

B8595HC
2. T61-6
Copy 1



**Class of 2008
CPM Project**

Project Title: Tracking Return to Work Status for Workers Compensation Claims

**Susan G. Penley
SC Department of Health & Environmental Control
Office of Personnel Services
2600 Bull Street, Columbia, SC 29201**

February 4, 2008

S. C. STATE LIBRARY

AUG 13 2008

STATE DOCUMENTS

Project Title:

Tracking Return to Work Status for Workers' Compensation Claims

I. Introduction

In 1911, the first workers' compensation laws were enacted in the United States.

Workers' Compensation laws held that the employers should assume the costs of occupational disabilities without regard to the fault involved. Workers' Compensation coverage is required by law and provides benefits to eligible employees who have injuries and illnesses arising out of and in the course of employment. (Workers' Compensation Commission, 2007, ¶1) The basic intent of workers' compensation law is to provide injured workers the money they will not be able to earn as a result of the on-the-job impairments. Workers' compensation is a tradeoff between workers, who give up their ability to sue employers in tort for workplace injuries, and employers who cede the ability to contest liability and to assign fault to the injured worker. (South Carolina Policy Council, 2007, ¶1)

Benefits from workers' compensation may include payment of a portion of the employee's salary, payment of all necessary medical expenses, and other support in returning to gainful work. An important aspect of the workers' compensation process is maintaining records of the injured worker's work status. Workers' compensation physicians will either place the injured worker out of work, release to full duty, or release to modified duty. Focus for this project is to investigate our agency's return to work process.

II. Problem Statement

Return to work is a proactive approach, designed to help restore injured workers to their former lifestyle in the safest and most effective manner possible. Return to work is the process of restoring an injured worker to the fullest physical, psychological, social, vocational, and

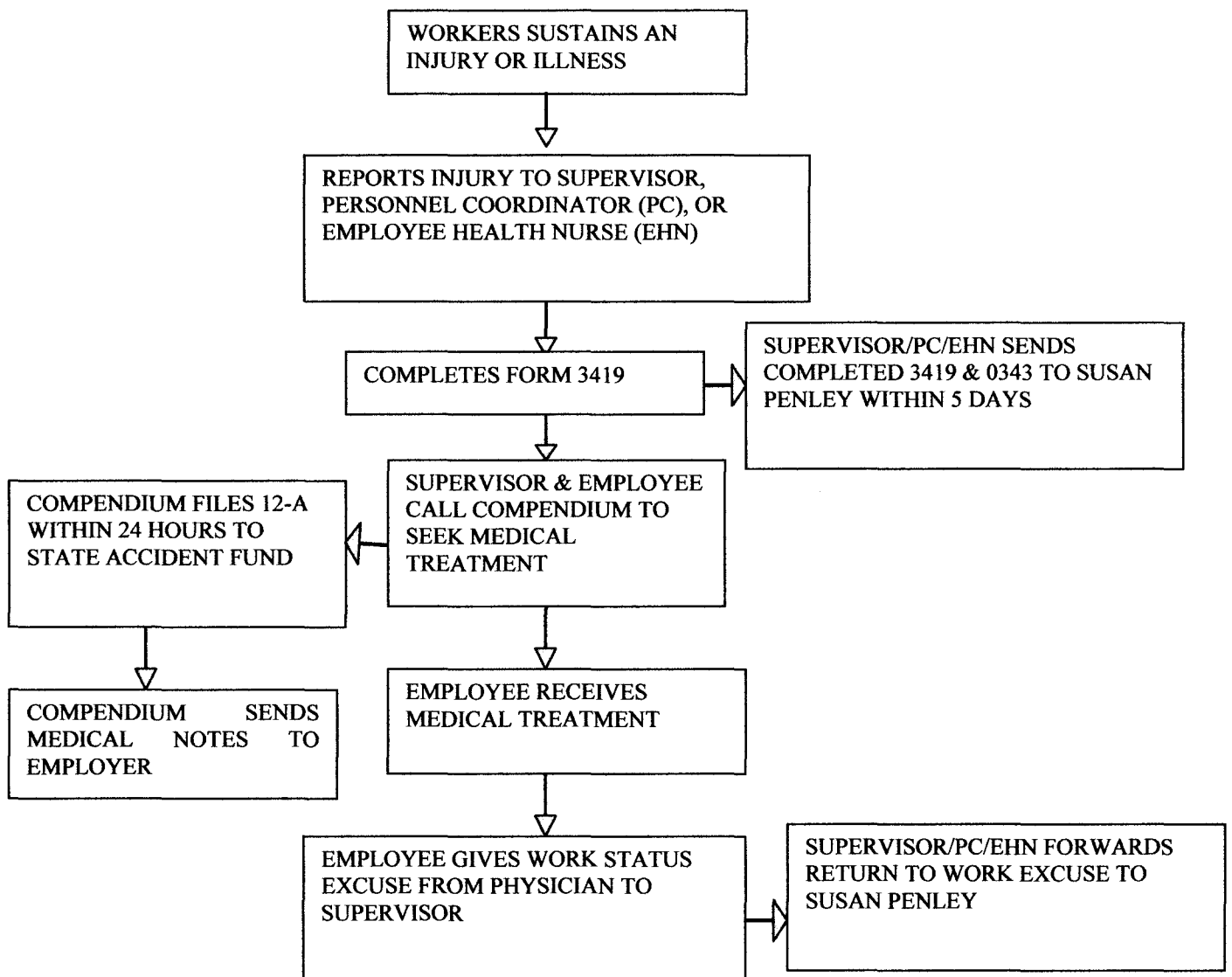
economic function of which they are capable. Tracking the claimant's return to work status is critical to efficiently manage our agency's workers' compensation program. Currently, our agency has no set process for receiving return to work excuses from claimants. We rely on the injured employee, supervisor, personnel coordinator, employee health nurse, physician, or Compendium to communicate return to work status to the agency's workers compensation representative. *(Appendix I)*

