

TEAMWORK MAKES THE DREAM WORK

*The Importance of Communication and
Collaboration from Three Perspectives*

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The Client Perspective

These elements
are the core of
our Workers'
Compensation
Program:

Risk reporting

Risk reduction and prevention

**Reduce the likelihood of disputes and/or
prolonged claims through coordination**

Interactive return to work process

Reporting



Employees are encouraged to immediately report injuries to the leaders



Leaders are required to report incidents within three days of the notification of injury



Leaders are encouraged to prioritize the employee's health by guiding them to seek medical attention as warranted



Workers' Compensation Specialist (WCS) reports the incident to TPA within 48 hours after notification from Leader



Monthly reports are analyzed and provided to Risk Management utilizing data from the TPA's claims system

**Investigating,
Reduction,
and
Prevention**

Leaders investigate the incident to determine the root cause

Leaders involve onsite Duffy Rath Program

EHS determines any corrective action to prevent further incidents/injuries

WCS provides additional details to TPA as needed

Coordination

WCS initiates contact with employee to provide a general guide for workplace injury/illness/incidents

TPA follows up with employee to gather facts, determine compensability, administer benefits, and manage medical treatment

Leaders, HR, and EHS are updated with the work status including lost or restricted days

EHS determines any corrective action to prevent further incidents/injuries

TPA meets with WCS and Risk Management quarterly to review open claims to discuss status and action plans towards return to work and closure

Return-to-Work

WCS and HR provides reassurances to injured employees that it will not impact their job security and inform them of expectations of returning to work

TPA provides detailed job descriptions for medical professionals to evaluate return to work

Utilize job descriptions and guidance from department and HR to determine appropriate return to work duties

WCS engages Legal to conform to FLMA/ADA practices

The TPA Perspective



Consistency

The TPA coordinates with the employer and attorney to ensure all parties have the same understanding of the case's status, avoiding contradictory actions.



Timeliness

The TPA facilitates prompt updates on claim developments, ensuring no party is left out of the loop.



Clarity

By clarifying legal and procedural language, the TPA ensures employers can understand their responsibilities and options.



The Wishlist

<input checked="" type="checkbox"/> Accurate and timely injury reporting	<input checked="" type="checkbox"/> Policy details	<input checked="" type="checkbox"/> Timely Updates
<input checked="" type="checkbox"/> Proactive engagement on the process	<input checked="" type="checkbox"/> A dedicated point of contact	<input checked="" type="checkbox"/> Support for investigations
<input checked="" type="checkbox"/> Feedback	<input checked="" type="checkbox"/> Open communication	<input checked="" type="checkbox"/> Celebrate wins

Building Trust & Strong Communication



Clarity and Accessibility

- Provide transparent fees & claims info
- Offer clear performance metrics
- Ensure resources are quickly and easily accessible



Align Goals

- Clarify expectations early
- Unified vision: cost, rehab, swift resolution
- Provide complete documentation



