WCC Mandatory Training

2006
Team work

.... The whole is greater than the sum of the parts
Team Members:

- Client
- Claims Representative/Defense Counsel
- Plaintiff Attorney
- Medical Case Manager
- Vocational Case Manager
- Vocational Evaluators
- PT/OT and other Medical Providers
Cannot effect successful return to work efficiently if

- One person working alone
- Parties working at odds
- Parties not working in concert
- Parties not experienced
- Parties without expertise in the needed area
Rights of the Client According to The American Nurses Association (1988)

- A fair and comprehensive assessment
- To have access to needed health and social services
- To be treated with respect and dignity
- To self discrimination
- To privacy and
- To a grievous procedure
- Confidentiality
- To know the cost of services
- To be notified of any changes of services
- To withdraw from the case management process

Client Rights from the Maryland WCC Voc Rehab Plan follow….
Maryland WCC Rehab Plan
Client Rights

1. This plan is an agreement, which outlines each party’s responsibility.
2. The Insurer will pay rehabilitation benefits.
3. The time frames agreed to by the parties can be extended if necessary by the parties.
4. I do not have to accept any employment offered to me unless I agree that it is suitable employment.
5. The Insurer may stop benefit payments if the Insurer determines that rehabilitation services are no longer necessary.
6. If my benefit payments are stopped for any reason with which I do not agree, I have the right to request a hearing.
7. I have a right to be an active participant in my rehabilitation.
8. I have a right to confer with an attorney regarding the terms of the rehabilitation plan.
Claims Representative/Defense Counsel

The role of claim adjusters and defense attorneys in the rehabilitation process is to know and understand the parameters of the law and to ensure its accurate application.

Maryland law requires employers/insurers to provide rehabilitation services under specific guidelines.

Under these guidelines, claim adjusters must procure professional rehabilitation services which are reasonably necessary to secure suitable gainful employment. Good Practice Manual
The role of the adjuster is to investigate whether or not an injury is compensable. To qualify for compensation of an occupational injury or disease –

- The employee must have an accident that causes an injury during the course of employment.
- The injury must have occurred in the course of employment.
- The employee must be exposed to the disease during the course of employment.
- The injury must be unexpected and usually traceable to a definite time, place, and cause. Excerpted from an article in the Nursing Spectrum
Insurance Company Cont.

Claim adjusters and defense attorneys
actions are guided by statutory
requirements as well as the
contractual obligations set forth in
the insurance policy.

To the extent that these statutory
requirements and contractual
obligations are met, claim adjusters
and defense attorneys have acted
ethically. Good Practice Manual
Plaintiff Attorney

The claimant's attorney has a critical role in the vocational rehabilitation process. The claimant's attorney functions as both a champion of rights of the client and counselor to the informational and emotional needs of the claimant. He or she can help to shape the process into the best possible chance for claimant's return to suitable gainful employment.

The plaintiff attorney can set the tone for how claimant works with other team members. It is important to enlist his or her help with any problems. Good Practice Manual
Medical Case Manager

“The Commission's regulations state that these case management services include but are not limited to interviewing the worker for the purposes of implementing and coordinating services with the injured worker and the health care providers.” Good Practice Manual
The Maryland Board of Nursing Regulations Governing Worker Compensation Medical Case Managers state that medical case management for the injured worker includes but is not limited to:

- Case Assessment
- Implementation And Coordination Of Services With The Injured Worker's Family
- Health Care Provider
- Evaluation Of Treatment Results
- Coordinating Community Reentry
- Return To Work With The Employer Of Injury
- Recommendations For Further Vocational Rehabilitation Services
The major functions which the RN-WCCM performs include:

- Case Management
- Task Assignment
- Life Care Planning
- Advocacy
- Cost Containment
- Ethical Decision Making
Vocational Counselors

Rehabilitation Counselors are committed to facilitating personal, social, and economic independence of individuals.

Work with people, programs, institutions, and service delivery systems.

Rehabilitation counselors recognize that both action and inaction can be facilitating or debilitating.

May provide counseling, vocational exploration and vocational assessment; evaluation of social, medical, vocational, and psychiatric information, job placement and job development services, and other rehabilitation services.

Must demonstrate adherence to ethical standards and must ensure that the standards are enforced vigorously.

CRCC
Vocational Evaluation is a specialty profession within Rehabilitation. The focus is on identifying appropriate employment outcomes for individuals with disabilities utilizing a holistic approach.

In contrast to the brief assessment typically completed by Vocational Counselors, a vocational evaluation (career assessment) is more comprehensive and includes assessment of interests, temperaments, career awareness, transferable skills, work skills through real or simulated work, work behaviors, job seeking and keeping skills, achievement, aptitude, dexterity, learning style, accommodations and supports.

