

# Trust Intelligence

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## The Trust Declares \$750,000 Dividend Return!



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Hundreds of Trust members will be receiving dividend checks as their policies come up for renewal throughout 2010. A \$750,000 dividend was declared for the 2009 year at the fall meeting of the Board of Directors. Over 97% of eligible Trust members have qualified to receive a portion of this distribution. Quite literally, it “pays” to be a Trust member.

Diane Ritucci, President and CEO of the Trust stated “The Trust is delighted to once again return a large amount of money back to our members. In today’s difficult financial times, we truly understand the challenges faced by the healthcare industry and we continue to strive for excellence in helping our members control one of their biggest operating expenses, workers compensation. With this most recent distribution, we have now returned nearly \$19 million to Connecticut’s healthcare industry over our 29 years of operation. These returns have certainly enabled our members to improve the quality of life for their clients and we’re proud to be a part of those efforts.”

The dividend program rewards current members based on a combination of each individual member’s longevity with the Trust, loss ratio and proportionate share of premium. Each

qualifying member will receive their check in the 30 day period preceding the renewal date of their policy in 2010.

In addition to the dividend return, the Trust has other reasons to celebrate. The 2009 year wrapped up with 96% retention of Trust accounts while adding 43 new/returning members, accounting for more than \$3.5 million in additional premium. Many new broker relationships were developed as well.

Meanwhile, the 2010 year is off to a great start! Approximately 35% of Trust policies renew during the month of January and it is a very busy period for us. We’re pleased to report that the Trust has retained 95% of its January renewals and we have also added 13 new members year to date accounting for an additional \$1.4 million in new premium. Proof once again that the Trust is very competitive on its upfront pricing, in addition to the nearly \$19 million in dividend returns to members.

We continue to receive very encouraging and complimentary feedback from our members regarding our services and our free educational seminars. We appreciate your business, are here to serve your needs and we look forward to working with all of you in 2010!

*Always remember to forget the troubles that passed away  
But never forget to remember the blessings that come each day.*

# NIOSH Examines Job Related Violence for Home Healthcare Workers

According to a recent study by the National Institute for Occupational Safety & Health (NIOSH), “home sweet home” might not be all that sweet. The focus of the study was to gain a better understanding of on-the-job risks to home healthcare workers from work related violence and how to reduce those risks. The study revealed that home healthcare workers tend to be made up of a disproportionate number of ethnic women, many of whom lack health insurance.

The study included survey responses from 677 home healthcare aides and nurses. The focus was strictly on violence committed against the workers by their patients. It did not include other sources of violence such as other family members, friends, neighborhood, pets, etc. Thirty-one respondents (4.6%) reported to have been assaulted (kicked, hit, shoved, pinched, or bitten) at least once during the past twelve months.

Certain factors were predictive of risk of physical assault by patients. These factors included patient handling, patients with dementia, and/or a general feeling of being threatened by violence in or around the patient’s home.

Workers who have been assaulted by patients are more likely to shorten patient visits when feeling threats to their safety. NIOSH agrees that while this is a justifiable strategy, inevitably it reduces the quality of patient care.

The study noted that previous NIOSH research had shown a link in reduced violence from nursing home patients when ergonomic assistive devices such as hoists for lifting and moving patients were utilized. Although the benefits of such devices have long been proven in hospitals and nursing homes, the home healthcare industry has been slow to utilize assistive devices. Other benefits of such devices are reduced chances of physical injury to the worker during the transfer process.

A recent Columbia University study revealed 48% of registered nurses performing home healthcare reported three or more stressful household conditions in their current caseloads, including unsafe surroundings conducive to slips/trips/falls, an unsanitary

environment, presence of aggressive pets, poor lighting, neighborhood violence/crime, drug use in the homes, and racial/ethnic discrimination.

If you would like assistance in developing applicable safety programs and procedures for your business please contact our loss control department today.



## New Members

- \* My Sisters’ Place, Inc.
- \* ProCaire LLC dba BioCaire
- \* America Elderly Services, LLC
- \* Alliance Medical Group, Inc.
- \* New Haven County Senior Care LLC dba Home Instead Senior Care
- \* Safe Haven of Greater Waterbury, Inc.
- \* Euro Homecare, LLC
- \* Geriatric Care Management Associates, LLC
- \* Southeastern Connecticut Nephrology Associates, PC
- \* Hematology Oncology P.C.

