RETURN-TO-WORK PROCESS

A practical blueprint for contractors.
The primary purpose of a Return-to-Work (RTW) program is to return eligible employees back to the workforce at the earliest medically allowable date. This guide will walk you through the four basic parts of the RTW process. Each part has multiple steps. Implementing all parts and all steps will provide your company the opportunity for the most cost savings through improved productivity and increased employee morale. You will find documentation and other forms to help you do this at the back of this guide. Start with a few steps; as your program evolves, add more steps until you have a complete program in place. Success can be measured as easily as one, two, three, four!

4 Steps to Return-to-Work Success

1. **COMMUNICATION**
   - Report Claim to CNA within 24 Hours.
   - Perform Accident Investigation.
   - Contact Injured Person and Family.

2. **POST INJURY**
   - Preferred Medical Provider.
   - Rehabilitation Agreement.
   - Job Function Evaluation.
   - RTW Job Bank.

3. **COST CONTAINMENT**
   - Medical Cost Containment.
   - Occupational Rehabilitation Program.
   - Modified Duty Work.
   - Transitional Work.
   - Disability Management Process.

4. **RETURNED WORKER**
   - Vocational Case Management.
   - Maximizing Work Capacity.
   - Productive Worker.
Introduction to Injury Management

Your business may need to identify additional ways to maintain good profit margins during an economic downturn and slow recovery. In today’s low-margin environment, the RTW process is no longer simply a “nice to have.” Regardless of the company size, injury management needs to become an owner or boardroom issue. A RTW process should become part of your business solutions for enhanced profit margins.

Your business and employees may face risk when they step onto the job site. So what can a contractor do to help control injury costs? The best practical solution is to expand your safety program by adopting a formalized RTW program.

As a business owner, you can take steps to increase your RTW success before a work-related injury occurs. When implemented, these simple steps could result in:

- Fewer lost days.
- Decreased wage loss for employees.
- Greater employee morale.

Cost Containment Process

This is a practical blueprint to a cost containment process. This process has many steps. However, you can decide what steps to take in order to lower injury costs and save your company money.

This is not an all-or-nothing process. It is very flexible and allows the company to be in charge. CNA will work with your company to provide advice, services and tools to help you.

An effective RTW program can result in a contractor saving as much as 10 to 40 percent of Workers’ Compensation (WC) medical costs and 10 to 25 percent of wage replacement. Having an effective RTW program in place makes good business sense.

In addition to the daily economic factors your business faces, two very important emerging issues will affect all U.S. companies today and in the future.

Aging Workforce

The first emerging issue is the average age of the U.S. workforce. The majority of the baby-boomer generation is in their late 50s to mid 60s. The economic recession, rising medical costs and low retirement savings have influenced workers from retiring.

According to the U.S. Bureau of Labor Statistics, the total labor force is projected to increase by 8.5 percent during the period 2006-2016, but when analyzed by age categories, very different trends emerge.

In Figure 1, the number of workers in the youngest group, age 16-24, is projected to decline during the period while the number of workers age 25-54 will rise only slightly. In sharp contrast, workers age 55-64 are expected to climb by 36.5 percent.

Figure 1

Projected Percentage Change in Labor Force by Age, 2006-2016

<table>
<thead>
<tr>
<th>Age</th>
<th>Percent Change</th>
</tr>
</thead>
<tbody>
<tr>
<td>75 and older</td>
<td>84.3</td>
</tr>
<tr>
<td>65 to 74</td>
<td>83.4</td>
</tr>
<tr>
<td>55 to 64</td>
<td>36.5</td>
</tr>
<tr>
<td>25 to 54</td>
<td>2.4</td>
</tr>
<tr>
<td>16 to 24</td>
<td>-6.9</td>
</tr>
</tbody>
</table>

Source: U.S. Bureau of Labor Statistics

But the most dramatic growth is projected for the two oldest groups. The number of workers age 65-74 and those aged 75 and older are predicted to soar by more than 80 percent.¹

In Figure 2 on the next page, older workers typically require more total loss days to recover from an injury. WC expenses for older workers are expected to be higher with the prevalence of age-related conditions. For example, a 2005 literature review study of Washington state calculated a constant $36.45 was added to the median cost of a claim for every year of a claimant’s age.²
Obesity in the Workforce

The second emerging issue is the rising obesity rate of adults and overweight teenagers who are entering the workforce.