Recognize Expertise

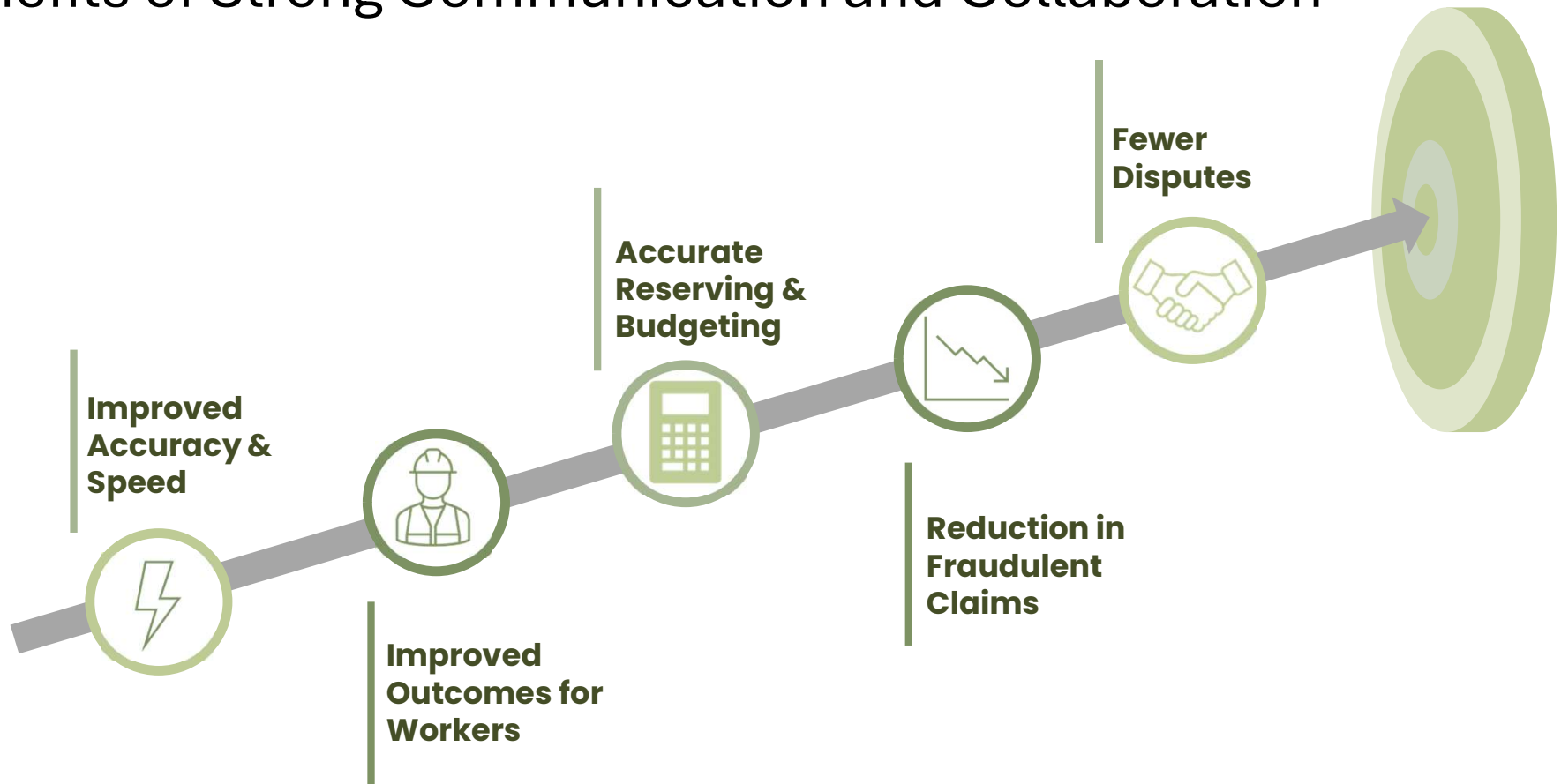
- Value each party's role
- Share challenges openly, invite input
- Leverage each party's professional insights



Foster Collaboration

- Training & intros for new clients/team
- Regular status updates
- Client portals for real time info

Benefits of Strong Communication and Collaboration



Pitfalls to Avoid in Communication

-  Delays in reporting and responses
-  Inconsistent or incomplete information
-  Assumptions instead of clarification
-  Lack of designated contact or back up
-  Over communication without purpose or focus
-  Avoiding difficult conversations
-  Ignoring feedback or concerns
-  Failure to engage all parties