Sometimes excuses are never received. It is very important that returned to work excuses are received in a timely manner. There are potential problems for not having an efficient process in place for tracking work status issues. One of most common problems is overpaying the claimant by the employer. Overpayment happens when the employer representative is notified weeks after the claimant has been missing work. Since our payroll works on a time lag, sometimes it is too late to stop a paycheck and the employee is overpaid. This is a hardship for the claimant and employer. It becomes a complicated process trying to collect money from the employee and is not a tolerated practice of the agency. Another potential problem is wasted time tracking down employee and supervisors. Time management is an essential job function. Other problems are leave and insurance issues and not adhering to the Agency's return to work process. Because of these potential problems, it will benefit our Agency to develop a workers compensation and return to work process that is cost effective and in the best interest of employee and employer. The desired outcome is to determine if current process is satisfactory or if there is a more effective way to communicate work status between workers' compensation claimant, workers' compensation physician, and employer representative.

III. Data Collection and Analysis

The first method used in my data collection was a flow chart of the current workers' compensation protocol for our agency. I used this flow chart as a baseline of the current process.

WORK-RELATED INJURY/ILLNESS FLOW CHART (CURRENT PROCESS FOR GATHERING RETURN TO WORK EXCUSES)



This flow chart illustrates the current workers compensation protocol ending at the delivery of the return to work excuse. It reveals that there is a 5-day deadline for the workers' compensation form 3419 and 0343 but no set deadline for the return to work excuse.

Another data collection method used to determine our agency's current process was a tracking log of claims over a four-month period. The purpose of this log was to identify which agency contact notifies the employer representative for the majority of the return to work excuses. There were 40 claims tracked during this period of time. The log revealed that Compendium was the major source that notified employer representative. (*Appendix II.*) In most cases, it took Compendium a week or more to notify employer of work status. The log exposed an internal issue. Paperwork is not being received in a timely manner from supervisor, personnel coordinator, or employee health nurse. Not only were work excuses missing, other workers' compensation forms were not sent to employer representative.