The percentage of adults age 20-74 who are clinically classified as obese — body mass index (BMI) greater than or equal to 30 — has more than doubled from 15 percent in 1976-1980 to 35 percent in 2005-2008.\(^3\)

In 2010, the National Council on Compensation Insurance, Inc. published a study, “How Obesity Increases the Risk of Disabling Workplace Injuries,” on the relationship between obesity and the cost of WC claims. The study noted that nearly six WC claims were filed per 100 workers of normal BMI, compared with more than 11 claims filed per 100 of the heaviest workers. That is nearly twice the injury frequency for obese workers. Additionally, the medical costs for the same injury are three times higher among obese claimants in the first year, rising to five times higher at 60 months.\(^4\)

There are a greater number of permanent partial injuries for the obese group compared to the non-obese group.

Statistics indicate that obese workers are twice as likely to file a WC claim as workers who are at a healthy weight. Additionally, the costs associated with the claim of obese workers are significantly higher than those of a healthy weight peer.\(^5\)

Unfortunately, U.S. contractors are in an economic downturn. Steps you take now can pay you back quickly and into the future. The rising costs of work-related injuries are escalating nationwide. Businesses are faced with lower productivity, lost job bids and higher replacement costs that can result in lost time and money.

Implementing an early RTW initiative has the potential to control the work-related injury costs and reduce the frequency of injuries by being aware of a worker’s tasks. It increases the number of workers who, though they cannot return to work in their prior positions, have a desire and ability to return to some work capacity.
Seven Small Steps Before an Injury Occurs

1. Communication
Explain to the workforce that the company’s WC insurance will pay for their medical bills that are related to their on-the-job injury and compensate them for their lost salary based on their state’s WC commission regulations. Naturally, you do not want an employee to injure themselves over the weekend and declare an occupational injury. Your WC insurance is not their healthcare insurance.

Every employee that is injured should understand the procedures and should be given a handout that explains their coverage.

2. Injury reporting step
For your injury process to succeed, workers need to report their injury to their supervisor or crew leader. If the potential injury is not a broken bone, deep cut or something worse, many workers will want to wait and see if the pain goes away. That is not what you want them to do!

Remind workers to report their injury even if they do not go to a clinic or hospital. Contact the worker the next day to find out if the pain from their injury persists or if they have a limited range of motion.

3. Insurance cards
Pass out insurance cards that list your company’s name, address, phone number, insurance company’s name, policy number and policy expiration date.

Laminate your cards to protect them so workers can place them in their wallets and shirt pockets. The card helps the clinic or hospital start the process correctly.

A better step would be to have a RTW tool kit that provides the insurance card along with names and phone numbers of people you want the medical caregiver to contact for information. Also, include a job description and a job function evaluation page. Details are explained later in this guide.

4. First aid availability
Provide the injured employee with immediate assistance. Basic first aid supplies are necessary for compliance with state and federal employee safety laws and regulations. In the end, they can also save a lot of grief and money.

5. Choosing a physician
Preselect a physician or a clinic that your injured workers would go to for their treatment. This is an important step; however, you should be mindful of specific state laws that may restrict the employer’s ability to participate in the selection of medical providers for injured workers.

Consider the clinic’s hours, security, location, credentials, customer service and quality of care. Take every opportunity to communicate with your provider and build a working relationship.

For more details about CNAs Preferred Medical Provider Program, visit www.cna.com/returntowork.

6. Employee transport
Appoint someone to drive the injured worker to the medical provider for minor injuries. Naturally, an emergency treatment ambulance will transport a seriously injured person to the closest hospital emergency room (ER).

