



WHITEPAPER

# Harnessing the Power of Case Management to Succeed in the Year Ahead

A summary of trends  
affecting workers' comp  
clinical delivery in 2021

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The past year upended many of the longstanding practices in workers' comp case management. The coronavirus pandemic shuttered businesses, closed provider offices, delayed treatments, postponed surgeries, and brought telemedicine and telehealth front and center. It permeated all aspects of our industry and our lives, both at work and home.

Issues such as opioids and mental health remained at the forefront of the workers' comp industry in 2020. COVID-19, the disease caused by the virus, exacerbated the severity of these and other challenges and underscored the importance of focusing on advocacy and engagement to connect with injured employees. The pandemic will continue to magnify such issues as we enter the new year, and, as a result, these trends will persist into 2021. Others will emerge with new significance and impact on the workers' comp industry. The most pressing are listed in the graphic below.

How will employers and payers successfully address these challenges while managing return-to-work outcomes and keeping workers' comp costs in line? Case managers can play a crucial role in bridging this gap. By establishing trust, setting clear measurable goals, and engaging the injured employee in their own recovery the case manager addresses these challenges head on. They have the expertise, training, and experience to provide the necessary guidance, support, and education needed to keep the injured employee on the path to recovery.

## COVID-19 PANDEMIC



**Delays in treatment  
and limited access  
to care**



**Evolution  
of work**



**Social determinants  
of health**



**Opioid crisis  
escalation**



**Effects of mental  
health on recovery  
and return to work**



**Impact of engagement  
and advocacy on the  
bottom line**



## Delays in Treatment and Limited Access to Traditional Care

The pandemic caused significant disruption to hospital services, surgeries, and access to traditional care for millions of injured employees. As injured employees faced temporary office closures, postponed surgeries, and cancelled therapy appointments, the industry looked to telemedicine, telehealth, and digital coaching tools to assist injured employees in new ways. This trend is expected to continue into 2021 and beyond.

### Is Telemedicine Here to Stay?

Prior to the pandemic, particularly in workers' compensation, most telemedicine visits were being conducted by providers who specialized in the delivery of primary or occupational medicine via a video connection. Since the start of the pandemic, we have seen the number expand markedly. [NCCI](#) recently cited a telemedicine provider with more than 200 percent increase in total patient visits between second quarter 2019 and second quarter 2020. Specialty providers like orthopedic surgeons adapted by conducting pre-op and post-op visits remotely and physical therapists became adept at conducting sessions via video connection, when practicable.

As a result of COVID-19 and its impact to access to care, almost all states have either adopted emergency rules that allow telemedicine or relaxed existing regulations. Some notable changes include:

- Allowing for an injured employee's home to serve as an originating site
- Allowing for an initial visit to be conducted via telemedicine
- Relaxing HIPAA requirements for technology, which now allows for the use of common video chat applications, such as Apple's FaceTime, to conduct telemedicine visits
- Relaxing requirements for same-state licensure to treat an injured employee
- Requiring parity in payment with an office visit

The ability to use telemedicine as an alternative to traditional office visits to ensure no disruption in care has benefited providers who are less inclined to bring patients in for routine and follow-up visits. In addition, [telerehabilitation](#) has also been thrust into the future to help injured employees continue their rehab treatment while adhering to safety precautions aimed at slowing the spread of the virus.

## Psychosocial and environmental factors that can affect surgery outcome

- › Does the injured person have a support person?
- › Do they have a clean and adequate home environment?
- › Will there be access issues?
- › Do they have transportation to and from providers and the hospital?

What remains to be seen is whether and how states might continue with telemedicine as a part of ongoing patient care once the crisis passes. As we move forward into a post-COVID-19 future, telemedicine can be considered as an alternative to in-person care on less complex injuries in order to streamline injury intake, assessment, and treatment to help injured employees get back to work.

## Elective Surgeries on Hold, Again

A [recent study](#) estimates that more than 72 percent of surgeries worldwide were postponed in the first 12 weeks of the pandemic. And now some elective surgeries are [going on](#) hold again in many parts of the U.S. and Canada. More delays to elective surgeries can have a significant impact on both medical recovery and associated disability durations. Case managers understand this issue and they know their injured employees. They help bridge the gap during this delay and help eliminate barriers up front to ensure no issues arise post-op. Case managers work to educate injured employees on all aspects of the surgical process including preparing for a hospital stay, providing complete understanding of the diagnosis, surgical procedure and expected recovery. They address psychosocial and environmental factors that could hamper recovery and return-to-work. Case managers also know their local physicians and often have an opportunity to advance an appointment or surgery.