The following S.C. state agencies were contacted by telephone to compare workers' compensation processes: 1) Department of Mental Health, 2) Department of Social Services, 3) Department of Corrections, and 4) Department of Transportation. These agencies are similar in size to the Department of Health and Environmental Control. It was found that each agency used similar workers' compensation protocol. Each agency uses CompEndium Services as the physician case management company. All agencies received return to work status and medical notes from CompEndium Services. Each agency required the employee to submit a return to work excuse to a supervisor. All agencies relied on the supervisor to mail or fax return to work excuse to agency's workers' compensation representative. All representatives stated that they experienced similar delays receiving return to work information from supervisors and CompEndium Services. Final conclusions from interviews were that all agencies experience

time delays in receiving return to work excuses. All agencies have similar workers' compensation protocols that have been in place for many years. No agency had an online system.

CompEndium Services was contacted and interviewed by phone about the return to work notes received by physicians. The interview was conducted with the nurse case manager, Linda Elmore. She stated that they do not receive the same work excuse as the injured worker. She indicated that they fax a form to the physician's office. The physician completes and faxes the dictated notes back to CompEndium. She agreed that there are delays in receiving information from physician. Once the CompEndium nurse receives the form, she then emails those notes to the employer. This explains why there is a week or more delay in receiving the return to work information.

My research also includes interviewing ten commonly used workers compensation physicians in South Carolina. (*Appendix III*) Doctor's offices were interviewed by phone to determine if the return to work information can be sent directly from physician to employer representative. This information will help determine if information can be sent and received within a 24-hour period to the employer representative and serves as another way to compare and contrast how information is received from physician's office. Each doctor's office was asked two questions:

- 1) "What is your standard procedure when issuing return to work excuses?"
- 2) "Can work excuses be faxed or emailed directly to the employer representative within 24 hours?"

All ten offices had similar procedures for issuing return to work excuses. The standard is for each office is to give the injured worker two copies of the work excuse. One copy is for the worker. The nurse instructs worker to give other copy to the employer.

All ten offices gave similar answers to the second question regarding faxing or emailing excuses. All offices agreed that they would fax work excuses within 24 if requested by employer representative. Eight out of ten offices said that they would not automatically fax information. Those offices stated that the employer has to call on each claimant and ask for the information to be faxed to employer. The two remaining offices took down the employer information and agreed the office would directly fax to employer representative on future claimants. None of the ten offices were willing to email the information to employer.

IV. *Implementation Plan*

The data reviewed revealed a few issues at the agency level. First, our agency has no set timeline for receiving return to work excuses. Secondly, it is apparent that our employees and supervisors are not aware of their responsibilities. Our agency does not have any written guidelines for the roles and responsibilities of the employee and supervisor. Finally, our agency representative has no direct contact with workers' compensation physicians.

Here are the proposed solutions for the internal issues:

1) Implement a deadline: require supervisors, personnel coordinators, and employee health nurses to submit the return to work excuses within a 24-hour period after receiving the document. The deadline requirement would be added in bold print to the bottom of the employee occurrence form that is used internally. (*Appendix IV*)

- 2) Create an "Injured at Work-What Are Your Responsibilities" fact sheet. This will be a one page, easy-to-read sheet explaining exactly what procedures are the responsibility of the employee and the supervisor. Employees and supervisor will now have a quick reference document. This document will be attached to the employee occurrence form. (*Appendix V*)
- 3) Create an employer contact document that the injured worker must give to the treating workers' compensation physician. It would be very time consuming for the employer representative to call each doctor's office regarding return work status on each injured worker. Therefore, the injured worker will be instructed to take this document with them to the appointment and hand deliver to the physician. Listed on the form will be the employer's name, address, phone number, name of agency representative, and fax number. Instructions will state for the physician to fax the return to work excuse directly to the employer representative. (*Appendix VI*)

Execute this information as a new workers' compensation packet that must be given to each injured worker at the time of the injury. An email will be sent to all employees informing them of the updated packet of information. This email will be sent as soon as all documents are updated and placed on our forms data base system called RIMS. I will set up onsite training for personnel coordinators and employee health nurses that need additional assistance with the forms and other workers' compensation issues. In the future, a reminder workers' compensation email will be sent all employees at the beginning of each year to reinforce protocol.