7. Foreman or superintendent involvement
Having a foreman on board ensures that the employee gets the help he or she needs, may prevent an unnecessary ER visit, ensures the employee will not be mistakenly billed for the visit and provides another source of information for the physician.

The foreman should tell the receptionist to put a note in the chart that the employee’s representative is in the waiting area and would like to speak to the physician after the exam. This discussion should focus on how the company has or will be able to modify the injured person’s original job or work tasks so that the employee can return to work and not aggravate the injury while recuperating.

Ensure Prompt Treatment
Make sure the appropriate first aid kits are available to the injured worker. In the event of an emergency, quickly call 911 to dispatch local help.
Accidents Cost More Than You Think

It is important to consider how injuries will affect your employees. Changes in lifestyle, income, overall family dynamics and individual self-esteem can be dramatic.

What happens if you do nothing and wait until the worker heals and returns to work? You say that you do not have a job for them. You want every worker to “pull their own weight.”

Workers may feel they are now healed and they want to go back to their old job. If you do not have a job for him or her, then they may go to another employer, taking a second job, to earn additional money over their WC check.

Your incurred “indirect costs” may be five times more than the direct cost an insurance company incurs. Figure 4 on page seven lists several indirect costs. Even though those costs may be invisible, they can adversely affect your profit. These accidents and their related costs are stifling growth and profitability in the construction business.

The calculation does not include many cost-saving factors that a company incurs, such as additional medical costs for unnecessary medical appointments.

All of these variables have prompted businesses to identify alternative solutions that will assist the injured employee in returning to work.

A major alternative is the establishment of a RTW program that encompasses:

• Initiating an early intervention when the injury occurs.
• Placing injured employees in jobs that not only contribute to the profitability of the company but help make the worker productive as well.
• Securing management, employee, medical and insurance company commitment and support for this effort, prior to implementation.
• Creating a work environment that keeps employees committed.

TIP

Reduce Medical Costs

Compare these average costs when an injured worker needs non-life-threatening medical care.6

• $1,300 to a hospital emergency room.
• $175 to an urgent care center.
• $150 to a doctor’s office.
• $73 to a walk-in convenience care clinic.
A RTW process is a series of steps an employer can take. Not every step has to be done or can be done; however, each step can return a cost savings. Start by adapting one, two or three steps to see the benefits of cost savings. If your results are positive, you may decide to engage in additional steps.

To see how much money your company can save by returning injured employees to work sooner, visit CNA’s Transitional Work Savings Calculator at www.cna.com/returntowork. Users can select a specific type of injury and view the estimated cost savings of returning that employee back to work sooner. The calculator illustrates your company’s potential WC savings through the implementation of a transitional work program.

The calculator also shows the estimated amount of additional sales needed to cover the indirect costs of an injury. Those costs can be better controlled when a CNA Cost Containment Program is part of your business plan.

Employees who take part in the transitional work program are likely to:

- Lose less income.
- Get back to their regular job sooner.
- Stay connected with co-workers.
After Injury Steps

**Step 1A: Contact the injured worker**
Contact employees who require extensive medical care involving prolonged time away from work at least every other week. While you must be considerate of the employee’s rights of privacy and confidentiality, ask about the employee’s condition, family needs and treatment progress. Are they receiving their benefits? Provide timely follow-up on questions or problems.

Follow up with your injured workers within 24 hours of their accident. Assure him or her of your company's commitment to his or her well-being. Assess the worker’s understanding of the treatment he or she received and respond quickly and appropriately to questions. Again, be considerate of the employee’s rights of privacy and confidentiality.

**Step 1B: Communicate with the injured worker's family**
It is critical to make contact with the spouse or family member to establish that the company cares. The family is important in making the employee feel wanted and needed back at work.

**Step 1C: Report the injury within 24 hours to your WC insurance company**
On average, if notified of the injury within 24 hours, CNA’s analysis of all types of occupational injuries can lower the total direct costs by 5.8 percent. The early notification allows CNA’s Claim Department to contact the injured worker and their healthcare provider.