This increased pre-surgical timeframe pre-sents an opportunity to address health factors that are significant risks. Smoking, high BMI, cardiovascular health, uncontrolled blood sugar, and anxiety or depression can all be improved pre-surgery. [Studies have shown](#) this makes a huge difference in surgical outcomes and recovery times. It can help offset complications associated with surgical delays and have lasting positive impacts on the patient. Case managers deliver health coaching and education every day. In addition, there are digital tools built specifically to help injured employees prepare for and recover from surgery. Such tools provide touchpoints, actionable insights, and accountability with tangible steps to make progress in the recovery process.



# Opioid Crisis Escalation

As 2020 opened, a persistent opioid overdose epidemic was near the forefront of a list of national concerns in the U.S. Some [20 million Americans are reported to have a substance use disorder and two million of those misuse opioids](#). There was some room for optimism at the start of 2020, however, due to the fact that opioid-related deaths had begun to [trend down](#) in 2019 for the first time in decade. That optimism was quickly overshadowed when the pandemic arrived early in the year, reshaping so much of everyday life as well as public health interventions. For those struggling with an opioid use disorder, the pandemic no doubt contributed to the daily challenge of managing that condition.

## Covid Crisis Leads to Increase in Substance Abuse

The mental health impact of quarantine, isolation and related stress, access-to-care issues related to social distancing, etc., are not the least among these. Early indicators of all substance overuse in the pandemic are concerning. One national laboratory company, [Millennium Health](#), reported increases of 32 percent for the presence of non-prescribed fentanyl, 20 percent for methamphetamine, 10 percent for cocaine and 13 percent for heroin in a survey of 500,000 urine drug screens performed between mid-March and May 2020. A [Nielsen report](#) indicated that alcohol sales were up by nearly 27 percent in the same period and early data from a national tracking system at the University of Baltimore pointed to an 18 percent [increase](#) in suspected drug overdoses in this same period.

## Case Managers Are Key in Avoiding Misuse and Abuse

Case managers can focus on claims that are at-risk due to emerging and complex pharmacy utilization. By using a wide lens to manage all aspects of the claim, a specially trained case manager can:

- Ensure patient engagement, safety, and education
- Confirm pharmacy utilization is medically appropriate and supports a timely recovery
- Enable timely medical stability and return-to-work
- Consult the adjuster or employer when complex pharmacy issues are identified on open claims

Case managers also play a key role in identifying a comprehensive pain management solution that looks beyond solely medications only and explores other avenues of pain management such as cognitive behavioral therapy, mindfulness and general health and wellness.



# Evolution of Work

How, where, and when we work is changing. So is work itself. Changes in work environments, demographics, available jobs, and automation are reinventing the workplace. Due to COVID-19, the country is facing high unemployment, slow job growth, as well as challenges in keeping frontline and essential employees safe. At the same time, scarcity of employees with sufficient skills for in-demand areas like high-tech manufacturing or health care is widening the chasm between what employers need and what employees can offer.

## Millennials Dominate the Workforce and Older Employees Also Increase

In the U.S., five generations are working side-by-side. Millennials—roughly those ages 24 to 39 in 2020—are the largest component of the workforce. Yet older employees delaying retirement are the fastest-growing segment. Employers often prize these employees' experience. But older employees are injured more often and generally take longer to recover.

## Automation Will Transform the Workplace in 10–20 years

Automation will change how we work and what it means to work. One study expects most large U.S. metro areas will see 55 percent of jobs disappear in 20 years. Back-office work and food preparation are at risk yet so are many white-collar occupations. Before then, more jobs will change rather than go away. One forecast says 85 percent of 2030's jobs do not exist today.

## Communication Is Key As We Continue to Diversify

As the workforce continues to diversify, case managers will play a key role in providing health literacy and communicating important health information to injured employees. The U.S. population is seeing an increase in the percentage of people who are of Hispanic and Asian descent. In 2017, foreign-born employees made up 17.1 percent of the labor force. (Hispanics/ Latinos represented about half that group while Asians comprised about a quarter.) By 2024, Hispanics/Latinos are projected to be nearly one-fifth of the workforce as a result of being the fastest-growing ethnic group. Because these and other demographic shifts, injured employee coaching and education tools must expand beyond English and Spanish offerings. This will be critical to improving the ability of injured employees to access information, make informed decisions, and improve their health literacy.



