider to treat the worker.

ACTIVITY 3 UTILIZATION OF WCB HEALTHCARE SERVICES

When unable to satisfactorily address the worker's medical status with the worker's chosen healthcare provider the Case Manager may use WCB Healthcare Services. Following are some instances when a Case Manager may use WCB Healthcare Services. The Case Manager may either request a medical opinion based on existing medical information or request a call in exam; alternatively WCB Healthcare Services may recommend a call-in exam.

Note the following when utilizing WCB Healthcare Services:

- > The Case Manager notifies the worker that WCB Healthcare Services is reviewing their claim file and the reason for the file review.
- > When conducting a call-in exam WCB Healthcare Services provides the worker's healthcare provider with a copy of the result.
- > Following a file review or call-in exam, the Case Manager reviews the results with the workers.

	Worker's healthcare provider has not responded to requests for information on a timely basis	
	Cannot clearly establish diagnosis	
	Cannot clearly establish relationship of diagnosis to compensable injury	
	Cannot clearly establish relationship of the compensable injury to other medical issues (e.g. pre-existing conditions)	
	Cannot clearly establish restrictions, ability of worker to perform job duties, regular, modified or alternate	
There is opportunity to use WCB's "Facilitated Services" to expedite treatment of the worker Treatment is not achieving its intended results		
	Require immediate opinion to address treatment or return to work	
	Conflicting information from external healthcare providers	
	A discussion between the worker's healthcare provider and WCB Healthcare Services discussion is requested	
	Medication review including use of opioids	

ACTIVITY 4 ENTITLEMENT DECISIONS

As the worker's medical status is clarified the Case Manager reviews the worker's entitlements to ensure the worker is receiving all appropriate entitlements including Supports for Daily Living. As the worker's recovery is progressing the Case Manager adjusts the worker's entitlements accordingly.

See <u>Entitlement Expectations</u>, <u>Decision Making</u> and <u>Decision Letters</u> for making and communicating entitlement decisions. Note copies of decision letters are sent to the worker's healthcare provider.

The claim file is updated with any new or revised entitlement decisions.

ACTIVITY 5 CASE PLAN REVIEW & UPDATE

Based on new or different medical information, the Case Manager updates the Case Plan Goal, The Case Plan Goal Date, Objective, Methods and tasks. See <u>Case Planning</u> and <u>Case Plan Review</u> for more details.

DOCUMENTATION

The Case Manager ensures the claim file is up to date with the following information:

Diagnosis
Restrictions
Related medical issues
Treatment plan & progress
Recovery status
Return to Work status
Entitlement decisions
Communications with the worker, their healthcare provider and WCB Healthcare Services
Reports from the worker's healthcare provider or WCB Healthcare Services
Any resulting claim tasks required to monitor or manage the worker's recovery

NEXT STEPS

ASSESSING	PLANNING	MANAGING	CLOSING
Medical Management is followed by the RTW – Pre- Injury Employer or RTW – Alternate Employment Goal			