What’s Next? The Life Cycle of a Workers’ Comp Claim

Or: What to do and When to Do it
Kristin Brusegard and Jim Germain
Getting Started

http://mn.gov/admin

Getting Started
Information and Privacy Statement

Workers' Compensation Program
Department of Administration
Information and Privacy Statement

The Minnesota Government Data Practices Act (DPA) requires that you be informed of the following:

1. The information you provide to the Department of Administration under these rules for the Form Report of Injury or Illness, any follow-up reports, or incident data will be collected for the purpose of recording and analyzing the cause of injuries, illness and incidents. The data is used to prepare reports and evaluations to Department, clients, and others. The information may be shared with local, state, federal, and private agencies for the purpose of injury prevention and education. This data is required by law and, if not provided, may result in the termination of state workers' compensation benefits. If you do not want to provide this information, please write to the Administrator General, Social Insurance, PO Box 2002, St. Paul, MN 55165 or call 651-296-3529, or email info1@state.mn.us.

2. You have the right to review the information that we collect about you. However, if you do not provide complete and accurate information, we may not be able to process your claim for benefits or make decisions about your health and welfare. If you do not want to provide this information, please write to the Administrator General, Social Insurance, PO Box 2002, St. Paul, MN 55165 or call 651-296-3529, or email info1@state.mn.us.

I have read the notice regarding information and privacy as set forth.

Date
Signature

Injury, Illness, Incident Data Form
Crash Records Request

Getting Started
For Injured Employees

Lost Time Injuries

The Process...

...and the Pitfalls

- Claim is reported
- Timely?
  - Penalties for late filing, late payments, late denials
  - Pay/deny decisions
- Accurately?
  - Injury description
  - Body parts claimed vs admitted
- Verify employee address and phone
  - Difficult to contact in the electronic age
Lost Time Injuries

- Inquire/verify re: second employment
  - Another potential for wage loss payment obligations
- Initial medical treatment
  - Managed Care Network and initial bill payment
- Any issues/concerns for the employer
  - What don’t we know that you do? Impacts to the claim or decisions
- First Fill Card
  - Payment/process
- Work Ability report
  - What CAN the employee do in their injured state?

Work Ability Form

[Image of Work Ability Form]
Lost Time Injuries

- Why have an early Return to Work Program?
  An employee’s chance for successfully resuming his or her regular job is maximized if the employee returns to work soon after the injury.
- Implementing an early RTW program:
  - Communicates to the injured employee that he or she is a valued member of the team and is wanted back at work
  - Keeps injured employees productive, engaged and connected
  - Reduces overall WC program costs

Lost Time Injuries

- Employer issues or concerns with the claim?
  Impact on claim investigation or handling decisions
  What don't we know that you do?
- Claims department reviews injury description
  Verify claims versus medical treatment
- Verify facts/injuries with 3 point contact (employer, employee and medical provider)
  Verify facts, statements, circumstances
- Who is handling the claim in ADMIN/RMD?
  Contact the WCC or call 651-201-3000
Lost Time Injuries

– Any similar prior injuries? Any suspicion of pre-existing conditions?
  What conditions? How recently was treatment?
  Temporary or permanent aggravation?
  Continuation of some prior condition?
– Send authorizations for prior medical records
  Temporary denial?
– Review current and prior medical notes

Lost Time Injuries

– Make a compensability decision
  Accept the claim, deny the claim or accept a portion of the claim.
– Make initial payment
– Monitor ongoing treatment, changes in treatment/restrictions
  Changes to employer’s ability to accommodate?
– Treatment Parameters
  Limitations/exclusions of care
Notice of Insurer’s Liability Determination

Lost Time Injuries

- File NOIPLD within 14 days of the first day of lost time or notice of time loss
  - Late denial penalties
- Monitor the ongoing medical treatment and follow up with NCM(Corvel)
  - Verify treatment is reasonable & necessary for claimed/admitted condition
- Pay any wage loss benefits that may be owed
  - Late payment penalties, upset employees
Employee Bi-Weekly Timesheet

Lost Time Injuries

- Follow up with the NCM, employer and employee regarding treatment, change in restrictions, etc.
  
  It's all about managing the information

- Is light duty work available?