# Effects of Mental Health on Recovery and Return to Work

When someone gets hurt on the job, the workers' compensation system is adept at zeroing in on an injury and delivering timely care. But that well-intentioned focus on a patient's physical bruises can make it easy to miss the mental ones, which might be harder to spot.

To achieve the best outcomes and get someone back to work with minimal delay, it is wise to focus on the whole person, including whatever mental-health toll the episode might be exacting. Failing to do so risks treating only part of an injury and achieving an insufficient recovery.

Today, a comprehensive approach that identifies and meets an injured employee's needs is more important than ever because the coronavirus pandemic is blanketing everyday life with added stresses around finances, lack of child care, home schooling, caring and worry for loved ones that threaten to imperil an employee's recovery.

## Depression Often Follows Workplace Injuries

Experience shows that numerous forces push and pull at employees after they are injured. Concerns over access to care, quality and timeliness of care, financial concerns, fear of loss of job, uncertainty as to whether they will recover play enormous roles in laying out the courses of employees' recoveries. Yet, the more we dig into claims and research, the more we understand that less-apparent variables can also tilt the direction many cases take.

One [study](#) revealed the likelihood of injured employees being treated for depression was 45 percent greater compared with employees who were not injured. And getting hurt on the job, in particular, brings a heightened risk of mental hardship. A group of researchers [found](#) people who were injured at work were more likely to become depressed than those who were hurt outside of work. The researchers surmised that worries about reduced income, for example, might be partly to blame. They also noted, not surprisingly, that increased severity correlated with a higher likelihood of depression.



## Mental Health Stressors

- › Loss of “normalcy” in daily life
- › Financial strains
- › Working from home
- › Child education
- › Safe access to health care
- › Family health
- › Prolonged isolation
- › Loss of life of family and friends
- › Adapting to change

## The Coronavirus Pandemic is Exacerbating a Stress Pandemic

In the U.S., COVID-19 restrictions, widespread layoffs, school closures, and social unrest are forging daily life into one big pressure cooker. Many employees are feeling it. A late-June snapshot of the mental state of U.S. adults from the Centers for Disease Control & Prevention revealed that younger adults, racial and ethnic minorities, essential employees, and unpaid adult caregivers reported suffering “disproportionately worse” states of mental health as well as higher substance misuse and increased thoughts of suicide.

For those recovering from a workplace injury, the pandemic has introduced new hurdles that might make injured employees more vulnerable to increased stress and further delay in recovery. Among them:

- Delayed recovery may be experienced by injured employees as treatment and/ or access to safe health care services might be limited or unavailable. For those who have access to telehealth services, technology use can create challenges and stress.
- Closure of health care facilities and support services present added challenges.
- Some injured employees might not be able to access needed health care services due to business closures related to lack of patients and/or staffing challenges.
- Fears over unemployment and changing roles in the workplace bring added stress.
- Modified or return-to-work opportunities might be unavailable due to downsizing of workforces.
- Changing business models adapting to COVID-19 could force employees to adapt to new roles

It is imperative that adjusters and case managers consider the whole person and work to uncover underlying behaviors that could signal an injured employee is having trouble managing the attendant stress of an injury. As with the need to ask questions about mental wellness from the start, it is important to routinely look for signs that mental-health challenges are beginning to bubble up.

**The estimated lifetime prevalence of PTSD in the U.S. is**

**8.7%**

- › Does the employee appear less confident about making a speedy recovery and getting back to work?
- › Does the employee appear to be turning to self-destructive behaviors in an attempt to cope?
- › Is the employee receptive to recommendations for self-care and other means of promoting wellness?

Asking these types of questions regularly can help indicate whether an employee might be enduring a mental-health condition such as depression, which can hurt the chances for a successful return-to-work. And taking action to identify potential barriers is important because we know the longer employees are away, the less likely they are to return at all.

## PTSD and Crisis Response

Nine in 10 people in the U.S. will be exposed to at least one traumatic event in their lifetimes. For some, the events will carry lasting consequences. The estimated lifetime prevalence of post-traumatic stress disorder (PTSD) in the U.S. is 8.7 percent. For first-responders such as paramedics, the rate is as high as 20 percent.

Some of these traumatic events can unfold at work. Nearly two million American employees report having been victims of workplace violence each year. Even that large number understates the problem because many cases go unreported. Research has identified factors that might increase the risk of violence for employees in some situations.