The CNA Claim team is a critical component of the claim management strategy. Your CNA Claim representative offers expertise and assistance in benefits, physician referrals (where permitted by statute), rehabilitation, claims processing and coordination of case management plans.

To be effective, it is important for you to communicate regularly with your CNA Claim representative. CNA’s Claim management procedures include specific activities designed to support our cost containment process. You should notify CNA as soon as possible to report a WC injury.

**Step 1D: Contact the treating medical provider**
Contact the physician within 24 hours of the initial treatment to obtain information about the extent of the injury and recommended treatment plans. As appropriate, determine timing for returning the employee to work. Where necessary, the goal is to provide temporary modified jobs or transitional work that will take into account your employee’s physical abilities, skill and interests.

**Step 2: Accident investigation**
One of the best ways to avoid further accidents is to understand how an accident occurred and how to avoid that type of accident in the future. The primary focus of any accident investigation should be the determination of the facts surrounding the incident and the lessons learned to prevent future occurrences.

Secure evidence associated with the injury/illness to prevent further impairment from occurring. Contact the CNA Claim Department for further guidance in handling the evidence.

An investigation would be conducted by someone experienced in accident causation, experienced in investigative techniques, fully knowledgeable of the work processes, procedures, persons and industrial relations environment of a particular situation.

Take necessary steps to avoid another incident. You do not want a recurrence of the same accident.

Use the After Injury Telephone Log to keep track of all correspondence with the injured worker’s medical provider.

**Step 3: Provide the medical provider job information**
When the employee goes to the doctor for the first time, make sure they bring a CNA Job Description Document and Job Function Evaluation Form. Also, bring a form requesting information about medical restrictions on the job and at home.

If an employee is restricted from doing activities on the job, then they should have those same limitations in the non-work setting. Understand the worker’s job limitations and how many days off before the employee returns back to the job.

**TIP**

Need to Report a Claim?

Available 24/7, call **877-CNA-ASAP** (262-2727) or report online at **www.cna.com/claim**.
Step 4: Maintain contact
Maintain contact with your employee at least bi-monthly to ensure his or her recovery is progressing as anticipated. Collaborate with the treating physician for updates on your employee’s recovery to facilitate a smooth transition to the appropriate job duties.

Step 5: Establish a return-to-work record
Establish a RTW record that includes: a copy of the accident report, a job description, copies of medical bills, progress reports from the physician and a log of your conversations with the physician and your employee. This will assist you in tracking the current claim and establishing a model for handling future claims.

Rethink the old philosophy regarding getting an injured worker back on the job as either “full-duty or off-duty.” Every supervisor is a stakeholder in the success of your RTW program. Managing accidents and injured workers are part of their job.

Even if your company does not have a lot of claims, think about the big picture and its annual savings. Wages are the biggest cost in short-term loss time injuries.

Timely Notification of Workers’ Compensation Injury
Prompt reporting of WC injuries to CNA should be a high priority in your risk control and cost containment efforts. By reporting injuries as soon as possible, you allow CNA the opportunity to begin claim processing as quickly as possible by permitting maximum utilization of our claim cost containment programs.

The following steps can assist in your cost containment efforts:

• Designate back-ups for staff members involved in the reporting process so reporting is not delayed by illness or vacation.

• Report all losses immediately when it is determined that medical attention will be required or a potential for lost time exists.

• Do not delay reporting while awaiting receipt of medical bills, reports, estimates of lost time, investigation or verification activities, and for employee completion and signing of the report.

The person who is responsible for taking phone calls from employees calling in sick should determine if the illness or injury is potentially job related. If so, begin the reporting process immediately.

TIP
Quickly reporting a WC injury to CNA’s Claim Department within 24 hours can save your company 5 to 6 percent of the accident’s direct cost.