Vocational evaluators must adhere to ethical standards of practice for the profession in accordance with:

- International Professional Association – Vocational Evaluation & Career Assessment Professionals (VECAP)
- National Certifying Body - The Commission on Certification of Work Adjustment & Vocational Evaluation Specialists (CCWAVES)
- State Standards – Division of Vocational Rehabilitation Services Career Assessment Services System (CAS)

Vocational evaluators are certified through CCWAVES. The Certified Vocational Evaluator (CVE) designation assures that minimum competencies are achieved.
Milestones

Although Each Member Plays a different role and may have a different emphasis – in general, the following apply:

- Assessment
- Plan
- Evaluation/Re-evaluate
- Resolution
Assessment

An assessment is the process of collecting and analyzing all the medical, educational, vocational, social, legal, and economic information of an injured employee, including the injured employee's present physical and mental ability to participate in rehabilitation services and determining the appropriate rehabilitation services reasonably necessary to return the injured employee to suitable gainful employment.

Good Practice Manual
When is Vocational Evaluation (Career Assessment) Appropriate for an Injured Worker?

- If a clear vocational goal cannot be identified using less intensive assessment means
- If there are numerous complicating factors affecting the individual’s ability to return to work
- If a second opinion is needed in highly contested cases
As each individual is unique, the assessment process will vary depending upon his/her particular circumstances. The following hierarchy outlines the various levels of assessment:

- **Referral Confirmation**
- **File Review**
- **Initial Interview**
  - Areas covered during the initial interview include:
    - a. Medical Information
    - b. Educational Background
    - c. Vocational History
    - d. Social –
    - e. Legal Information
    - f. Economic Circumstances
- **Job Analysis**
- **Assessment of Functional Capacity (PT/OT)**
- **Transferable Work Skills Analysis** (vocational case managers)
- **Vocational Assessment or Evaluation** (vocational case managers, vocational evaluators)
Suitable Gainful Employment

- Workers’ Compensation Law LE 9-670(c) defines “suitable gainful employment” as employment, including self-employment, that restores the disabled covered employee, to the extent as possible, to the level of support of the time of:

- If an accidental personal injury, the accidental personal injury; or
- If an occupational disease, disablement form occupational disease.
Return to work hierarchy

- Same employer, same job
- Same employer, different job
- Different employer, same job
- Different employer, different job
- On the job training
- Retraining for new career
- Self employment
- Independent living
RTW Same Employer/Job

- Can the client return to pre-injury level of function?
- Can the client return to work in an alternate capacity?
- Will some combination be feasible?
  - Light Duty
  - Modified Duty
  - Transitional Return to Work
It is essential that the initial career goal selected by the injured worker be researched in the local market to determine its feasibility.

- Is the job available?
- Would the injured worker be physically and mentally capable of performing the demands of the job as defined by employers?
- Would the injured worker need further qualifications (such as formal training to obtain entry into the chosen occupation?)
- Is it possible to obtain on-the-job training in this occupation?
- Would a combination of formal training and job placement be more effective?
Resolution

Once the injured worker is returned to function/work, the rehabilitation professional must follow-up to make sure that no problems, such as:

- changes in the job duties or work environment
- non-cooperation of the employee, his co-workers, or the supervisor

The rehabilitation professional should also verify that the new employee's performance is acceptable to the supervisor/employer.
PT/OT Case Management

- Licensed health care professional
- Registered with the Workers’ Compensation Commission
PT/OT Activities

Contraindications for participating in Industrial Rehabilitation
- The client is not medically stable
- The client has other medical problems that would adversely be affected by the testing, such as cardiac difficulties

Guidelines for the paperwork
- Physician’s order not required
- Informed consent to evaluate and/or to treat
- Medical Release of Records
- Medical Records
- Job Description
- Functional Job Description

*Information for PT/OT primarily from Julie Howar’s Maryland Workers’ Compensation Training for Physical and Occupational Therapists 2005*
What are the basic services?

- Functional Capacity Evaluation
- Work Hardening Program
- Work Conditioning Program
- Job Analysis
Functional Capacity Evaluation