## Returning Members

- \* Clifford W. Beers Guidance Clinic, Inc.
- \* The Kennedy Center, Inc.
- \* Benhaven, Inc.
- \* Portland Care and Rehabilitation Center Inc.
- \* MeadowBrook of Granby
- \* Northbridge Health Care Center
- \* Valerie Manor, Inc.

# Narcotics Use in WC Claims: A Growing Concern

According to a recently published study by the National Council on Compensation Insurance (NCCI), narcotics now account for nearly one-quarter of all workers' compensation prescription drug costs. This is just the latest report highlighting the fact that narcotic prescribing is on the rise.

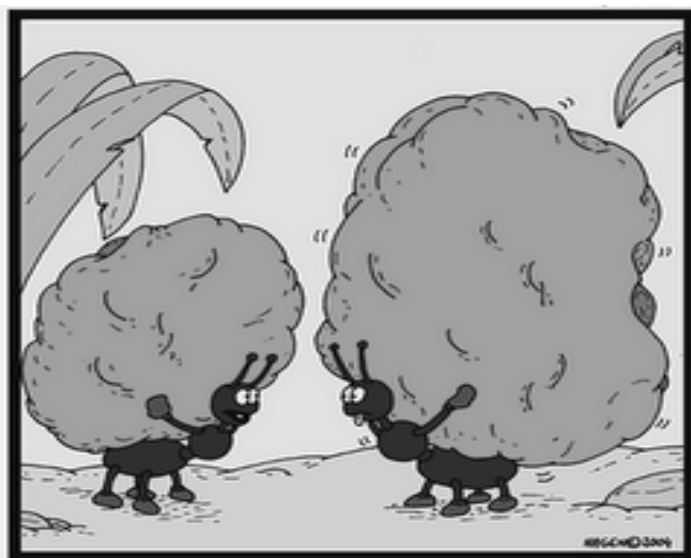
Few members of the medical community would object to the use of narcotics to treat severe, chronic, cancer-related pain. However, according to a number of well respected researchers and the studies that have been published, the medical community seems divided over the suitability of narcotics to treat other forms of pain, such as those resulting from the majority of workers' compensation injuries. This is especially true for work related back injuries. The NCCI study found that more than 32 percent of prescriptions written for narcotics are for claims involving backs.

Pain's impact, both acute and chronic, on workers' compensation costs is clear. According to the American Pain Foundation, when a workers' compensation claim involves Schedule II opioids (Percocet, OxyContin, etc.) for the treatment of pain, the added cost of a claim averages nearly \$20,000.

In terms of return to work, the odds of chronic work loss (defined as greater than six months off work) are six times greater in claimants who are prescribed Schedule II opioids than those who don't. Injured workers taking long-term opioids of any kind are 11 to 14 times more likely to experience chronic work loss.

The challenge for prescribers, patients, employers and insurance carriers is to promote the appropriate use of pain meds while preventing misuse, with the ultimate goal being the achievement of an optimal level of pain control that promotes return to work and improved quality of life.

In order to respond effectively to the ever-changing landscape of narcotic usage for the control of pain in workers' compensation claims, successful and innovative programs must be developed. That's exactly what's being done at the Trust for our members and self insured clients. Whether it's access to our network of specialized pain management providers or our comprehensive pharmacy program that allows our claims staff to access and monitor a claimant's drug therapy program, it's this type of approach that is required to ensure that patient health and safety is always in the forefront as well as controlling overall claim costs.



I hurt my back last week, so I've been put on "Light Duty" for a couple of weeks . . .

It does appear that closer scrutiny may be on the horizon for those who are prescribing narcotics and monitoring the levels at which they are being dispensed. Researchers from NCCI noted in their study that the Food and Drug Administration is currently in the process of establishing a federal program to ensure the safe and appropriate use of narcotics. The proposed program is designed to control the prescribing, dispensing and distribution of narcotics. One aim of the initiative is to ensure that only physicians who are properly trained in the safe use of narcotics can prescribe them. We can only hope that this initiative is achieved.

## The Medical Corner

Mark Russi, MD, MPH

Medical Director

Workers' Compensation Trust

## Establishing a Successful Wellness Program

More and more employers are recognizing the potential value of wellness programs to maintain a healthy workforce. Such programs generally focus on disease prevention education, screening for cardiovascular risks and for cancer, management of chronic health conditions, and workplace availability of healthy food choices and opportunities for exercise. The business decision to offer wellness services to employees is often based on a desire to reduce healthcare costs for common conditions, to decrease absenteeism, increase productivity, and enhance employee satisfaction.

