Readership Survey Results

Thanks to each of you who participated in the The Heritage News readership survey! We set out to learn more about our readers and were delighted at the wonderful response we received. After tabulating the survey results, we were thrilled that so many of you found The Heritage News to be a helpful publication. We appreciate the great ideas many of you submitted.

Here’s a recap of the survey results, along with a few of your ideas that we’ll be implementing in 2014.

Diversity is the best descriptor
Overall, The Heritage News readers are a diverse group, with a few common connectors. Our readers include doctors, nurses and other medical professionals, as well as nonmedical administrative and accounting personnel. Nearly every medical specialty is represented, but a large segment (roughly half) of our readership is made up of employees from general practice clinics, as well as orthopaedic and chiropractic offices. A full 80 percent of you work for small groups or individual providers.

Your opinions drive our decisions
As for the newsletter, the responses we received were a great encouragement. More than 96 percent of you rated the content as excellent or good; 86 percent read most or all of the articles; and 75 percent pass The Heritage News on to others in your offices. You told us that the topics most interesting to you detail workers’ comp and return-to-work processes, and many of you requested information related to specific specialties. Last, a significant number of you requested that we increase our publishing schedule from twice a year to quarterly.

Putting it into practice
Our next step is to take some of your great ideas and put them to work, and we’ve done just that. You’ll notice some are already in place in this issue.

First, we’ve replaced our typical Provider Profile section with a Specialty Spotlight. In each of the four issues of 2014, we’ll highlight a different medical specialty and the ways those practitioners interact with the world of workers’ comp. And yes, you read that correctly, in 2014, we’re doubling our production to give you four newsletters! Each will be filled with the information you need to make working with workers’ comp as smooth as possible. We’re excited about these changes and we know you will be too. Stay tuned!

Keep it coming!
The survey may be over, but we’re always interested in your feedback. If you have a suggestion for The Heritage News, send an email to heritagenews@summitholdings.com.
2014 Brings Health Care Reform to the Forefront

Early January of this year was dominated by two competing headlines: record cold temperatures and the individual mandate now required by the Patient Protection and Affordable Care Act (PPACA).¹

Now the weather is warming up, but the exact impact of the new PPACA mandate remains to be seen. Several industry publications have recently speculated on the following items as probable results.

A healthier workforce

The goal of any health care reform, presumably, is to improve the overall health of a population. If successful in this endeavor, the new legislation could have a major impact on the comorbid conditions that are a growing concern in workers’ comp. (For more on how comorbidities impact workers’ comp patients, see the Spring 2013 issue of The Heritage News.)

First, PPACA offers incentives to employers for creating workplace wellness programs.² Risk Management magazine points out that, “an employer can reduce the amount of money it pays for health insurance by developing and maintaining programs that encourage wellness. These programs should create a workforce that is less obese and healthier, which will result in a reduction of healing time for work injuries.”³

Second, in addition to reducing the overall prevalence of comorbid conditions, treatment for patients with existing conditions should now be available through regular health insurance, further reducing the impact on workers’ comp claims.

Fewer fraudulent claims

In previous issues of The Heritage News, we have examined fraud in the workers’ comp system, and the ways insurers and providers are working together to eliminate it. One of the most exciting changes many hope that reform will bring is a reduced tendency toward claimant fraud. The National Underwriter Company’s website, PropertyCasualty360.com, explains it this way, “Some of those without health insurance who get hurt away from work have been known to falsely report that they were injured on the job so they can have comp insurers fully cover their medical expenses. Having millions more get health insurance thanks to PPACA might erase or at least ease that temptation.”⁴

There is some evidence to support this theory. The American Academy of Orthopaedic Surgeons (AAOS) believes that, while there are differences, the Massachusetts Health Care Reform Law of 2006 shares the basic tenets of PPACA and can give us some idea of what to expect nationally. After reform was enacted in the state, “patients who would have used workers’ compensation for coverage were more likely to use their actual health insurance. The number of workers’ compensation claims declined 4 percent after reform. Among patients who were identified as ‘high-cost’ because they had conditions that historically placed a greater burden on insurance, the number of workers’ compensation claims declined by 6 percent.”⁵

If this theory holds true, reduced fraud could have a favorable impact on the workers’ comp system as a whole.