Report Injury ASAP
CNA's Cost Containment Process Makes the Return-to-Work Initiative Successful

CNA's Cost Containment Process is a group of procedures used by employers and medical professionals to help injured employees return to work quickly and healthfully.

A RTW initiative:

- Provides stability in your workforce with minimal impact on productivity.
- Allows the company an opportunity to gain control over reported work injuries and subsequent lost time.
- Offers additional communication within your company regarding injury prevention.
- Establishes a method through which the company and workforce can mutually work together for the benefit of all workers.

Your workers will benefit from a RTW effort by:

- Knowing that they have a job to come back to.
- Knowing how they can find qualified medical providers and what to expect during the injury management process.
- Gaining a sense of control over the RTW process.
- Knowing that their company takes an active interest in their safety and health.

Conduct a job function evaluation for those positions identified as alternate/modified duty to gather data on critical job factors that can be shared with the medical provider and CNA.

The analysis starts with a summary of the whole job process. This is broken down into smaller steps. Use the Job Function Evaluation Guide to help you complete a detailed Job Function Evaluation Form for each position.

Medical Case Management

Coordinating and Monitoring Medical Treatment

- Activities that need to be closely monitored include early diagnosis and prognosis.
- Working limitations.
- Establish a treatment plan oriented at RTW in conjunction with the CNA Claim handler.
- Progress of the treatment plan.
- Communicating between team members.

While not every situation can be anticipated, every attempt has been made to illustrate the key implementation components you should follow once an injury has occurred.

Whoever has the responsibility at your company to notify CNA's Claim Department should have at least one or more persons trained to handle the notification when they are out of the office due to illness or vacation.

Allow CNA the opportunity to begin claim processing as quickly as possible, permitting maximum utilization of our claim cost containment programs.

- Receive better claim service and faster benefit payment.
- Demonstrate your concern as an employer for the welfare of employees.
- Reduce penalties and fines due to late reporting (where statutes apply).
Actions Following Injury Occurrence

Your CNA Claim representative is a critical component of your claim management strategy. CNA’s Claim handler offers expertise and assistance. Understanding these procedures and integrating them into your operational plan will increase your efficiency by reducing duplication of effort.

For field supervision, contact employees in person or by phone within 24 hours of the injury. Verify their understanding of their injury, treatment or follow-up plans if applicable. Assure employees of the company’s commitment to ensuring effective medical care and helping them return to work. Where questions exist regarding the compensability of the injury or specific benefit availability, contact your CNA Claim handler.

Accident or investigation reports filed by field supervision provide the physician with important information about factors that directly or indirectly caused an injury. Injury details, job descriptions and the Job Evaluation Form all help the physician assess the employee’s ability to return to work. In addition to providing injury details and job descriptions, field supervision plays a key role in identifying job modifications or alternate duties.

For other team members, depending on the circumstances of each case, claim personnel, physicians and occupational therapists, rehabilitation consultants or medical specialists may be involved. To ensure treatment strategies and activities are oriented with your company’s philosophy, it is important to communicate this to each of these parties.

Establish a treatment plan and target for return to work as soon as possible. Monitor and coordinate efforts to ensure the plan stays on track.

Preferred Medical Providers

Where available, using a Preferred Medical Provider can impact your RTW process and the bottom-line profitability as well as provide quality medical care to your valued employees.

To research providers, [www.cna.com/claim](http://www.cna.com/claim), in the “Find a Network Provider” section.

Medical Planning Considerations

- The selection of a physician or outside medical provider (such as physicians group/private clinic, hospital affiliated clinic or private practice having expertise in industrial injuries) is an important step.

  Specifically, the physician(s) should have an occupational medicine background (academically and clinically) and a demonstrated ability to be both realistic and fair. The treating physician can have a great deal of control over the length of the disability.

  When the injured worker is not released on a timely basis, it could be because the physician may not understand the objectives of the RTW efforts or does not comprehend how a specific job is being modified to accommodate the employee’s temporary work restrictions.

  Clear and thorough communication is essential for the treating physician to understand the general conditions as well as the specifics of a given case.