A number of principles should be considered by employers who wish to establish successful wellness programs. Employers should understand their employee populations, and offer services appropriately targeted to age group, gender, and educational level. Services should also be made available to all employees, and communicated in ways likely to reach all. Some employees are easily reached by email or web-based communications while others are not. Incentives may also be considered, ranging from lower health insurance premiums to individual prizes or departmental recognitions.



The more commitment expressed by senior management, the more likely employees will embrace a wellness program, and senior management demonstrating its engagement in highly visible ways is often effective. Periodic health assessments, some of which are web based, have also been used successfully by some, and ongoing assistance to employees in setting personal wellness and fitness goals is generally well advised. As a means of improving employee satisfaction, as well as for health expense reduction, provision of wellness services not only to employees, but also to their families should be considered. Finally, as programs are put in place, it is important for employers to monitor participation rates, level of satisfaction, and impact on health behaviors.

As a benefit to members, the Trust is presenting an educational seminar on July 15, 2010 from 9:00-12:00 titled "How to Establish a Successful Wellness Program". Details of the seminar and registration information will be made available in the near future.

## Support Your Local Community by Donating to Those in Need



This past holiday season, Trust employees donated food and Stop and Shop gift cards to Master's Manna, Inc, an organization in Wallingford that provides food, clothing, diapers and free clinic services to those in need in the Wallingford-Meriden area. A special thanks to the Trust's Rosemary Proto for her contribution of homemade cookies that were raffled off to raise funds.

# **HITECH Amends HIPAA: Protecting Health Information in the Electronic Age**

**The Legal Corner**  
Attorney John M. Letizia, Managing Partner  
Letizia, Ambrose & Falls, P.C.  
New Haven, CT

As the health care industry evolves in this vast age of technological advancements, electronic health records are paving the way of the future. The Health Information Technology for Economic and Clinical Health's (HITECH) goal is to protect an individual's (e.g. patients, insureds, etc.) unsecured protected health information (PHI) as it is stored and saved in electronic formats, and even sent through cyber-space. In the event of an unauthorized disclosure or breach of an individual's unsecured protected health information, HITECH outlines breach notification requirements, as well as imposing higher civil monetary damages, based on level of culpability, and in some cases even criminal penalties.

While HIPAA applied to Covered Entities (medical providers, insurance carriers, etc.), HITECH expands its jurisdiction to include the Business Associates of these entities, as well.

Should a breach of protected health information occur, notification must be made within 60 days of discovering the breach to the affected individuals, as well as notifying each other of their breaches. In addition, under HITECH, a State's Attorney General can bring a civil action, similar to a class action, for a person or persons who have been affected by a violation.

## **IMPLEMENTING HITECH REQUIREMENTS**

### **1. Update HIPAA Privacy Policies and Procedures**

A Covered Entity's HIPAA Privacy Policies and Procedures need to be updated to comply with HITECH. The Policy should outline how to detect, prevent and mitigate unauthorized disclosure of protected health information as well as disclosing only the "minimum information" necessary.

### **2. Train Employees**

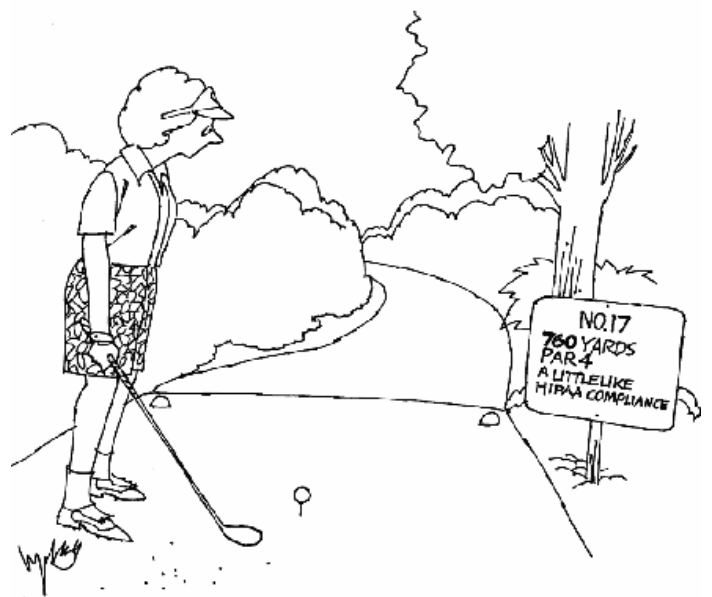
Covered Entities and Business Associates should also train their employees to know the procedures for disclosing protected health information and what to do in the event of a breach, including whom in the

company to contact.