IV. Evaluation Method

An effective way to monitor and measure results of this new packet of information is to create another tracking log. This log will be similar to the previous log, tracking the return to work information over a four-month period. I will monitor workers compensation claims to

determine if supervisors or other agency's contacts are following the new time requirement.

This log will also be able to monitor whether or not the employees and physicians are using the employer contact form.

V. *Summary and Recommendations*

In my research there are a few external time delays that can not be controlled by the employer. Doctor's offices are not set up on automated systems and are unwillingly to email return to work information. While communication is made between Compendium and physician, it is not done within a 24-hour period. Gathering of the return to work information is similar among the larger state agencies. It appears at this time, the larger agencies can not afford an online system. It is my recommendation to focus on the three internal issues. The proposed solutions to set timelines, update, and develop new informative workers' compensation forms are simple and relatively no cost to the agency. It is important for our agency to educate employees and bridge the gap of communication. The ultimate solution would be to receive the return to work excuse electronically from the medical provider directly to the employer representative within 24 hours. Perhaps, as technology and budgets improve, more research focus using an online system would be beneficial.

APPENDIX

- I. Definitions**
- II. Tracking Log of DHEC's Workers Compensation Claims**
- III. List of Physicians Interview**
- IV. Updated DHEC Form 3419**
- V. DHEC's Workers' Compensation Fact Sheet**
- VI. DHEC's Physician Instruction Sheet**

Appendix 1

Definitions:

Supervisor: an individual that is responsible for helping the injured worker report the claim and complete the appropriate paperwork. Also responsible for keeping track of any time missed from work and reporting to the personnel coordinator and employer representative.

Personnel Coordinator (PC): an individual that is located out in the different facilities across the state and specializes in human resources. This person is a point of contact for an injured worker. This person is in charge of making sure appropriate workers' compensation paperwork is completed and sent to the employer representative.

Employee Health Nurse (EHN): an individual that protects the health and safety of employees in the workplace from occupational and non-occupational illnesses/injuries. Also a point of contact for injured worker and similar to the personnel coordinator in regards to workers' compensation duties.

Physician: authorized treating physician to whom an employee must go for treatment in the event of a job-related accident, disease or condition.

CompEndium: workers' compensation physician case management company that refers and authorizes medical treatment.

Employer Representative: the person within the agency that is a liaison between employee, employer, workers' compensation insurance company, and physician case management company.

Claimant: the person making the workers' compensation claim.

