

## **Psychological Injuries**

### **What are the claim volumes in your jurisdiction? Has there been in significant changes in claim volumes in recent years?**

- 2019: 4,562 claims reported
- 2020: 4,492 claims reported
- 2021: 4,171 claims reported as of 09/30
- Claim volumes are up 25% over 2020 YTD

### **Has there been any recent policy or legislation changes concerning coverage?**

- 2018: Mental Disorder Presumption Clause for first responders.
- 2019: Mental Disorder presumption expanded to other first responders.
- 2020: Provision for preventative health care on certain pending claims when medical evidence shows the worker's health could significantly deteriorate.

### **What are the current challenges you are experiencing?**

- Legislative requirement for DSM diagnosis.
- Limited access to proactive and effective trauma focused care with a return-to-work focus.
- Need for employer education and increased understanding of psychological injuries.
- Physical injuries with psychological overlay impacting return to work.

### **Are there any new initiatives that your jurisdiction is undertaking?**

- A twelve-part mental health professional development series for staff
- Two improvements to the psychology assessment referral process were implemented, each of which will better serve workers and streamline the process for providers and for our own teams. The first is a revision to the language of the provider referral form (83B107) so that it elicits more comprehensive information, including more information on a worker's abilities. The second is the introduction of an online referral tool within CMS that guides the user through a streamlined, semi-automated process to fill out referrals.
- A new senior adjudicator role has been added to focus on the adjudication of more complex cases such as mental disorders and activity-related soft-tissue disorders. We have now recruited the first wave of 12 senior adjudicators who are starting training in October.

### **Have you had any success in identifying effective treatment options?**

- We have had some success in incorporating Clinical Occupation Therapy Advisors to support RTW planning in our Mental Health Claims Unit.

## **COVID-19**

### **What are the volume of claims filed for COVID-19?**

COVID-19 illness claims volumes:

- To September 30, 6,516 COVID-19 illness claims have been registered.
  - 4,242 claims have been allowed and 1,398 claims have been disallowed.
  - The remaining claims are pending for medical or other information (146), suspended (567), or have been rejected/do not require adjudication (163).

Allow rate:

- Claims are allowed when there is sufficient evidence to establish that the worker has COVID-19 and the risk of contracting the disease in the workplace was significantly higher than the risk to the public at large.
- As of August 20th, 2020, COVID-19 cases are first considered under Schedule 1 of the Worker's Compensation Act. Schedule 1 provides a presumption that communicable viral pathogens, such as COVID-19, are caused from work, unless proven otherwise.
- Most of the disallowed claims are "exposure only" – that is, the worker was potentially exposed, tested, and/or required to self-isolate, but didn't actually develop the illness, as confirmed with a negative test result or absence of symptoms.
- When the exposure-only claims are excluded from the disallowed claims, the allow rate is approximately 94%. This better reflects the allow rate on claims where the worker developed COVID-19.
  - In the 6% of these claims that were disallowed, either COVID-19 was confirmed but there was no exposure in the workplace; or there was not sufficient evidence to establish that the worker had COVID-19 or any disease or condition caused by work.
  - When the exposure-only claims are included in the disallowed claims, the allow rate is approximately 75%.

Support for workers with allowed COVID-19 claims:

- The full range of available benefits and services has been provided to workers with allowed claims.

COVID-19 vaccine:

- WorkSafeBC accepts work-related claims for an adverse reaction to the COVID-19 vaccine, when the COVID-19 vaccination is a mandatory requirement of employment or reasonably perceived to be a mandatory requirement.

**Have there been challenges in the management of existing claims for COVID-19 and how have you managed these challenges?**

- Claims & Rehabilitation Services has multi-disciplinary teams supporting the recovery and return to work for workers (and their employers) with COVID-19 illness claims. These teams include physicians with backgrounds in public health, occupational disease, and internal medicine, return-to-work specialists with nursing backgrounds, psychologists, and case managers with occupational disease expertise.
- Most workers with COVID-19 have recovered and returned to work. Around 200 workers continue to experience prolonged symptoms from COVID.

**What has been your experience in terms of effective treatment programs for COVID 19 claims?**

- WorkSafeBC has arranged specialized Post-Acute COVID-19 assessment services (modelled on provincial post-COVID recovery clinics), for workers continuing to struggle with their symptoms and experience difficulties returning to work and life post-COVID. Workers may be referred for additional treatment, including occupational therapy or rehabilitation services.

**Has the pandemic had an impact on overall claim volumes and duration for non-COVID 19 claims? Please elaborate on same.**

- The Sep 2021 YTD number of claims registered has increased by 12.8% when compared to 2020. The reason is that March-September 2021 saw significant increases in claims registered (due to BC's economic recovery) while March-September 2020 saw significant decreases (primarily due to the initial economic lockdown). When comparing to 2019 (the more normal operational baseline not impacted by COVID-19), the September 2021 YTD number of 106,039 is still lower by 10.7% than the 2019 number of 118,798 which indicates that the economy is still in recovery mode.
- The 17% increase in YTD STD claims first-paid was primarily driven by the significant increase in COVID-19 timeloss claims and lower 2020 volumes. When comparing to 2019, the Sep 2021 YTD number has increased by 1%.
- Between December 2019 and November 2020, STD duration increased by 10 days from 62.7 to 72.8 which was the highest value it has ever reached. This increase was mainly driven by increases in the volumes of mental disorder and chronic pain claims, increasing claim complexity, and challenges in returning workers back to their original positions with their original employer due to the economic recession triggered by COVID-19. Between Nov 2020 and Apr 2021, the measure has exhibited a decreasing trend and dropped by more than three days to 69.7. This decrease was mainly driven by (1) the improved returning to work opportunities due to BC's economic recovery that has started in Q4 2020; (2) a 14% drop in mental disorder claims that occurred between Jul 2020 and Apr 2021; and (3) an increase in the number of COVID-19 claims that started in Nov 2020 which contributed 0.5 days to the 3-day decrease due to the fact that COVID-19 claims' average duration is more than two times lower than the average duration of other claims. Between Apr 2021

and Sep 2021, the measure has exhibited an increasing trend, reaching 71.5 in Sep 2021. This recent increase has been mainly driven by an increase in mental disorder claims whose volumes have grown by 9% between Apr 2021 and Sep 2021.

**What challenges have arisen from the pandemic and how have you addressed these challenges?**

- Access to treatment and travel to treatment were initially very challenging but virtual options have made a difference.
- Deployment to WFH was disruptive for the initial period.
- Reduced stay at work, modified work and employment opportunities.
- RTW hesitancy due to pandemic.

**Working from Home**

**Are your staff continuing to work from home as a result of the pandemic?**

- 90% of WSBC staff continue to work remotely

**What challenges have you experienced with working from home and what measures have been put in place to address these challenges?**

- Measuring and managing productivity
- Onboarding new staff in a virtual environment
- Staff recognition and engagement

**Is your jurisdiction considering, (or already implemented), a long term working from home program? If so, please provide details concerning same.**

- We continue to prepare for the first iteration of our hybrid work model.
- Staff personas have been developed and our people fall into three categories:
  - Mobile
  - Primarily in the office
  - Primarily WFH
- Staff who primarily WFH were recently given the opportunity to express a personal preference to come in the office more frequently than the established operational requirement. We will now conduct space planning and technology development to support having bookable work-stations in our offices.
- Our hybrid model first iteration will not start until it is deemed safe to proceed.
- As of November 1, 2021 only staff and contractors who have attested to being fully vaccinated will be allowed to enter our buildings.