An objective determination of the level of function.
Components could include:
Medical History
Musculoskeletal Assessment including range of motion, strength neurological functioning
Worker Behaviors
Functional Abilities including present physical demand level
Ability to perform essential functions
Impressions and Recommendations
<table>
<thead>
<tr>
<th>PHYSICAL DEMAND LEVEL</th>
<th>OCCASIONAL 0 - 33% of the workday</th>
<th>FREQUENT 34 - 66% of the workday</th>
<th>CONSTANT 67 - 100% of the workday</th>
<th>TYPICAL ENERGY REQUIRED</th>
</tr>
</thead>
<tbody>
<tr>
<td>SEDENTARY</td>
<td>10 lbs.</td>
<td>Negligible</td>
<td>Negligible</td>
<td>1.5 - 2.1 METS</td>
</tr>
<tr>
<td>LIGHT</td>
<td>20 lbs.</td>
<td>10 lbs. and/or Walk/Stand/Push/Pull of Arm/Leg controls</td>
<td>Negligible and/or Push/Pull of Arm/Leg controls while seated</td>
<td>2.2 - 3.5 METS</td>
</tr>
<tr>
<td>MEDIUM</td>
<td>20 to 50 lbs.</td>
<td>10 to 25 lbs.</td>
<td>10 lbs.</td>
<td>3.6 - 6.3 METS</td>
</tr>
<tr>
<td>HEAVY</td>
<td>50 to 100 lbs.</td>
<td>25 to 50 lbs.</td>
<td>10 to 20 lbs.</td>
<td>6.4 - 7.5 METS</td>
</tr>
<tr>
<td>VERY HEAVY</td>
<td>Over 100 lbs.</td>
<td>Over 50 lbs.</td>
<td>Over 20 lbs.</td>
<td>Over 7.5 METS</td>
</tr>
</tbody>
</table>
Definition of Work Hardening

“A highly structured, goal oriented, individualized treatment program designed to return the person to work.” Work hardening programs use real or simulated work activities designed to restore physical, behavioral, and vocational function.

CARF
Definition of Work Conditioning

“a work related, intensive, and goal-oriented treatment program specifically designed to restore an individual’s systemic, neuro-muscular (strength, endurance, flexibility, etc.) and cardiopulmonary function.” The objective of the work conditioning program is to restore the client’s physical capacity and function so the client can “return to work”.

APTA
Medical Case Management

Today, case management strategies have been embraced in a managed care environment within the workers’ compensation marketplace. The nurse case manager role will continue to expand. Essential skills include expert clinical abilities, high-level communication techniques, and knowledge of planning and work reentry and reintegration for maximum effectiveness. Excerpt from an article in the Nursing Spectrum.
Medical Case Manager
Activities

Data collection and assessment: The First Report of Injury is frequently the first factual account of the accident that telephonic case managers receive.

The case manager needs to obtain, review, and analyze all pertinent medical information, including medical history, current status, diagnosis, prognosis, and current treatment plan.

Data analysis, diagnosis, and establishment of goals: After the acute phase of the injury, the case manager will assess the patient’s temporary or permanent alterations in function resulting from the injury.

Community and Work Reintegration: The final phase of the case management process is facilitating the Return to Work or permanent modified alternative duty.

In collaboration with the medical provider, the insured worker reaches medical stability and maximum improvement, and all treatment ceases.

If competitive employment is not an option for the client, the case manager helps identify community resources and/or vocational rehabilitation counseling.

Excerpt from an article in the Nursing Spectrum
Assess the progress being made in reaching the vocational goal.
Meetings determined on a case by case basis.
Responsibilities for communicating the results of these meetings and any necessary plan revisions should have been identified in the rehabilitation plan.
All parties who agreed to the components of the rehabilitation plan must be kept apprised of its progress.
As return to work is the ultimate goal of the rehabilitation plan, the provision of job placement services is critical to the process.
Before an injured worker is actually placed in a job, the rehabilitation professional must make sure that both the employer and the injured worker understand the conditions of employment,
It is advisable that the position being offered is discussed with the treating physician, possibly utilizing a job analysis.
Vocational Case Management Activities

If in job development, you should strive to provide 10 – 15 job leads per week, obtain the same amount from the injured worker, schedule at least one interview per week, and attend one or two if feasible. Appropriate leads beyond those listed on the rehabilitation plan may also be pursued.
PT/OT Time Based Injury Treatment Algorithm

Insurance Company / Case Manager Communication System

1-3 Weeks

Injury
Medical Exam & Treatment NLT-2 Days

Acute PT NTE - 6 Weeks
Medical Re-Evaluation NLT - 21 Days

Active PT NTE - 6 Weeks
Medical Re-Evaluation NLT - 12 Weeks

Job Task Analysis

Function Capacity Evaluation 3 Months ADI

Work Hardening NTE - 6 Weeks

Release To Work Full Duty

Release To Work Modified Duty

Settlement and / or Case Closure

3 Months and over

Vocational Consultant (Job Placement)

Medical Re-Evaluation NLT - 24 Weeks

Return To Work

Acute Injury Phase 1-3 weeks

Sub-Acute Injury Phase 4-12 weeks

Chronic Injury Phase 3 months & over

75% of People Return To Work

80% of People Have Returned To Work

90% of People Have Returned To Work

ADI = After Date of Injury
NLT= No Longer Than
NTE = Not To Exceed
Within 24 Hours