- The effectiveness of a RTW initiative starts with the management of the initial injury by the company supervisory and management personnel, company medical personnel (company physician, nurse, etc.) or outside medical personnel (contracted physician, clinics, etc.).

  If the worker’s initial injury is managed in an uncaring fashion, the potential may exist for the worker to develop a negative attitude towards the RTW effort. If the worker is managed in a timely and caring fashion, the potential exists for the worker to perceive the RTW effort with a positive attitude.

- You can identify an appropriate outside medical treatment source by working with CNA Claim Department and/or local, state or national medical resources, such as the American Medical Association.
CNA's Preferred Medical Providers Program

You can identify a provider through CNA's Preferred Medical Provider Program. CNA has established relationships with providers in all 50 states that can work with your company to provide quality, cost-effective medical care. If an injury occurs, these providers will work with your injured employee to help them remain on the job or return to work as soon as medically appropriate.

If you have questions or need assistance in locating a preferred medical provider or creating a panel contact, CNA's preferred provider panel coordinator at 714-674-5786, or PPOPanelRequest@cna.com.

Establishing relations with outside medical providers can be accomplished by:

- Interviewing staff at these facilities.
- Obtaining references from companies that have used the provider for medical services.
- Verifying medical credentials with local, state and national organizations, such as the American Medical Association.
- Documenting this information on CNA’s Occupational Medical Facility Checklist that has been included with this guide.

To view and download additional RTW materials, visit www.cna.com/returntowork.

The identification and selection of a medical care provider may need to be done only once if your operations remain within one geographical area. However, should your company perform work outside the geographical area or out of state, then the selection process needs to be completed each time a new job begins.

Additional questions that may need to be asked during the selection of a primary care provider are:

- How long does it take to get injured workers in and out of the clinic, and how long is the average wait for treatment?
- Is it a full service clinic with X-ray or MRI equipment?
- What type of networking does the clinic have available with specialists in the area?
- Will the clinic assign one doctor to oversee your company’s account?
- Can they review quarterly losses with your team coordinator?

Other helpful hints on the selection of a primary care clinic include:

- Clinic reputation — do not select a clinic solely on price; remember that quality medical care is important.
- After injured workers are released, request the doctor or staff speaks with your team coordinator, job foreman, job superintendent or personnel in charge; this allows the doctor to describe limitations and to help identify possible modified or restricted duties at the job site where the employee was injured.
Use the Return-to-Work Job Bank for Contractors

The purpose of a RTW effort is to return the injured worker back to the job as soon as medically appropriate. The implementation and promotion of an effective RTW effort involves identifying realistic RTW options by examining the physical abilities and the skills required to perform various work tasks.

CNA provides a Return-to-Work Job Bank to assist our clients, risk control, claim team and treating medical providers in developing ideas and solutions to encourage an injured employee to return back to work as soon as medically possible.

The job bank can be used for generic job descriptions to help identify job duties and physical demands. Additionally, these forms can be modified to match your company’s requirements.

Explaining your company’s Cost Containment Process will help the general practitioner work as a team member to get the individual back to work. The general practitioner may need to be educated on the components and cost benefits of a Cost Containment Process, as well as the modified or restricted duties available in your organization.

If you need further assistance, call 866-262-0540 or send an email to riskcontrolwebinfo@cna.com. A CNA Representative will contact you and address your situation.

Job Function Evaluations

Developing and completing employee job function evaluations is essential to your Cost Containment Process.

The Job Function Evaluation Form requires minimal time to complete and provides the treating physician with an objective description and quantification of the injured worker’s job tasks.

This form should be completed for all jobs within your company to help the treating physician and related healthcare professionals determine the suitability of alternative job tasks which may allow the injured worker to return to work with a temporary medical restriction. The following steps will help you in completing the Job Function Evaluation Form:

1. Job function

Provide a general description of the major duties and type of work required by the job. For example:

“The pipefitter fabricates custom sections of steel pipe through on-site cutting and welding operations and may also assist in installation of finished pipe sections.”