  Light duty task lists and assignments
  
  Cost of ongoing wage loss benefits
Lost Time Injuries

- New information available that may impact the claim
  Outside activities, effect on liability?
- If there is ongoing lost time, assign a QRC to assist with return to work
  Employee chosen QRCs
- Obtain a job description, forward with relevant medicals to the QRC
- Work with QRC, employer and employee to identify light duty job opportunities
  Identifying light duty work, communication with employees

Notice of Intention to Discontinue Workers’ Comp Benefits
## Health Care Provider Report

<table>
<thead>
<tr>
<th>Patient ID</th>
<th>Name</th>
<th>Date of Birth</th>
<th>Address</th>
<th>Phone</th>
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<tr>
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<td>John Doe</td>
<td>1990-01-01</td>
<td>123 Main St</td>
<td>555-1234</td>
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### Notice of Benefit Payment

<table>
<thead>
<tr>
<th>Plan</th>
<th>Type</th>
<th>Coverage Period</th>
<th>Amount</th>
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<td>$5000</td>
</tr>
<tr>
<td>PPO</td>
<td>Minor</td>
<td>01/01/2022 - 12/31/2022</td>
<td>$1000</td>
</tr>
</tbody>
</table>

HMO: Health Maintenance Organization  
PPO: Preferred Provider Organization
Medical Only Injuries

The Process...

...and the Pitfalls

- Claim is reported
- Timely?
  - no penalties for late filing, but denials are still filed with DLI
  - Pay/deny decisions
- Accurately?
  - Injury description
  - Body parts claimed vs admitted
- Verify employee address and phone
  - Difficult to contact in the electronic age
Medical Only Injuries

- Inquire/verify re: second employment
  Another potential for wage loss payment obligations
- Initial medical treatment
  Managed Care Network and initial bill payment
- Any issues/concerns for the employer
  What don’t we know that you do? Impacts to the claim or decisions
- First Fill Card
  Payment/process
- Work Ability report
  What CAN the employee do in their injured state?

Work Ability Form
Medical Only Injuries

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  Impact on claim investigation or handling decisions
  What don’t we know that you do?
- Claims department reviews injury description
  Verify claims versus medical treatment
- Verify facts/injuries with 3 point contact (employer, employee and medical provider)
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- Who is handling the claim in ADMIN/RMD?
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Medical Only Injuries

- Any similar prior injuries? Any suspicion of pre-existing conditions?
  What conditions? How recently was treatment?
  Temporary or permanent aggravation?
  Continuation of some prior condition?
- Send authorizations for prior medical records
  Temporary denial?
- Review current and prior medical notes
Medical Only Injuries

- Make a compensability decision
  Accept the claim, deny the claim or accept a portion of the claim.

- Monitor ongoing treatment, changes in treatment/restrictions
  Changes to employer’s ability to accommodate?

- Treatment Parameters
  Limitations/exclusions of care

Notice of Insurer’s Liability Determination
Medical Only Injuries

- File NOIPLD within 14 days of the first day of lost time or notice of time loss
  For Medical Only claims, only filed for denials
- Monitor the ongoing medical treatment and follow up with NCM(Corvel)
  Verify treatment is reasonable & necessary for claimed/admitted condition
- Pay any wage loss benefits that may be owed
  For medical only claims, only applies to wage loss reimbursements, upset employees

Medical Only Injuries

- Follow up with the NCM, employer and employee regarding treatment, change in restrictions, etc.
  Communication is the key
- Is light duty work available?
  Communication is the key to RTW
  The longer an employee is off work, the more difficult it is to get them to return
  Cost of ongoing wage loss benefits
Medical Only Injuries

- New information available that may impact the claim
  Outside activities, effect on liability?
- If there is ongoing lost time, assign a QRC to assist with return to work
  Employee chosen QRCs
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  Identifying light duty work, communication with employees

Litigation

- Litigation
  Primary Liability
  Medical Request
  Medical Response
  Rehabilitation Request
  Rehabilitation Response
  Claim Petition
Litigation/ Settlement

- Discussions
- Authority
- Stipulation
- Resignation
- Award
- Surveillance??

Health Care Provider Report
Notice of Benefit Payment

Good Luck!
Questions