In workers' comp, we know what to do when someone is catastrophically injured. We can marshal an array of clinical resources to coordinate care for the injured employee. But oftentimes those who witness a catastrophic event without sustaining physical injury might be overlooked. Trauma can disrupt a worksite in many ways. Employees who witness a traumatic event may experience acute psychological crisis. An employee's response might vary depending upon factors such as her proximity to an incident or his or her ability to cope with stressful situations. A crisis situation at the worksite can reduce employees' motivation, hamper productivity, and even cause some people to leave a job. These effects can ripple through the organization. Chaos and disorganization can harm overall productivity if employees are unable to cope or are absent from work.

Crisis intervention seeks to address the needs of those who are exposed to a critical event. Critical incident stress management (CISM) is a comprehensive, systematic, and multifaceted approach to managing traumatic stress within an organization or a community. It focuses on assisting both individuals and groups that have experienced a traumatic event. The goal is to mitigate the effects of a critical incident and assist employees in recovering as quickly as possible. Often referred to as psychological first aid, crisis intervention can be administered with small groups (e.g., debriefings) or with individuals. This allows employees to share their thoughts and feelings about an incident while a crisis interventionist watches for signs of stress and discomfort. This professional can then offer to hold one-on-one meetings with any employee who wishes to participate.

The goal of any crisis intervention is to mitigate the harmful effect of traumatic stress, provide support, and offer encouragement to accelerate recovery. Doing so is not only the right thing to do. It also can mitigate losses to productivity at an individual and organizational level. And crisis intervention should seek to make appropriate referrals to qualified mental health professionals and other providers when indicated. If the needed resources are not available through an EAP or through an employer health plan, a referral should be made to community resources.

## Relying on Proven Tools Can Help Guide Injured Employees Back to Health

For complex claims case managers can use techniques and tools such as active listening and behavioral coaching to facilitate improvement and boost the likelihood of a successful return-to-work. We know these methods can promote success. A [review](#) of research pointed to the apparent benefits of tools such as rehabilitation programs and psychosocial interventions in getting injured employees back on the job.

At first, the mental and emotional components to a recovery might appear vague, not visible to the treating provider, and perhaps even secondary to employees' ongoing physical needs. Yet waiting to go back and sweep up the mental-health aspects of an injury well after strains begin to emerge can jeopardize the pace and degree of recovery. Instead, by uncovering those underlying psychosocial issues from the outset, it is possible to help an injured employee grapple with some of the forces taxing mental welfare.



# Social Determinants of Health Drive Outcomes and Cost for Injured Employees

According to the non-profit Robert Wood Johnson Foundation, 80 percent of health outcomes are determined by non-clinical factors. Therefore, it only makes sense to examine the social determinants of health and their impact on recovery and return-to-work. As we do this, we should look for ways to align our care-management approach to identify and address non-medical barriers.

## We Have Always Known Social Determinants Are Important

For case managers, it is hard to ignore social determinants of health even if they have not always applied that term to what they are observing. Case managers get to know the injured employee and their families on a more intimate level. They can help ensure clinical programs avoid the pitfalls of treating the primary diagnosis only. Instead, they can look at the whole person and identify those social determinants of health that might be impeding recovery.

Social determinant of health can have a tremendous effect on outcomes. We are seeing evidence of that already with disparities in how different groups respond to COVID-19. Social determinants play an outsized role because, in many ways, they represent the rest of our story—the part that is not always found in a medical record. It is whether we have steady employment or what our home life is like or whether we can obtain healthy food.

Here are some of the major factors:

- **Economic stability:** More often than not, an injured employee's income is reduced while off work. Given that nearly eight in 10 U.S. employees live paycheck-to-paycheck, a reduction in earnings can disrupt recoveries by causing stress over finances. A 2017 [survey](#) from the job website CareerBuilder revealed several startling statistics related to debt, budgeting, and making ends meet.
- **Physical environment:** It is important to assess housing, transportation, and safety needs of injured employees. Do they have transportation to their medical appointments? Do they live in a clean and safe environment that promotes healing or is there risk of infection or re-injury?
- **Education:** In order to connect with injured employees, we need to understand their literacy level and ensure our communication and education about their condition is easily comprehensible.

