

# Trust Intelligence

A Newsletter for Members of the Workers' Compensation Trust

Issue 88

June 2016

## How Injured Workers' Fear Can Negatively Impact Claim Outcomes

Let's set the stage for a common scenario that is often experienced when a worker unexpectedly suffers an on-the-job injury. The injured worker is now in pain, is told by the medical provider that they cannot perform their regular job duties, and they are suddenly thrust into a workers' compensation system that can at times be very confusing. Think of it from the injured worker's perspective; bills keep coming to the house, family demands continue, and everything that once seemed routine and normal is now suddenly not. No doubt, it can be a potentially vulnerable time, with substantial fear involved.

The Workers' Compensation Research Institute (WCRI) recently published a study involving the responses of over 4,800 injured workers from across 12 states including Connecticut who received workers' compensation income benefits. The research clearly identified that an injured worker's fear of being fired had a large and pervasive effect on claim costs and worker outcomes, like when the worker returns to work. The fear of being fired seems based on the level of trust the worker has with their supervisor. If the relationship was identified as being one of low trust, the worker was more likely to fear being fired when injured and overall claim costs were found to be substantially higher compared to those who had a low fear of being fired.

The study also showed that those who reported a higher concern of being fired experienced:

- increased disability durations increased by 4 weeks
- low satisfaction rates with the medical care
- decreased satisfaction with access to medical care
- increased Attorney representation

What can employers do to help mitigate increased workers' compensation costs from worker fear? Here are a few suggestions that will improve outcomes:

1. File injury reports in a timely manner so benefits are paid on time and the claims representative can reach out to the injured worker and guide them through the claims process.
2. Establish clear, concise and consistent information between you as the employer and the injured worker on their rights and responsibilities within your organization. It's important to keep communication open and ongoing with the injured worker.
3. Promote early return to work with transitional duty whenever possible. Research has shown that the longer the injured worker is out, the less likely it is for the worker to ever return.
4. Encourage workers to identify safety hazards as well as recommend opportunities to improve safety. When workers are encouraged to point out issues or offers suggestions on how to improve things and these comments are taken seriously and acted upon, trust is formed.

The research presented by WCRI highlights just how important trust and engagement is between the worker and their employer in ensuring good outcomes. The keys are reducing overall stress and fear by early intervention, effective communication, access to timely medical care, effective return-to-work programs and by always putting safety first.

### Inside This Issue

- |   |   |   |  |
|---|---|---|--|
| 2 | <b>June is National Safety Month</b>                                | 4 | <b>Wellness Zone: Summer Incentive Programs</b>      |
| 2 | <b>Dragonheart Foundation Helping Organizations in Need of AEDs</b> | 4 | <b>OSHA News</b>                                     |
| 2 | <b>Staff Changes</b>  | 5 | <b>Prescription Drug Overdoses</b>                   |
| 3 | <b>CNA of the Year Awards</b>                                       | 5 | <b>BUSTED!</b>                                       |
| 3 | <b>Board of Directors News</b>                                      | 6 | <b>The Legal Corner: Confidentiality Obligations</b> |
| 3 | <b>Online Claim Reporting</b>                                       | 7 | <b>The Medical Corner: Hepatitis C in the U.S.</b>   |
|   |   | 8 | <b>Education Calendar</b>                            |

**A Lifetime of Risk**

Preventable injuries are the 4<sup>th</sup> leading cause of death in the U.S. right after heart disease, cancer and chronic lower respiratory disease.