### **3. Modify Business Associates Agreements**

Agreements between Covered Entities and Business Associates should include (but are not limited to) the following: (1) notify the Business Associates of their duties under HITECH, including notifying the Covered Entity of unauthorized disclosure/breach of protected health information, whether the Covered Entity or the Business Associate made the unauthorized disclosure/breach; (2) comply with "minimum use," marketing and disclosure requirements, including prohibiting the sale of protected health information, (3) agree to have HITECH compliant procedures in effect to protect personal health information; (4) report any authorized disclosures, including what to do in the event of a breach, including mitigating, curing and reporting to HHS; and (5) include indemnification language.

This is just a brief summary of the requirements of HITECH. If you would like a more expanded version of this article, or help drafting a HITECH Business Associate Agreement that complies with HITECH and all Connecticut's confidentiality laws, please contact Attorney John Letizia at [letizia@laflegal.com](mailto:letizia@laflegal.com) or (203) 787-7000. As a member of the Trust, you will receive a discount off all legal fees for this work.



# OSHA Recordkeeping and National Emphasis Program

On January 13, 2010, Bridgeport Area OSHA Director, Robert W. Kowalski, and OSHA Compliance Assistance Specialist, Leona May, provided detailed information on the OSHA Recordkeeping Standard and the New National Emphasis Program on Recordkeeping which also affects Nursing Care Facilities.

The Trust offers this OSHA Recordkeeping Seminar yearly in early January to help members prepare their OSHA Recordkeeping Summary which must be posted at each worksite annually from February 1<sup>st</sup> to April 30<sup>th</sup>. Ms. May conducted a presentation on OSHA's Recordkeeping Standard, explaining what needs to be recorded, what is not recordable per first aid criteria, covered employees, how to record privacy information, and how to complete the summary report for posting. The purpose of the OSHA Recordkeeping Standard is to require employers to collect injury and illness data and report it to the government. The records provide the base data for the Bureau of Labor Statistics survey of occupational injuries and illnesses, the nation's primary source of occupational injury and illness statistics.

Mr. Kowalski introduced the National Emphasis Program (NEP) on Recordkeeping which is effective from September 30, 2009, until October

01, 2010. The purpose of the program is to identify and correct under-recorded and incorrectly recorded cases. This NEP also complements the Bureau of Labor Statistics' (BLS) efforts to investigate factors accounting for differences in the number of workplace injuries and illnesses estimated by the BLS and other data sources. OSHA decided that the most likely places where under-recorded injuries and illnesses may exist would be low rate establishments operating in historically high rate industries, such as Nursing Care Facilities. OSHA will address the issue by inspecting, correcting violations and fining establishments who have underreported injuries and illnesses. OSHA may obtain information through a Medical Access order permitting searches in all medical files of employees. Also OSHA is deemed to be a "health oversight agency" and as such is exempt under HIPAA privacy regulations, and does not need to obtain prior authorization of individuals for access to health records when such information is required to determine compliance with OSHA health and safety standards.

If you have any questions on OSHA compliance, please contact your Senior Loss Control Consultant or Carol Fronczek, Vice President, Loss Control Services.



## What do you think?

### Was This Injury Deemed Compensable?

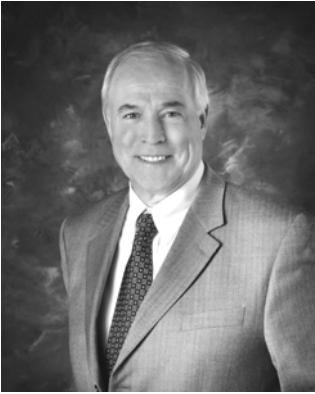
A firefighter served a Notice of Claim on the assistant fire chief alleging that his heart disease was aggravated by activities performed while fighting a fire. The employer attempted to argue that the Notice of Claim was defective because it was not presented to the proper party for the defendant. Was the notice proper?

Please email your opinion to Bob MacDonald at [macdonald@wctrust.com](mailto:macdonald@wctrust.com)

### Answer to Case from December Issue

Thanks for the many responses. The employee asserting a claim for dismissal in retaliation for filing a workers compensation claim has the option to pursue the claim before the Workers Compensation Commission or Superior Court. Once the employee makes their decision on which venue to pursue their claim, they will then be foreclosed from pursuing the same action in the other venue.