The Attorney Perspective

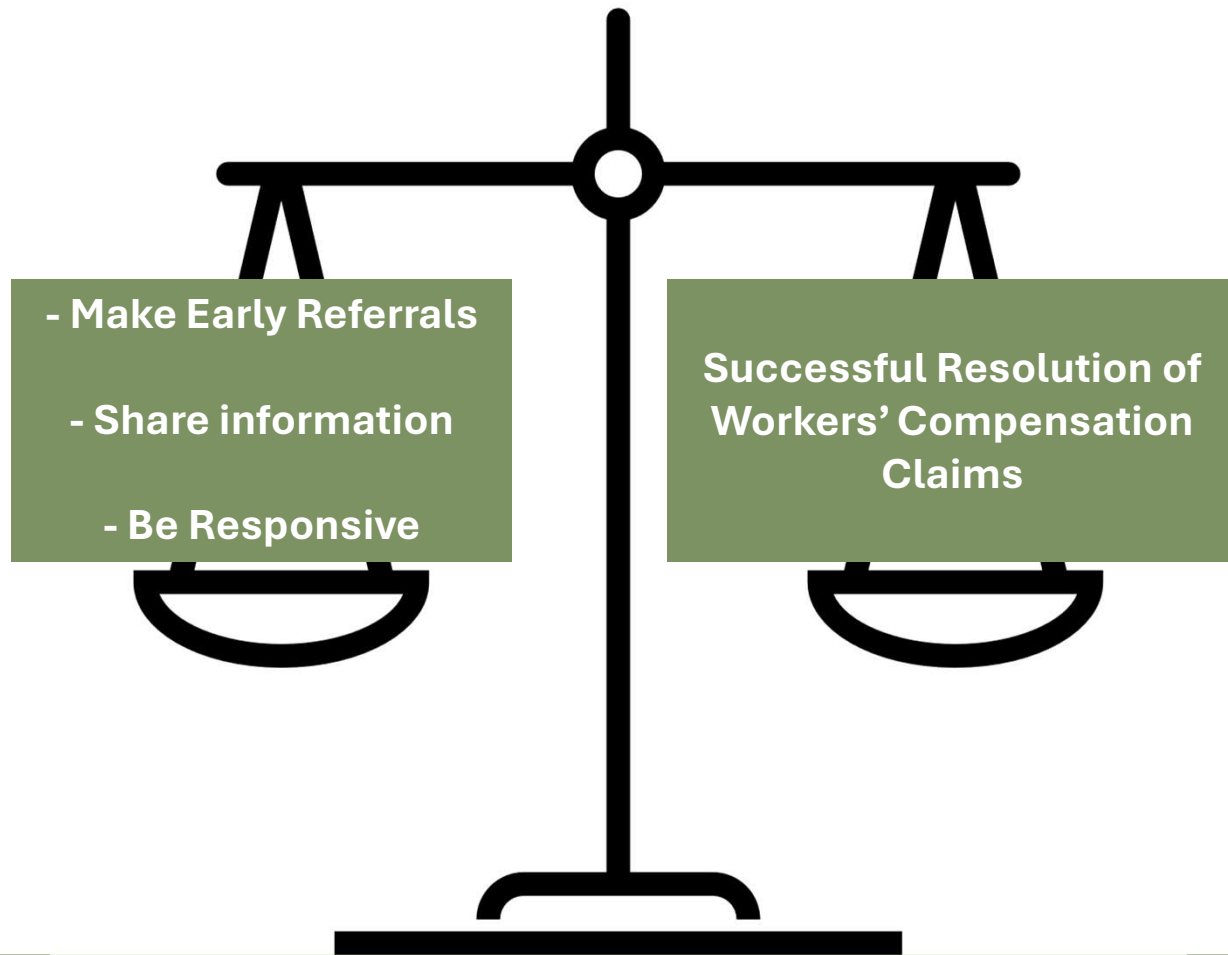
To deny or not to deny? That is the question. . .
best answered in consultation.

Evaluating Compensability

- Just because alleged injury occurred at work doesn't mean it should be accepted.
 - Exceptions/defenses: deviation from employment, coming and going, recreational/social activity, willful intent to injury oneself, horseplay
 - Idiopathic fall: did claimant hit anything on the way down?
 - Is there reason to believe the injury may be pre-existing?
 - Occupational Disease claims should always be denied.

Overcoming Employer Doubts: Questions to Ask

- “Injury wasn’t reported right away” -> more than 30 days?
- “Claimant said he had prior injury” -> how long ago?
- “CCTV footage doesn’t show an accident” -> what kind of accident is alleged?
- Does denial have a chance of success?
- Is the potential exposure worth the fight?
 - When considering the impact of a disgruntled employee and the cost of litigation, perhaps not.



The Importance of Early Referrals

- Don't just handle the claim by yourself and hand it off to defense counsel when a hearing is scheduled
- Common problems
 - Wrong AWW -> awards paid at wrong rate (unhappy employee versus overpayment)
 - Awards paid voluntarily without supporting medical
 - Awards paid at total rate without IME (created PHP)
 - Accepted wrong sites (no supporting medical or injury pre-existing)
 - Paid for treatment that is not causally related

How Early?