**Top Risks by Age Group**

- UNDER 12 MONTHS: Mechanical Suffocation**
  - More than 2 preventable deaths occur per day
  - Have infants sleep in a crib, not the parent's bed
  - Place infants on their backs to sleep
  - Keep stuffed animals and blankets out of cribs
- AGE 1 TO 24: Traffic Crashes**
  - Nearly 21 preventable deaths occur per day
  - Buckle up every trip, every time in size-appropriate restraints
  - Drive with teens to gain more driving experience even after licensure
  - Don't use electronic devices including hands-free while driving
- AGE 25 TO 64: Poisoning** (Largely from Prescription Pain Medication)
  - More than 92 preventable deaths occur per day
  - Ask your doctor about alternatives to prescription pain medication
  - If you have to take opioids, take the smallest dose for the shortest time
  - Never share your prescriptions with friends and family
- AGE 65 & OLDER: Falls**
  - More than 69 preventable deaths occur per day
  - Use non-skid mats in the bath and shower
  - Install grab bars near the tub, toilet and stairs
  - Provide adequate lighting in every room and stairway

SMALL CHANGES TODAY CAN MAKE A HUGE DIFFERENCE TOMORROW.  
Visit [nsc.org](http://nsc.org) for more helpful resources. #Safe4Life

# June is National Safety Month

The National Safety Council celebrates National Safety Month each June by producing information and resources on safety and wellness for both the workplace and home. While this information is publicized in June, safety never expires, and these resources are great to use year round.

The information is free to download and distribute to your employees as you work towards making both the workplace and their homes safer. We encourage our members to take advantage of this resource and kick off your summer safety and wellness campaigns. Registration is free and easy. Go to [safety.nsc.org](http://safety.nsc.org) and register to receive the free downloadable materials.

Weekly topics include:

**Stand Ready to Respond** - This material focuses on preparing employees to respond to an emergency such as choking or a heart attack and CPR techniques.

**Be Healthy** - This material can be used to supplement or begin a wellness program initiative for your organization.

**Watch Out for Danger** - Employees will learn to identify hazards that could lead to injuries in the workplace and at home.

**Share the Roads Safely** - This material is designed to remind and educate employees to be aware of their surroundings and understanding of how to share the roads safely.

## Local Foundation Offers Automatic External Defibrillators (AEDs) to Organizations in Need

The Michael Vincent Sage Dragonheart Foundation is a nonprofit organization established in honor of it's namesake who passed away at the age of 29 from sudden cardiac arrest. The foundation was formed to help provide agencies and organizations with Automatic External Defibrillators (AEDs) to to aid in life saving intervention in the case of a cardiac arrest emergency.

To obtain an AED for your organization, go online to [www.defibandlive.org](http://www.defibandlive.org) click on the **How to Apply** link. There are also donation opportunities for those who may wish to support this fine foundation.

## Staff Changes



### Bidding Farewell to Charlyne Carson-Hyde

In April, we said farewell to Charlyne Carson-Hyde. Charlyne joined the Trust in October, 2004 and spent the next 11 1/2 years as a Nurse Case Manager working with many injured workers. She was the consummate nursing professional. Her commitment and hard work did not go unnoticed and we are very sad to see her go, but we wish Charlyne all the best.



### Eloise Fioravanti Joins the Trust as Senior Claim Representative

The Trust is pleased to announce that Eloise Fioravanti has recently joined us as Senior Claim Representative. Eloise has over 30 years of claim experience. We are excited to have Eloise join the Trust team. She will be working mainly with our Third Party Administration clients and is already very busy at work reviewing files and updating her accounts.

# CNA of the Year Awards

The Certified Nursing Assistant (CNA) plays a crucial role in a nursing home's ability to properly care for the needs of its residents and it takes a truly exceptional person with a "servant's heart" to meet the many demands of this relatively unheralded position. Each year the Connecticut Chapter of The American College of Health Care Administrators (ACHCA-CT) sets aside a special portion of their annual meeting to recognize these everyday heroes by inducting them into their CNA Hall of Fame. This year's annual meeting was held on March 9th at Zandri's Stillwood Inn in Wallingford, CT and marked the 14th anniversary of the awards ceremony.

To be considered, nominees must have a minimum of 20 years of service as a CNA and an unblemished license history with the State of Connecticut. Candidates are nominated by their facilities' supervisors who submit letters of recommendation and supporting information for each candidate. Representatives of ACHCA-CT review all applications and make the final selections.