## News from the Board of Directors



The Trust is pleased to welcome W. Rennard Wieland to its Board of Directors. Mr. Wieland brings a wealth of knowledge in the Home Care industry. Before opening Connecticut In-Home Assistance in 2002, he was the President of the VNA Health at Home, Inc from 1982 - 2002. Prior to working in the healthcare industry, Mr. Wieland worked with Travelers Insurance Company and Knights of Columbus Life Insurance Company, as well as the Eastern Connecticut Professional Services Review Organization. He had previously served as a Trust board member from 1997-1999.

Renny and his wife Betsy live in Branford. We are excited to have him on board and look forward to working with him.

### Connecticut Workers' Compensation Commission Assessment Rate Increase

Effective January 1, 2010, the Connecticut's Workers' Compensation Commission assessment rate was increased from 1.90% to 2.30% of premium. This assessment covers the cost of the administration of the Workers' Compensation Commission including all district offices. All policies already written in 2010 will be adjusted at audit. Any questions, please contact your broker or Nate Shippee at (203) 678-0110.

### Building Powerful Teams Through Great Leadership

Mary Jo Leahy, MBA, Leahy Resources, returned to the Trust on January 26, 2010, to facilitate a new full day seminar on leadership skills and the development of effective and powerful management teams.

Mary Jo is a training consultant with specialized focus in human resources and has twenty years of experience. She designs and delivers training programs for a wide variety of organizations to include healthcare, financial services and social service organizations. Her expertise in creating and facilitating training programs inspires senior management towards excellence in leadership, communication skills and teambuilding.

The seminar was composed of 6 segments, the first being a discussion about great leadership and the elements which identify great leadership. Three major leadership styles were examined:

- **Authoritarian leadership:** best applied to situations where there is little time for group decision-making or a lack of experience on the topic.
- **Participative leadership:** encourages group members to participate, but retain the final say over the decision-making process.

- **Delegative leadership:** offers little or no guidance to the team and leave decision-making up to group members; however, the leader is still responsible for the decisions that are made.

Participants from over 30 member agencies and staff from the Trust engaged in a self evaluation of leadership style and identified what stage their own team development was in. Action planning was the last segment and this involved an introspective self-assessment of strengths as an effective team-builder, leader and communicator. Participants, using techniques in the seminar, also had to determine how to improve their leadership, communication and teambuilding skills and how to go making those improvements. This exercise encouraged participants to continue an action plan which they could take with them to improve their leadership skills and encourage optimal teambuilding among their management teams.

For information pertaining to future Education Seminars please visit our website, [www.wctrust.com](http://www.wctrust.com) or contact Jennifer Garnett at [garnett@wctrust.com](mailto:garnett@wctrust.com) or 203-678-0123.

# Upcoming Educational Programs

## DEMENTIA CARE SPECIALIST TRAINING

MARCH 9                      8:30 AM – 4:30 PM                      MEMBERS: \$50                      NON-MEMBERS: \$100



## NATIONAL SAFETY COUNCIL DEFENSIVE DRIVING 4-HOUR COURSE

MARCH 18                      8:30 AM – 1:00 PM                      MEMBERS: \$50                      NON-MEMBERS: \$75

## DEVELOPING AN EFFECTIVE SAFE DRIVING PROGRAM

MARCH 30                      9:00 AM – 12:00 PM                      MEMBERS: FREE                      NON-MEMBERS: \$50



## ELIMINATING COSTLY EMPLOYEE SLIPS, TRIPS, AND FALLS

APRIL 8                      9:00 AM – 12:30 PM                      MEMBERS: FREE                      NON-MEMBERS: \$50

## MAKING SENSE OF FINANCIAL REPORTS FOR STRATEGIC PLANNING AND UPDATES ON FORM 990

APRIL 22                      9:00 AM – 3:30 PM                      MEMBERS: FREE                      NON-MEMBERS: \$100



## OSHA 10 HOUR GENERAL INDUSTRY SAFETY AND HEALTH OUTREACH TRAINING

MAY 4 & MAY 11                      9:00 AM – 3:30 PM                      MEMBERS: \$195                      NON-MEMBERS: \$300

## UNDERSTANDING THE MANDATE FOR GREEN CLEANING

MAY 25                      9:00 AM – 12:00 PM                      MEMBERS: FREE                      NON-MEMBERS: \$50



Discounted rates are available for groups of 3 or more from one organization



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