- Open File/Obtain records
- Contact all parties (plaintiff attorney permission required for client)
- Acknowledgement Letters
- State Forms – R33 and VR-7?
  - PT/OT – VR7 referral form.
General Time Frames for Case Management
Within two weeks if possible:

- Send letter confirming date and location of initial interview
- Meet with client
- Confirm all demographic/contact information
- Relate hierarchy and role
- Obtain signed release
Prior to Initial Report

- Obtain any additional necessary information, for example:
  - Medicals
  - Job Description
  - Transferable Skills Analysis*/Testing
  - Employer contact re: employment status

- Report recommendations to all parties
Immediately

- **Update claims representative and injured worker’s attorney:**
  - Return to work (include details)
  - No show/no call
  - Non-attendance of interview
- **Return calls from either claims representative or injured worker’s attorney.**
Begin case management, following your own recommendations and revise as necessary.

- **For Vocational Staff:** You must complete a Maryland WCC Rehabilitation Plan that will be signed by all parties. You may use simultaneous faxes to distribute, attach individual signatures to the body of the plan and file with the WCC for stipulation. Attached to the plan should be the initial report, Functional capacities documentation, and labor market documentation. Suitable gainful employment definitions are a factor in deciding which job targets to include.

- Complete WCC-R33 every 90 days, if assigned.
Initial Report

- Demographic Information
- Medical, vocational and educational history
- Psycho-social and financial information that is pertinent
- Current functioning level
- Client interests/goals
- Recommendations with time frames
- Complete WCC-R33 if assigned and VR7 referral form
Begin case management, following your own recommendations and revise as necessary Cont.

- **For Medical Staff:** If an injured worker is unable to return to work in his previous occupation, you may feel that training concurrent with medical case management (for example, GED) would be beneficial. If this is the case, a vocational counselor will need to complete a rehabilitation plan, submit it to all parties for their signature, and file it with the WCC for stipulation.

- Complete WCC-R33 every 90 days
Documentation

- Document your activities in your case notes.
- Include pertinent details without being unnecessarily wordy.
- ALWAYS INCLUDE insurance company file number in message or email.
- State your name (spell it if it is unusual and the claims representative is not familiar with you).
- Provide contact numbers where you can be easily reached.
- Copy all correspondence to the WCC and claims representative and/or attorney (depending to whom you are writing).
Monthly Reporting

- Report at least monthly.
- Some insurance companies have guidelines in terms of report formats/time frames and billing codes.
- Be mindful of your language. Always include an overall summary.
- Always include recommendations with timeframes.
- Your report should not come as a surprise to any party as you are maintaining constant verbal communication throughout the life of the case.
- Reports are primarily reviewed by the Commission at the time of a hearing, so they should be objective.
Closure

- **For Medical Staff:** This is normally done when an injured worker reaches MMI, returns to work, or case management can no longer have a benefit to the injured worker.

- **For Vocational Staff:** This is normally done when an injured worker returns to work, settles his case, states he is not interested in vocational services and his attorney concurs, or proves non-cooperative.

- **For PT/OT:** This is normally done when the injured worker has reached a plateau, functionally and will not benefit from further service.

- Closure reports should summarize your work on the entire file.

- Complete WCC-R33 if assigned &/or VR2 closure form
Task Assignments

Expectations on how you will handle task assignments often vary between insurance companies and, even, claims representatives. Here are a few tips to ensure your task assignment goes smoothly:

- Clarify the scope of the current assignment
- Update the referral source within 24 hours of completion (same day if possible)
- Notify the referral source of any additional needs you identify
- If asked to close the file ask if the referral source would like you to call them at a future date to determine if additional services are needed
Rehab Plans

- Research your plan – the new WCC guidelines require objective support for your goals in working with injured workers. ACINET.ORG is a great site for obtaining general labor market information.

- Write your plan. It should be completed immediately following initial assessment after verbally receiving authorization of your recommendations.

- Forward the plan via fax or email to the claims representative.

- Forward the claims representative-signed plan to the injured worker’s attorney and the injured worker. Review the plan with the injured worker at the earliest possible time and attempt to get signature, don’t forget to have the injured worker sign the rights and responsibilities statement.
Rehab Plans Cont.

- Once all signatures are obtained, forward to the WCC with the stipulation as soon as possible for a stipulation order. Stipulation makes this agreement a legal, binding document. Until the rehab plan is stipulated it is an informal contract.
- When you receive the notice of stipulation copy all parties.
- If you receive approval to extend a plan from an claims representative complete page one of the plan indicating an extension and send to the WCC. Copy all parties.
- All OJT, Training, and Self-employment plans must also include labor market surveys.