The Trust was proud to once again sponsor this year's ceremony as six new inductees were presented. Our congratulations to the following inductees: Joan Read Kelly of West Hartford Health & Rehabilitation (long term Trust member), Rosemarie Goodman of Hughes Health & Rehabilitation, Jadwiga Mankus of Gardner Heights Health Care Center, Mollie Rubino of Orange Health Care Center, Marie Testa of Beacon Brook Health Center and Betsy Walker of 60 West.

Pictured at left is Joan Read Kelly, of West Hartford Health & Rehabilitation.

## **BOARD NEWS**

### **Robert Stephens Retires**



Robert Stephens, former Chairman of the Board of Directors and Executive Director of Kuhn Employment Opportunities announced his retirement effective April 1, 2016. Rob served as a board member since 2004 and was Chairman since January 1, 2014.

The board and staff of the Trust wish Rob all the best in his retirement and thank him for his years of service to and support of the Trust.

### **David Tompkins Appointed as New Chairman**



David Tompkins, Vice President at Klingberg Family Centers was appointed chairman. Dave has served the board for over 20 years and has held multiple officer positions in that time.

We would like to thank Dave for stepping into his new role as Chairman and look forward to his tenure.

## **Reporting Injuries Online Helps Control Claim Costs**

The data is overwhelming in the workers' compensation industry that the quicker a company can report a workers' compensation injury to their insurance carrier, the lower the claim costs are likely to be. To help facilitate this, the Trust is encouraging all our members and clients to utilize the on-line reporting process to report claims. One of the main benefits of on-line reporting is a confirmation that your claim has been received in our system and you are provided with an immediate corresponding claim number.

To report claims online, go to [www.wctrust.com](http://www.wctrust.com) and click on the "Report a Claim" link.

For more information on online claim reporting, please contact Kathi Bepko, Claims Manager at (203) 678-0121 or [bepko@wctrust.com](mailto:bepko@wctrust.com).

### **QUICK LINKS**

- ▶ [Report a Claim](#)
- ▶ [Report Center](#)
- ▶ [Trust University](#)
- ▶ [Provider Search Tool](#)
- ▶ [Pharmacy Search Tool](#)
- ▶ [Report Fraud](#)

## Summertime Incentive Programs Keeping Employees Involved

Summertime is a great time to kick back and recharge while continuing to focus on employee health and wellness. The internet remains a valuable resource in helping with these initiatives.

Constant and consistent reminders, education and employee buy-in will go a long way towards helping to ensure your employees are fit and healthy. There are a multitude of suggested daily, weekly and monthly themes which can



be found on the internet. Focusing on a particular theme each month will help keep the program going and keeps employees motivated and committed.

Here are several themes for the summer months; National Men's Health Week, National Trails Day, National Park and Recreation Month, UV Safety Month, Eye Injury Prevention Month, National Great Outdoors Month, and National Health Center Week.

Encourage employees to sponsor teams and help to raise money for a common cause. This is a win-win for both the employees and the cause.

Wellness does not have to be costly. Utilize the free resources available to you and your employees, and all will reap the benefits.



---

## OSHA Updates: Changes in Reporting of Injuries

Since January 1, 2015, employers have been required to report any severe work-related injury-defined as hospitalization, amputation, or loss of an eye within 24 hours. The requirement to report a fatality within 8 hours was unchanged. These rules went into effect for every employer regardless of the number of employees or the type of business. The goal of the program is to assist OSHA with focusing resources where they are most needed and engaging employers in high-hazard industries to identify and eliminate hazards.

During the first full year of the new reporting requirement, employers reported 10,388 severe injuries, including 7,636 hospitalizations. Health Care and Social Assistance reported 6% of the hospitalizations. Only 30.54% of the employers reporting a hospitalization received a visit from OSHA. Organizations for which an inspector was not sent, were asked to conduct their own incident investigations and propose remedies to prevent future injuries. This process is known as the Rapid Response Investigation (RRI). A typical RRI has the employer

analyze the incident to identify the causes and presents to OSHA its findings and proposed abatements. The conversation may be in person or phone and email and abatements can be verified with photos.