“The laborer is required to perform various manual jobs including hand digging, unloading supply trucks, carrying materials and picking up debris.”

Also, indicate occasional or infrequent job duties or functions which are not part of the employee’s routine job function. Examples include:

“The job also involves occasional sweeping and manual debris removal.”

“The job may require the use of a cartridge respirator when applying toxic or hazardous finishes.”

2. Work location

Indicate whether the work is performed indoors or outdoors, and whether the area is heated. List or describe any personal protective equipment required such as face shield, safety shoes, hard hats, etc. Indicate whether the job is performed in extreme temperatures and, if needed, elaborate in the “Miscellaneous” section.

3. Work posture

The basic work posture(s) needed to perform the job functions should be indicated with an approximation of the frequency for each posture.
4. Physical demands

This section calls for a basic evaluation and quantification of the job’s physical characteristics.

- **Lifting** of objects, materials, etc., should indicate the materials (i.e., “boxes of product”) and their weight. Determine the exact weight of these materials since estimates can often be inaccurate.

  The frequency with which materials are lifted is also important. Indicate “frequently or continuously” if materials are lifted on a repetitive basis during the workshift such as setting block or fitting pipe. The basic range of motion used during lifting should also be indicated (i.e., “waist to overhead” or “floor to waist” for a worker who is lifting ductwork to ceiling height).

- **Carrying** tasks should indicate the description of material being carried and the approximate distance.

- **Tool usage** should indicate the type of tools (small hand tools, pneumatic drivers, shovels, etc.) and the frequency of usage, such as continuously, frequently or infrequently. Finally, an estimate should be made of the grip force needed to use or operate the tool. If the job requires a visibly high degree of effort often characterized by the worker using the tool in a forceful manner, “forceful grip required” should be marked “yes.”

- **Work hours** should indicate the number of hours per day and number of days per week required by the job (i.e., 8 hours, 6 days per week). Also, indicate the number and length of breaks (i.e., two 15-minute breaks and a 30-minute lunch). Include any overtime required, whether routine or not.

- **Miscellaneous** should be used to indicate any specific or unusual job demands or requirements that are not indicated in the other report sections.

 Contractors who work in communities without occupational injury or illness clinics may be limited to selecting a general practitioner. In this case, visit the facility, meet with the doctor and staff and explain your company’s philosophy, efforts and policies on returning injured workers to work as soon as possible.

- Receive better claim service and faster benefit payment.

- Demonstrate your concern as an employer for the welfare of employees.

- Reduce penalties and fines due to late reporting (where statues apply).

The following recommended procedures and practices can significantly reduce the time between injury and CNA Claim response:

- Whenever possible, report claims directly to CNA using the most expedient method available. Where telephone, fax or online reports are used, any written follow-up reports should indicate the accident was previously reported. By using telephone, fax or online reporting, the notification process can be reduced by one to three days.

- Minimize the number of people involved in the claim reporting process.

- Maintain a supply of current loss reporting forms.

CNA Claim personnel are skilled at managing WC claims. The claim team investigates the facts of the work site injury to help determine whether the accident was work related.

CNA works with you, the medical provider and the injured worker to ensure that employees return to work as soon as medically appropriate.
Your Workers’ Compensation Claim

Representatives will provide you with information about substantial cost savings that are possible by using Preferred Medical Providers and other medical cost containment tools as well as recommended skilled medical and vocational rehabilitation specialists.

It is important that you work closely with CNA Claim management. Your active follow-through can help bring the claim to resolution.

Setting manageable goals is an important part of your recovery and can help with a successful return to work.

When an Employee Cannot Return to Work Immediately

If an employee cannot return to work, contact the employee within 24 hours of the injury. CNA recommends using the After Injury Telephone Log to document information obtained from the employee.