- Lost time exceeds waiting period (14 days)
 - Attorney can confirm AWW and payment rate & recommend IME to reduce
 - Priors on C-3 or ISO
 - Attorney can investigate to ensure treatment is causally related
 - Surgery requested
 - Atty can advise regarding IME vs addendum vs records review and authorizing w/o prejudice if medical necessity is confirmed
 - IME scheduled
 - Attorney can confirm which sites to examine and draft cover letter
 - Treatment to sites not initially reported
 - Attorney can advise on filing C8.1Bs and denying tx or authorizing w/o prej.
 - Claimant “lawyered up”
-

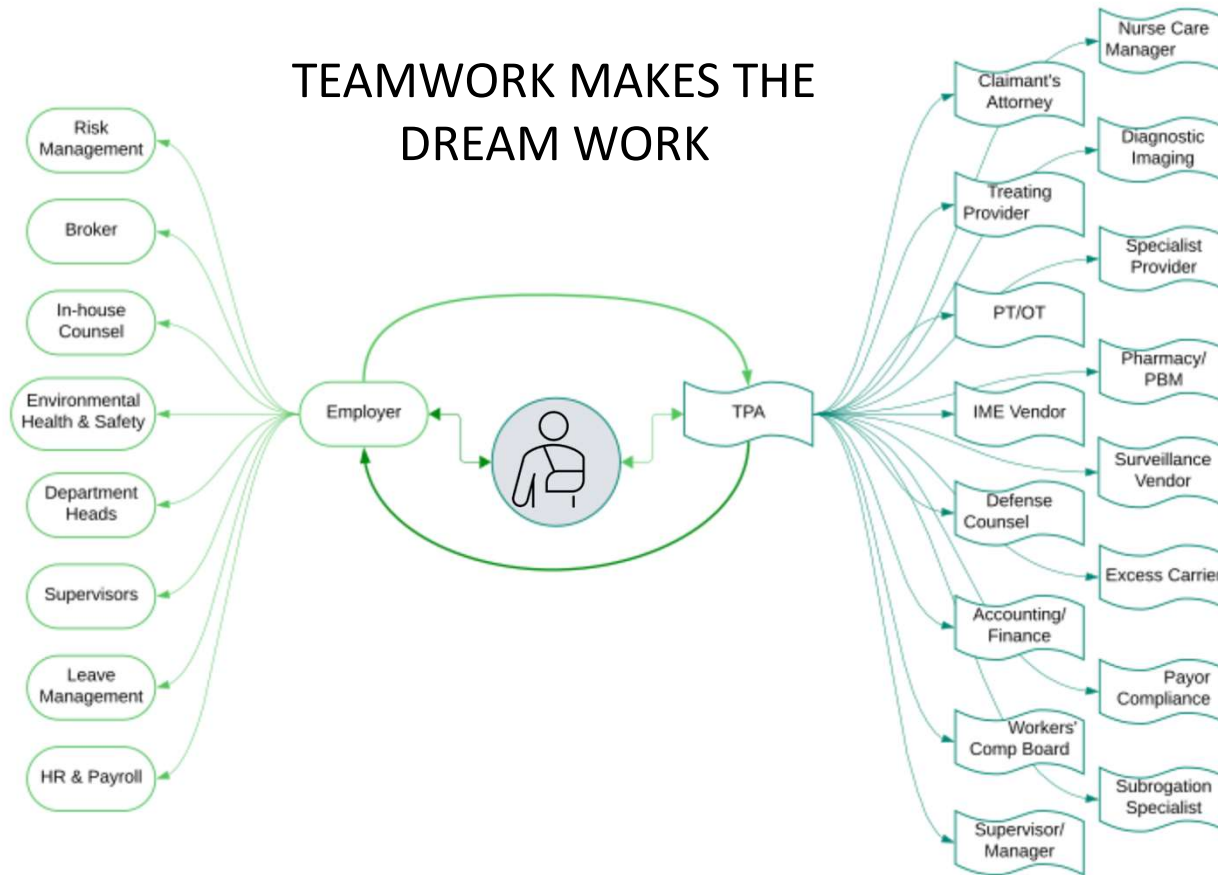
Information Sharing

- Incident report: mechanism of injury and injured sites
 - Does what the claimant initially reported match what the claimant is telling doctors six months later or does the accident now sound more catastrophic in terms of number of sites injured and severity of accident?
- ISO report: prior injuries and potential fraud
- Surveillance: is claimant as disabled as the medical records suggest?
- IME reports: may be able to request a hearing or may need addendum

Be Responsive

- Strengthens relationship / collaborative spirit
- Increases efficiency and cost-effectiveness
- Avoids adverse findings (e.g., attorney is able to explain to the judge why the carrier did not produce a C-240 or obtain timely IME)

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**None of us is as smart as
all of us.**

- Ken Blanchard