While many employers are reporting, it is believed that some employers are choosing not to report because they perceive the cost of not reporting to be low, however, OSHA is likely to cite for non-reporting. The agency recently increased the unadjusted penalty for not reporting a severe injury from \$1,000 to as much as \$7,000 and this amount will increase even more when the citations and violations double in August of 2016.

Employers can report online at [osha.gov/report\\_online](http://osha.gov/report_online) or by calling 1-800-321-OSHA.

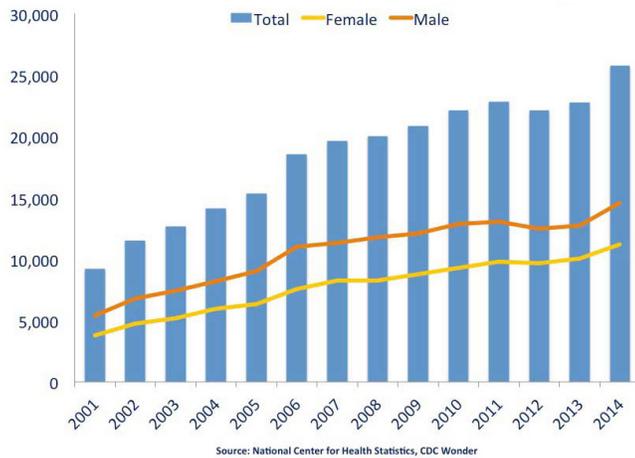
Please contact us at [losscontrol@wctrust.com](mailto:losscontrol@wctrust.com) should you have any questions on the reporting requirements or need assistance reporting a severe injury or if an RRI needs to be completed.

# Prescription Drug Overdoses

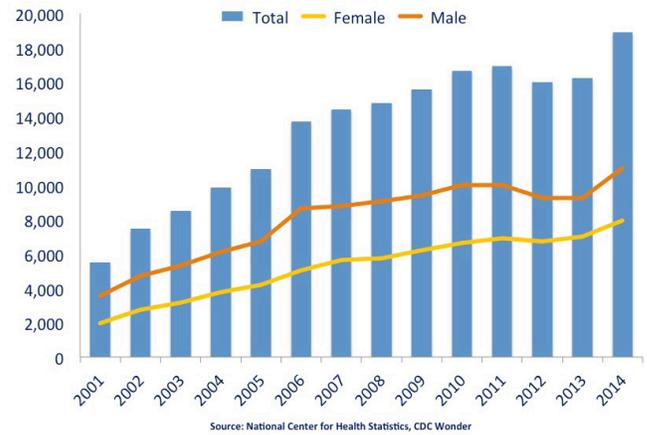
## On The Rise

The number of American deaths related to prescription drug overdoses is escalating at an alarming rate with overdose related deaths up by 400% since 1999. The bulk of these deaths are from opioid pain relievers. The rise in opioid dependency has also contributed to the explosion of heroin use in Connecticut because addicts can obtain street heroin cheaper than pain killers. However, street heroin is so pure that it is killing many first-time users, most often between 17 and 26 years old. The problem has drawn the attention of legislators on both the state and national levels.

### Number of Deaths from Prescription Drugs



### Number of Deaths from Opioid Pain Relievers



A female visiting nurse in her early fifties injured her ankle in September 2011 allegedly tripping over a chair while on duty at a patient's home. The claim was deemed compensable based upon the accident facts and medical

appointments, the worker would attend the appointments with the walking boot and used the cane with a noticeable limp.

The evidence was eventually shared with the treating physician and with the injured worker and her attorney. As a result, the claim was immediately settled releasing the Trust and the member of all legal liability associated with the claim.

reports received. The worker initially sought treatment and was diagnosed with a sprained ankle. As time went on, the complaints expanded from the initial ankle injury to a back and neck strain as a result of the trip. Treatment continued to expand over a two year period and the worker became very dependent upon the use of a cane and a walking boot. Despite negative findings on x-rays and other diagnostic tests, the worker continued to complain of extreme pain and discomfort throughout her body and especially with her ankle. The pain apparently became so debilitating, she requested medical transportation to and from her medical appointments.

