Risk Factors on New Claims

There are no formal system red flag identifiers on our system, however our decision makers are trained to identify high risk claims and put a plan in place to mitigate the risk. Some of the high risk factors are:

- Employers object to the claim
- The injury is minor but the workers pain levels are high
- The worker didn't seek medical attention immediately following the injury
- Previous history of long term claims for a minor injury
- No return to work discussion
- No functional abilities noted on the medical report
- No family doctor
- A note on the physicians report asking for a call from the case manager
- No change in the workers medical condition

If a risk factor is presented the decision maker will:

- Involve an Early and Safe Return to Work (ESRTW) facilitator
 - This process can start before the claim is accepted. The ESRTW facilitator will contact the employer, worker and health care provider to explore return to work options. The facilitator will visit the work site and provide assistance to the employer regarding the return to work process. This will occur while the worker is recovering from the work injury. The focus is to keep the worker in contact with the workplace.

Team reviews

- The case manager, team lead and a health care consultant will meet to discuss the workers functional abilities and develop a case plan with a view of employability.
- Team Lead consultation
 - The team leads provide leadership and coaching to the client service teams in the appropriate management of their claims including case consultation and problem solving.
- Empower referral
 - The decision maker may refer the client to a multi-disciplinary assessment program for the purpose of assisting workers, employers and case managers to

identify an effective treatment plan to facilitate early and safe return to work. The program consists of a medical doctor, and an occupational therapist, who are able to access a physiotherapist, a chiropractor, an orthopedic surgeon, a physiatrist and high tech diagnostics when clinically indicated. Following admission, the team will have a case conference with the injured worker, their health care provider and case manager. See attached brochure for further information.

- Independent medical exam (IME)
 - o The decision may refer the worker for an IME if required
- The decision maker will make an extra effort to contact the workers doctor.
- If the decision maker is not satisfied with the discussion, one of the Commissions doctors will contact the workers doctor and have a "colleague to colleague" discussion.