The CNA Claim Department’s responsibilities also include medical disability management.
Additional Materials

To supplement this guide, CNA offers a wide-range of documents and forms that can help you get started with a RTW program or strengthen an existing one. These tools can also assist in identifying resources and establishing procedures in advance of an accident and resulting WC claim. These materials can help you to:

- Evaluate and thoroughly document job functions.
- Develop comprehensive job descriptions.
- Identify physicians and medical facilities that can provide quality, cost-effective care.
- Establish a RTW record for an injured employee.

To download these materials, visit www.cna.com/returntowork.

Online Calculators

CNA’s Transitional Work Savings Calculator can show you the difference that a transitional work program can make. You can select an injury type from the drop-down menu and answer the three input questions. The calculator then estimates how much a program may be able to save your company on a case-by-case basis.

Waiting too long to file a WC claim may add to your overall costs. The Timely Notice of Loss Calculator can show you the difference that prompt action could make for your company.

Both calculators are available at www.cna.com/returntowork.

Contractors Injury Management Toolbox

Make sure all your job sites have the Contractors Injury Management Toolbox. This piece contains a series of helpful forms and checklists that superintendents and supervising foreman should use to prepare for and handle work-related injuries. This toolbox includes:

- An emergency preparedness planning checklist.
- Guidelines for conducting a job site investigation.
- Investigation forms and checklists.
- An emergency phone numbers poster.

The following additional materials are available upon request. Please contact your local CNA office if you would like any of these pieces. You can also download these materials from www.cna.com/returntowork.

- Safety Resources
- Industry Guide Series
- Risk Control Bulletins
Definitions

Alternative Job
Temporary work will consist of duties for which the injured/ill employee was not hired. However, the person may be capable of performing other duties, which meet the physician instructions for work restrictions. Alternate work may also include assignment to a different work unit.

Americans with Disabilities Act (ADA)
A federal law that gives civil rights protection to individuals with disabilities.

Essential Job Duties and Functions
Duties that are required to accomplish the purpose of the job for which the employee was hired. Essential job functions are identified in the position’s job description.

Industrial Injury or Illness
Workers’ Compensation injury or illness claimed as having arisen out of or in the course of the eligible employee’s employment, i.e., a work-related injury or illness.

Job Sharing
Two or more employees share the hours and responsibilities of one job position.

Modified Duty Job
Temporary changes to the employee’s essential job duties, which allow that person to perform that position. The changes may include, but are not limited to, changing the work station or tools; removing tasks the employee cannot presently perform; reducing the time spent on a specific job task(s), or eliminating specific job duties within the employee’s regular job to meet the temporary work restrictions.

Permanent Restrictions
If the employee’s primary treating physician has placed permanent work restrictions, then employee’s supervisor and human resources department, the CNA WC Claim Specialist and the CNA Case Management Director will work with the employee to determine an appropriate course of action.

All employment actions will be based upon essential job functions of the position and the employee’s eligibility for other benefits at that time, including, but not limited to, accommodation under the ADA and medical work restrictions.

Primary Treating Physician
For employees with industrial injuries or illnesses, the primary treating physician directs the employee’s work restrictions. For employees with non-industrial injuries or illnesses, the physician directing the work restrictions must be either the employee’s primary treating physician of record, the physician of specialty treating the employee’s specific injury or illness, or other medical practitioner approved under the employee’s health plan.

Note: Some states, such as California, have an established procedure that licenses medical providers.

Return-to-Work
Phrase used in relation to an injured or ill employee who has reached substantial medical improvement to be able to return to the employee’s position with either no workplace modifications or restrictions, or with permanent workplace modifications or restrictions that are not essential to the job function for which the employee was hired.

Transitional Work Job
Transitional work allows an employee with temporary restrictions to work in a modified, alternate or reduced-hours capacity, for a defined period, while recuperating from an illness or injury.

Note: Work diagnosis would be performed by an ergonomist or a case manager, who has the ability to evaluate whether the job can be modified or altered, to meet the treating physician’s restrictions.
References


6. United Heath Care, notifications@notification.myuhc.com.