The Trust initiated an investigation with its Special Investigation Unit which included surveillance over a several month period. Video evidence ultimately revealed that the worker was seen repeatedly walking without a cane or the walking boot during normal activities including driving her own car. When it came time for medical

## Welcome to the Newest Members of the Trust!

Advanced Behavioral Health, Inc.

Clinical Neurobehavioral Services, Inc.

The Curtis Home

The Johnson Home, Inc.

New Opportunities, Inc.

Parent Care, LLC dba Visiting Angels

Sharp Training, Inc.

SLM & JIML, LLC dba Right at Home

# The Legal Corner

Attorney John Letizia, Managing Partner

Letizia, Ambrose & Falls, P.C., New Haven

## Confidentiality Obligations for Employers

### HIPAA and Beyond

All healthcare employers have confidentiality obligations to their patients or clients and employees. Healthcare employers that are subject to HIPAA must be aware of their confidentiality obligations to patients or clients and have policies and safeguards in place to protect confidential health information. Even non-medical companion agencies, which are not directly covered by HIPAA, are subject to HIPAA if they are business associates of covered HIPAA entities. Whether or not a healthcare employer is subject to HIPAA, they must be aware of Connecticut's confidentiality laws governing highly sensitive medical information, which are more restrictive than HIPAA. Finally, employees have certain privacy rights in the workplace as it relates to their medical, private and personnel information, which must be balanced against an employer's right to know and govern the workplace.

#### **HIPAA Covered Entities Must Protect the Privacy and Security of Confidential Health Information**

Individuals, organizations and agencies that are "covered entities" under HIPAA must comply with specific requirements to protect the privacy and security of personal health information, and must provide their patients or clients with notice of their rights with respect to their health information. HIPAA covered entities are health plans, health care clearinghouses and health care providers who transmit health information in electronic form. These requirements include use of HIPAA-compliant authorizations when necessary, and the implementation of safeguards to protect personal health information from unauthorized use or disclosure, including encryption and the use of password protection on computers and phones containing personal health information.

***Business Associates Are Also Subject to HIPAA*** - If the covered entity uses a business associate (e.g., an outside electronic medical records vendor) to carry out its health care operations or functions, the covered entity must have a written agreement with the business associate that describes what the business associate is being asked to do and requires the business associate to protect the privacy and security of protected health information in its possession. Non-medical healthcare employers could be

business associates of covered entities (e.g., companion agency that is a subsidiary of a skilled home care agency that are both caring for the same patient) and, as such, can be held directly liable under HIPAA for non-compliance with certain HIPAA rules.



#### ***Connecticut's More Restrictive Confidentiality Obligations*** - All oral and written communications and records relating to a client's substance abuse, mental health, HIV or AIDS status, or genetic testing are considered highly sensitive communications under Connecticut law. In general, any disclosure of this highly sensitive information requires a special authorization (above and beyond what is required by HIPAA) signed by the patient or client prior to disclosure. Even if you do not provide medical services to clients or patients, you may be in possession of highly sensitive medical information regarding the clients or patients you serve, and you must take steps to safeguard it against unauthorized disclosure.