Appendix II

Tracking Log				
NAME	DATE OF INJURY	REC'D 1st REPORT OF INJURY	REC'D RTW EXCUSE FROM COMPENDIUM	REC'D RTW EXCUSE FROM SUPERVISOR/EHN/PC
N. Clary	07/13/07	yes	rec'd 7/25/07	rec'd 7/18/07 from supervisor
M. Bright	07/13/07	yes	rec'd 8/6/07	no
B. Allen	07/20/07	yes	rec'd 7/30/07	no
C. Dahlgren	07/23/07	yes (missing 3419)	rec'd 8/21/07	no
D. Chestnut	07/24/07	yes	rec'd 8/24/07	rec'd from EHN 8/23/07
B. Isaacs	07/27/07	yes (missing 3419)	rec'd 8/6/07	no
C. Price	07/31/07	yes	rec'd 8/6/07	no
M. Brown	07/31/07	yes	rec'd 8/14/07	no
J. Crain	07/31/07	yes (missing 3419)	rec'd 8/7/07	rec'd from EHN 8/1/07
T. Woodberry	08/01/07	yes	rec'd 8/6/07	no
J. Marcucci	08/01/07	yes	rec'd 8/6/07	yes-telephone 8/6/07
W. Williamson	08/03/07	yes (missing 3419)	rec'd 8/10/07	no
K. Harper	08/09/07	yes (missing 3419)	rec'd 8/20/07	no
J. Gullledge	08/15/07	yes (missing 3419)	rec'd 8/29/07	no
L. Alonzi	08/15/07	yes	rec'd 8/20/07	no
R. Ezell	08/16/07	yes	rec'd 8/20/07	rec'd 8/16/07 by fax
S. Garrett	08/21/07	yes	rec'd 8/29/07	no
C. Waldon	08/22/07	yes	no	no
B. Stevenson	08/22/07	yes	rec'd 8/22/07	contact from claimant, but no excuse rec'd
L. Hawkins	08/28/07	yes	rec'd 8/30/07	no
L. Stevens	08/29/07	ye	rec'd 9/10/07	no
P. Moore	08/30/07	yes (missing 3419)	rec'd 9/24/07	no
V. Crawford	08/30/07	yes	no	rec'd from PC 9/4/07
D. Scott	09/04/07	yes	rec'd 9/11/07	no
U. Klauck	09/06/07	yes	rec'd 9/17/07	rec'd from employee 9/13/07
B. Mims	09/10/07	yes (missing 3419)	rec'd 9/13/07	no
M. Hoffman	09/10/07	yes (missing 3419)	rec'd 9/21/07	no
M. Belt	09/14/07	yes	rec'd 9/20/07	rec'd call from PC on 9/25/07, no note faxed
B. Rogers	09/18/07	yes (missing 3419)	no	no
S. Kennette	09/28/07	yes	rec'd 10/8/07	no
R. Haynes	09/28/07	yes	rec'd 10/8/07	rec'd from EHN 10/3/07
U. Tohid	09/28/07	yes	rec'd 10/18/07	rec'd from PC 10/8/07
L. Raymond	09/29/07	yes (missing 3419)	rec'd 11/27/07	rec'd email/phone call from employee
M. Norris	10/03/07	yes	no	no

J. Wagener	10/04/07	yes	rec'd 10/15/07	rec'd from PC 10/8/07
S. Barnhill	10/05/07	yes	rec'd 10/15/07	no
J. Brewington	10/09/07	yes (missing 3419)	rec'd 10/15/07	no
P. Medlock	10/10/07	yes	rec'd 10/26/07	no
T. Gilchrist	10/12/07	yes	rec'd 11/2/07	no
W. Jones	10/22/07	yes	rec'd 11/2/07	rec'd from PC 12/27/07

Appendix III

List of Physicians Interviewed:

1) Carolina Occupational
1715 Blanding Street
Columbia, SC 29201
803-799-3926

9) Center for Health & Occ Ser
1020 Grove Road
Greenville, SC 29605
864-455-2300

2) Palmetto Health Works
1333 Taylor St. Suite 3 H
Columbia, SC 29220
803-296-3500

10) St Francis Workwell
135 Common Wealth Drive, Ste 120
Greenville, SC 29615
864-675-4600

3) First Care
2406 Decker Blvd
Columbia, SC 29206
803-736-2530

4) Coastal Occupational Health
3605 Meeting Street Road
North Charleston, SC 29405
843-744-3500

5) Providence Northeast Occ Health
114 Gateway Corp Blvd, Ste 430
Columbia, SC 29203