# Social Determinants of Health



## Economic Stability

- › Employment
- › Debt
- › Income
- › Medical bills
- › Expenses
- › Support



## Neighborhood and Physical Environment

- › Housing
- › Parks
- › Transportation
- › Playgrounds
- › Safety
- › Walkability
- › ZIP code/  
geography



## Food

- › Hunger
- › Access to healthy options



## Community and Social Context

- › Stress
- › Social integration
- › Support systems
- › Community engagement



## Education

- › Literacy
- › Vocational training
- › Language
- › Higher education
- › Early childhood education



## Health Care System

- › Health coverage
- › Provider linguistic and cultural competency
- › Provider availability
- › Quality of care

- **Access to healthy food:** Having access to healthy food options is an important part of promoting a strong recovery. Unhealthy eating can lead to weight gain and myriad chronic conditions such as high blood pressure, diabetes, and heart disease. Beyond that, unhealthy food options might also lead to malnutrition on the other end of the spectrum. Both scenarios can lead to complications and prolonged recoveries.
- **Community and social context:** The role other people play in promoting injured employees' recoveries can be overlooked. Do the injured employees have support systems? Can they care for themselves? Will they need outside support during their recovery to assist with activities of daily living? Are they socially isolated because their only means of socialization was work?
- **Health care:** Do injured employees have access to quality medical treatment? Are they compliant with the recommended treatment plans? Is return to work incorporated into the treatment plan?

## Get to Know Employees by Knowing What is Affecting Them

Meeting employees where they are and understanding the challenges they face gives us the best chance at helping them achieve the best possible outcomes. A deeper understanding of the circumstances surrounding our injured employees will allow us to intervene in more impactful ways. Most injured employees will appreciate that we are showing genuine interest in them. Beyond understanding the hurdles that might be present, it is important for employees to simply know we're addressing their needs on a deeper level. Understanding the social determinants of health affecting employees is crucial to understanding employees and to supporting their path to recovery.



# Impact of Injured Employee Engagement and Advocacy on the Bottom Line

Inherent to solving for all the above, case managers must be advocates for the injured employees they serve. It is their duty to educate, coach, and engage the employees to enable them to make the most informed decisions related to their own recovery and return to work. Terms such as advocacy, engagement, coaching, and even “whole-person approach” have been much talked about within workers’ compensation—for good reason. The discussion around a whole-person approach generates a number of important questions. For one, how do case managers support the whole person by offering one comprehensive solution? And what part can digital health programs play in meeting the needs of injured employees? Further, how do case managers deliver a personalized experience and meet injured employees where they are in their journey to recovery?

Patient engagement must be built on a foundation of trust. Once you have trust, you can educate patients about what they can do to enhance their recovery—and you make them partners in the process. Just remember that education needs to be relevant to the individual’s needs, fears, and motivations, and that it must be carried out with a focus on the whole person. Once you figure out what motivates them, you can leverage that to increase engagement.

## Focus on What is Truly Relevant to the Injured Employee

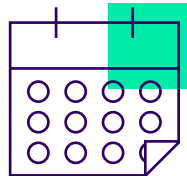
In addition to addressing medical issues, case managers can approach the individual holistically, looking at all the factors that are likely to drive the individual’s recovery and return-to-work. To that end, case managers trained in active listening, motivational interviewing and cognitive behavior therapy techniques can probe for underlying issues such as what is standing in the way of participation in rehabilitation, fear of reinjury or return-to-work, full understanding of the nature of diagnosis and rationale for treatment, pre-existing conditions, etc. These skills allow the case manager to identify, reinforce, and leverage each individual’s motivation and to engage the injured employee in the process of change. Understanding the injured employee as a whole person, rather than simply as a diagnosis, gives the case manager more to work with in terms of enhancing engagement in both recovery and return-to-work.



Case managers know from experience that they cannot take patient compliance for granted. For many reasons, injured employees often do not follow a treatment plan. It is also clear that doctors cannot fire any single magic bullet to change this aspect of patient behavior. Change comes when patients are actively engaged in the process and when they understand:

- The “why” behind the treatment plan
- How following the plan benefits them
- How they can accomplish the steps necessary to reach the goal

Getting patients engaged is not complicated, yet it does require providers to make investments in both time and effort. Providers must engage in a process of active listening to understand what the patient understands and then re-educate the patient, as necessary. This practice requires more than a five-minute lecture. It also involves attention to factors that fall outside of many providers’ comfort zones—such as language, culture, patients’ fears, etc.



## The Year Ahead

There is no doubt 2021 will continue to be a challenging year at work and home.

The trends impacting case management delivery will continue to be affected by the pandemic and the industry must be flexible and creative in delivering services and engaging with injured employees in their recovery and return-to-work. Case managers should focus on advocating for injured employees and unearthing barriers to recovery including, access to food banks if necessary, internet connection, and cell service for telemedicine visits with providers. As always, communication with all involved parties is key to identify opportunities for return to work during recovery and most importantly with the injured employee to recognize signs of distress.





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