#### **Employee Privacy Rights in the Workplace**

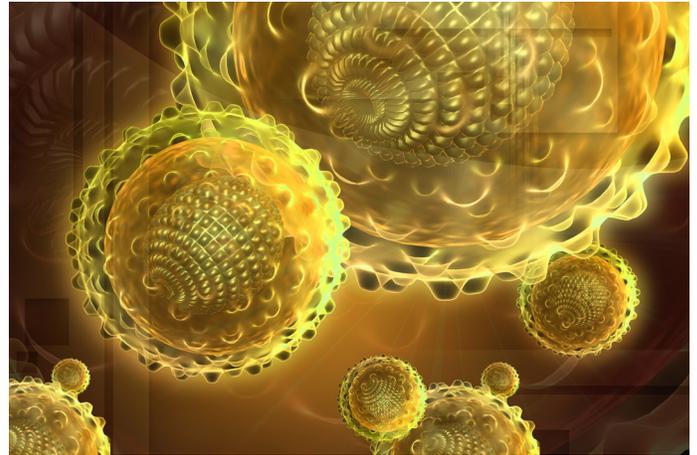
***Personnel and Medical Information*** - In general, information contained in employee personnel and medical files may not be disclosed by an employer without the written consent of the employee, except in very limited circumstances. Moreover, employees have the right to access their personnel files on an expedited basis, as well as a right to notification of any discipline and termination documents that are placed in their personnel files. Employers that fail to comply with the requirements of Connecticut's personnel file law may face fines of up to \$1,000 per violation.

***Social Media in the Workplace*** - Although employers may prohibit employees from using social media to post  
*(Continued on next page)*

## Hepatitis C in the United States

Based on data from a national survey, the U.S. Centers for Disease Control and Prevention (CDC) estimates that 3.5 million Americans have hepatitis C. For every 100 individuals infected who do not receive treatment, 75-85 will develop chronic infection, 60-70 will develop chronic disease of the liver, 5-20 will develop cirrhosis, and 1-5 will die from liver cancer or cirrhosis. Needless to say, the virus is responsible for a substantial burden of disease, mortality, and medical cost. It is spread via the bloodborne route and is not transmitted by casual contact. It does not spread easily through sexual intercourse, but it is possible for it to spread in that way. Current or former injection drug users are at risk, as are recipients of blood transfusions prior to 1992, chronic hemodialysis patients, individuals born to hepatitis C-positive mothers, and healthcare workers who sustain needlesticks from hepatitis C-positive patients. Many individuals who have hepatitis C are not aware of it because symptoms may not occur for many years following infection. Current recommendations are that those with risk factors should be screened, as well as individuals born between 1945 and 1965 if they have never been tested.

In the past, chronic hepatitis C was treated with a combination of Interferon alpha 2B and Ribavirin for 24-48 weeks. For individuals who harbored the most common type of hepatitis C genotype, only about 50% were cured by that treatment. More recently a number of newer drugs have considerably improved the prognosis, potentially to a long-term viral clearance rate of 95%. The drugs belong to several classes which work directly upon the virus, and they are tolerated considerably better than



older treatments. Unfortunately, they also are very expensive, with treatment costs for the drugs alone exceeding \$100,000 in many cases. A number of cost effectiveness analyses have been carried out, taking into account the long-term costs avoided when an individual receives treatment and is no longer at risk for health conditions such as cirrhosis and liver failure. Generally the studies have used modeling to compare newer to older treatment regimens, and most have shown the benefits of treatment to be commensurate with cost when compared to other generally accepted cost-benefit ratios in healthcare. That said, cost may be a barrier to accessing care for many who would benefit from it, and time will tell whether competition in the marketplace, compassionate use programs, or other strategies will improve access for those who could benefit from this important therapeutic advance in combatting a very serious disease.

---

## Confidentiality Obligations Continued

pictures or make identifying comments about consumers, clients or patients under the employer's care, employers may not restrict all employee speech on social media about the terms and conditions of employment without violating Connecticut law, and possibly federal law (e.g., right of employee to complain about her manager being "difficult and unfair" on the employee's public Facebook page). Employers should have narrowly tailored social media policies to protect the legitimate privacy interests of patients, consumers and clients, as well as each employee,

without impairing an employee's free speech right. This is not an easy balance.

---

The representations made in this article are the analysis of the law offices of Letizia, Ambrose & Falls, P.C., who are responsible for its content. This information and analysis are provided gratuitously and for information purposes only. You are encouraged to consult with the appropriate legal counsel prior to relying on this information or analysis.

If you have questions regarding your confidentiality obligations, please contact John M. Letizia at [letizia@laflegal.com](mailto:letizia@laflegal.com) or (203) 787-7000.