6) Doctors Care Beaufort
1510 S. Ribaut Road
Port Royal, SC 29935
843-770-0676

7) Doctors Care Surfside
1600 Hwy 17 South
Surfside, SC 29575
843-238-1461

8) US Healthworks-Riverview
1393 Celanese Road
Rock Hill, SC 29732
803-329-3103

APPENDIX IV



**Report of Employee Occurrence
Office of Personnel Services**

Name:		SS#:		Date of Birth:	
Address	Marital Status	Male <input type="checkbox"/>	County sdfsd	Phone Number: (home) (work)	
	# Dependents	Female <input type="checkbox"/>			
Division:	Job Title:			Date of Hire:	
District:	How long in current job?				
	Salary	Supervisor's name & phone #			
Date of Occurrence:	Time of Occurrence: <input type="checkbox"/> am <input type="checkbox"/> pm			Time workday began:	
Place of Occurrence: (include State & County) <input type="checkbox"/> Employer's premises	Last work day:	Date employer notified:		Name of person notified:	
	Date returned to work:	Returned to full or modified duty?		Were safeguards provided? <input type="checkbox"/> yes <input type="checkbox"/> no	
Type of Injury/Body part affected:					
How did injury occur? What object of substance directly harmed the employee? (Give specifications)					
Witness (name & phone number):			Physician or Hospital (name, address, phone number):		
Contaminated Needlestick? See instruction sheet if you checked, Yes Yes _____ No _____			<input type="checkbox"/> Check if only first aid was given		
Has compendium been notified? <input type="checkbox"/> yes <input type="checkbox"/> no Date and time of notification: _____					
Who notified compendium? _____					
Name of compendium nurse consulted: _____					
Once injury has been reported to CompEndium, the employee is responsible for updating their CompEndium nurse case manager of any changes in medical and/or work status.					
Date: _____		Employee Signature: _____			
Date: _____		Supervisor Signature: _____			

**SOUTH CAROLINA DEPARTMENT OF HEALTH AND ENVIRONMENTAL CONTROL
REPORT OF EMPLOYEE OCCURRENCE**

(Instructions for use)

PURPOSE:

This form will be used by all employees of DHEC to report on the job employee injuries or exposures.

ITEM BY ITEM INSTRUCTIONS:

<u>Name</u>	Injured employee's name
<u>Social Security #</u>	Injured employee's social security number
<u>Date of Birth</u>	Injured employee's date of birth
<u>Address</u>	Injured employee's address
<u>Marital Status</u>	Injured employee's marital status
<u>Male/Female</u>	Indicate injured employee's sex
<u>County</u>	Injured employee's county
<u>Phone Number</u>	Injured employee's home and work number
<u># of Dependents</u>	Indicate injured employee's number of dependents
<u>Division</u>	Injured employee's division
<u>Job Title</u>	Injured employee's job title
<u>Date of Hire</u>	Injured employee's date of hire
<u>District</u>	Injured employee's district
<u>How long in current job?</u>	Indicate how long injured employee has been in current job
<u>Salary</u>	Injured employee's salary
<u>Supervisor's Name/Phone Number</u>	Indicate injured employee's supervisor's name & phone number
<u>Date of Occurrence</u>	Indicate date employee was injured
<u>Time of Occurrence</u>	Indicate time employee was injured
<u>Time Workday Began</u>	Indicate the time injured employee's workday began
<u>Place of Occurrence</u>	Indicate place injury took place, if injury occurred on employer's premises, please check box.
<u>Last Workday</u>	Injured employee's last workday
<u>Date Employer Notified</u>	Indicate date injury was reported to employer
<u>Name of Person Notified</u>	Indicate who was notified of employee's injury
<u>Date Returned to Work</u>	Indicate date injured employee returned to work
<u>Returned to Full or Modified Duty?</u>	Indicate whether employee returned to "full" or "modified" duty
<u>Were Safeguards Provided?</u>	Indicate "yes" or "no"
<u>Type of Injury</u>	Indicate the type of injury (ie. which body part was affected?)
<u>How did Injury Occur?</u>	Indicate how injury occurred (give specific details)
<u>Witness (name & phone number)</u>	List name & phone number of person who witnessed injury, if no one witnessed injury, indicate "none"

Contaminated Needlestick

If "yes" is marked, be sure to log on OSHA 300 as a Privacy Case.

Physician or Hospital
(name, address, phone #)

Indicate physician or hospital name where injured employee received treatment, if only first aid was given, please check box

Has Compendium been Notified?

Indicate whether Compendium has been notified, circle "yes" or "no"

Date & Time of Notification

Indicate date & time Compendium was notified

Who Notified Compendium?

Indicate person who notified Compendium

Name of Compendium Nurse
Consulted

Indicate name of Compendium Nurse consulted

Date

Date "Report of Employee Occurrence" form signed by injured employee

Employee Signature

Injured employee's signature

Date

Date "Report of Employee Occurrence" form signed by injured employee's supervisor

Supervisor Signature

Injured employee's supervisor's signature

OFFICE MECHANICS AND FILING:

The original Report of Employee Occurrence form should be submitted to, Office of Personnel Services, Attention: Susan Penley, no later than five (5) calendar days from the date of injury. Copies may be requested from Central Supply.



