

Access To Workers' Compensation Medical Care: Getting The Right Treatment At The Right Time

Timely access to appropriate, effective treatment is critical for anyone in need of medical attention. When treatment is delayed, a patient's illness or injury may get worse – resulting in complications, permanent disability, and even death.

Workers' compensation programs are intended to assure workers of swift access to needed medical services for on-the-job injuries and illnesses. However, obtaining appropriate medical services for occupational conditions in a timely manner can be a complicated process. That's because the worker, employer, medical provider, and workers' compensation insurer must engage in a coordinated set of activities that involve numerous medical judgments and administrative steps.

For example, the worker's problem must be diagnosed as job-related in order to qualify for medical insurance coverage under workers' compensation. Injury and claim reports must also be filed. The worker has to determine what medical provider he can go to for treatment under his employer's insurance. Providers need to know precisely what services are allowed by the workers' compensation insurer and what administrative reporting requirements must be followed. The insurer and claims administrators must conform with relevant statutes and regulations.

Against this backdrop, researchers are beginning to document the nature of potential access barriers in workers' compensation medical care (see box on following page). The denial of a

workers' compensation claim by the insurance carrier is one potential barrier. The consequences of claim denials on a worker's ability to access medical care may be magnified if the worker has no other form of health insurance coverage.¹ In some cases, injured

workers may be reluctant to report work-related injuries owing to fear of employer reprisal, concern about losing their jobs, employer safety incentive programs that reward lower claims frequency rates, language and cultural barriers, and a lack of knowledge about workers' compensation benefits.²

Even if primary care is available, providing access to appropriate specialists with training in occupational medicine represents an additional challenge.³

Overcoming access barriers will require a multifaceted approach involving regulatory oversight, participation by workers in the design of health plans and selection of providers, enhanced communication and coordination among all parties, and specific measures to detect and stop discriminatory care.⁴

Following is a brief summary of several projects designed to improve access to workers' compensation medical care as part of The Robert Wood Johnson Foundation's Workers' Compensation Health Initiative (WCHI).

- *Providing Back-Up for Injured Workers.* In New York City, the Union of Needletrades, Industrial and Textile Employees (UNITE) has

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¹ Herbert, R. et al. 1999. Carpal Tunnel Syndrome and Workers' Compensation Among an Occupational Clinic Population in New York State. *American Journal of Industrial Medicine*. 35(4): 335-342.

² Pransky, G. et al. 1999. Under-reporting of Work-Related Disorders in the Workplace: A Case Study and Review of the Literature. *Ergonomics*. 42(1): 171-182.

³ Gallagher, R.M. and P. Meyers. 1996. Referral Delay in Back Pain Patients on Workers' Compensation: Costs and Policy Implications. *Psychosomatics*. 37(3): 270-284.

⁴ Dembe, A. 2001. Access to Medical Care for Occupational Disorders: Difficulties and Disparities. *Journal of Health and Social Policy*. 12(4): 19-33.

developed a financing plan that allows workers to borrow money from the union's benefit fund to pay participating physicians while workers' compensation claims are being adjudicated. In this way, workers receive prompt access to needed care, regardless of claim status or coverage disputes. This program is particularly important for these workers because they lack general health care insurance.

- *Marshalling Local Stakeholders to Expand Access.* In rural Clinton County, New York, where medical resources are scarce, very few medical providers specialize in occupational medicine. The North Country On-the-Job Network has developed a unique program for managing the care of injured workers that involves employers, labor representatives, private practice physicians, the local Chamber of Commerce, and a community medical center. The goal is to make better use of resources, assure access, and provide better care.
- *Communicating to Provide Care.* The Mid-America Coalition on Health Care, a Kansas City-based group that includes major employ-

ers, medical providers, occupational health services, labor, and the regional medical society, is developing coordinated approaches for improving workers' compensation medical care and managing work disability. New communications tools and procedures that the Coalition has produced, such as the standardized Uniform Workability Reporting Form, show promise for improving communication and eliminating barriers to care.

A variety of strategies is needed to ensure that injured workers get the care they need at the time they need it. Research continues to help develop and refine those strategies and identify which ones are most effective. ●

This fact sheet series was created by the Workers' Compensation Health Initiative, a national program of The Robert Wood Johnson Foundation. The goal of the Initiative is to support innovations in workers' compensation that will contain costs and improve the quality of care provided to injured workers. For more information, visit the program's web site at www.umassmed.edu/workerscomp.

POTENTIAL BARRIERS TO WORKERS' COMPENSATION MEDICAL CARE

- Employee does not know about workers' compensation
 - Employee afraid to report injury or illness
 - Providers not willing to see workers' compensation patients
 - Difficulty getting referrals to specialists
 - Insurer will not authorize care
- Employer or insurer limits choice of provider
 - Poor communication with employer
 - Out-of-pocket expenses for employee
 - Limited provider awareness of workers' compensation
 - Limited provider knowledge of occupational health issues
 - Cultural and language barriers