South Carolina Department of Health
and Environmental Control

**Office of Personnel Services
Injured at Work?
What Are Your Responsibilities?**

EMPLOYEE RESPONSIBILITIES:

**WHAT TO DO IF YOU, THE EMPLOYEE,
ARE INJURED AT WORK:**

- Inform your supervisor immediately
- Complete an Employee Occurrence Form (3419)
- *If no medical attention is needed, STOP here*

**WHAT TO DO IF YOU NEED TO GO TO A
MEDICAL PROVIDER:**

- Inform your supervisor you are seeking medical attention right away
- Call CompEndium Services at (877) 709-2667 immediately to:
 - Report the incident has occurred
 - Provide details of the incident to the nurse case manager
 - Receive appropriate medical referral

**WHAT TO DO AT THE MEDICAL
PROVIDER'S OFFICE:**

- Inform the medical provider that this is a work related incident
- Instruct the medical provider to forward all billing information to:
State Accident Fund
PO Box 102100
Columbia, SC 29221-5000
(803) 896-5837
- Obtain a note with your work status from the attending physician
- Schedule a return appointment if needed

**WHAT TO DO AFTER EACH MEDICAL
PROVIDER VISIT:**

- Call your CompEndium Services nurse case manager (877-709-2667) to update your medical status
- Report your return to work status to your supervisor within 24 hours
- Provide your supervisor with a copy of your work status excuse

**SUPERVISOR, EMPLOYEE HEALTH
NURSE, OR PERSONNEL COORDINATOR
RESPONSIBILITIES:**

**WHAT TO DO IF AN EMPLOYEE IS
INJURED AT WORK:**

- Investigate the accident site immediately
- Have the employee complete an Employee Occurrence Form (3419)
- Send the completed Employee Occurrence Form to your local Personnel Coordinator
- *If no medical attention is needed, STOP here*

**WHAT TO DO IF THE EMPLOYEE NEEDS
TO GO TO A MEDICAL PROVIDER:**

- Together with employee, complete the Employee Occurrence Form (3419)
- Together with employee, call CompEndium Services immediately at (877) 709-2667
- Require the employee to provide you with a copy of the return to work status within 24 hours after EACH doctor visit

**WHAT TO DO AFTER THE EMPLOYEE
RETURNS FROM THE DOCTOR'S
OFFICE:**

- Review the return to work status to determine if there are restrictions and if there is light or modified duties available in the workplace
- Contact Susan Penley, Office of Personnel Services at (803) 898-3398 immediately to report if the employee:
 - Has been placed out of work, OR
 - Returned to full regular work without restrictions, OR
 - Working regular work hours within the restrictions, OR
 - Working light modified duties within the restrictions
- Fax the return to work excuse within 24 hours of receipt to the Office of Personnel Services at (803) 898-3402, Attention: Susan Penley

Appendix VI



**WORKERS COMPENSATION INJURY/PHYSICIAN INSTRUCTION SHEET
(DHEC-Office of Personnel Services)**

**Please take this form with you to your workers' compensation
doctor's appointment and hand this form to the medical provider!**

Please forward all medical bills to:

**SC STATE ACCIDENT FUND
P.O. BOX 102100
COLUMBIA, SC 29221-5000
(803) 896-5837**

Please fax return to work excuse to:

**SUSAN PENLEY, WORKERS COMPENSATION LIAISON
OFFICE OF PERSONNEL SERVICES
(803) 898-3402**

**Medical Management Company: (must receive authorization prior to receiving medical
treatment)**

**COMPENDIUM SERVICES
(877) 709-2667**

**For any questions, please contact Susan Penley, Office of Personnel Services at
(803) 898-3398**

Works Cited

South Carolina Policy Council. (2007 January). Workers' Compensation in South Carolina. Retrieved January 28, 2007, from <http://www.sccjc.org/assets>

Workers' Compensation Commission. (2007 January). Workers' Compensation in South Carolina. Retrieved January 28, 2007, from <http://www.wwc.sc.gov>