Provider shortages and return-to-work setbacks

One issue of concern for many industry insiders is the possibility of a doctor shortage. Risk and Insurance magazine writes, “a potential shortage of doctors will overwhelm the delivery of health care as, potentially, 30 million new health care users come into the system at the same time while the number of doctors, particularly primary physicians, is decreasing. On a
per capita basis, starting in 2015, the estimated doctor shortage will be approximately 63,000. By 2025, the shortage could be as high as 131,000, primarily due to the impact of additional users coming into the health care system.”

PropertyCasualty360.com elaborates on the impact this issue could have on the workers’ comp system. “There are concerns that pent-up demand for even routine medical services could overload the healthcare system... If bottlenecks do materialize, they could turn out to be a major cost driver for time-sensitive workers’ comp carriers, which place a priority on providing fast and intensified treatments to get people back on the job and off wage indemnity payments as quickly as possible.”

Longer wait times for workers’ comp patients could mean more time off work, which would translate to increased lost-wage payments and higher claims costs. This ultimately impacts insurance premiums, which are a major cost-driver for employers.

Our response
While health care reform and its impact on workers’ comp remains uncertain, we believe there are concrete ways we can improve our industry. These aren’t new ideas. In fact, we’ve published them before in this newsletter. But, we believe that the best ideas are those that stand the test of time, and these certainly have.

• **Evidence-based medicine.** We believe patients always benefit when providers have the latest treatment information and use effective, scientifically proven methods of care. That’s why you’ll hear us talk about the Official Disability Guidelines (ODG). It’s the tool we’ve found that most closely matches our goal of promoting evidence-based medical care.

• **Managed care.** Managed care is not what it used to be. Our goal is simply to use the people and technologies we have available to make your job easier. Our on-staff adjustors, nurse case managers and medical directors are here to facilitate communication between primary care physicians, surgeons, physical therapists and other specialists that may be involved in a particular case.

• **A quality provider network.** We are only as successful as you are. That’s why we carefully choose the best providers for our network. You are a part of this select group, and we appreciate your efforts to provide the best care possible to our injured workers.

• **Communication via technology.** In addition to ODG, there is an incredible amount of information available online that can help you on a daily basis. We have several resources available on our website, [www.summitholdings.com](http://www.summitholdings.com), which we will continue to expand for you and your patients.

• **Return to work.** This is what workers’ comp is all about. Helping patients recover and get back on the job is the reason we’re here. Plus, facilitating their transition back to work, even before they’ve fully recovered, can aid the healing process.

• **Cost-effective care.** Each of the concepts we’ve mentioned has the potential to decrease overall costs for the employer, while improving care for the patient. Both goals are vital to a healthy workers’ comp system, and—when managed well—they can work together seamlessly.

Jeff Hinson, Summit’s vice president of medical claims sums it up, “We’re committed to concepts that we believe best meet the needs of patients and employers. The reality is that while we can speculate on outcomes, at this time no one knows for sure where health care reform will take us, as an industry or a nation.”

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New Ancillary Providers on Board!

As of September 1, 2013, Heritage Summit HealthCare has contracted with three new national vendors for ancillary services. To find these and similar providers in your area, visit our website, www.summitholdings.com, and click on Provider Resources, then Find an Ancillary Provider.

- **myMatrixx**—home health and durable medical equipment. myMatrixx offers a national ancillary provider network for workers’ comp programs. The company is also known for its online and mobile tools to manage claim data more efficiently and create better communication between providers, patients and insurance company personnel.

- **MTI**—home health and durable medical equipment. MTI has been serving the workers’ comp industry for more than 20 years, and has experience with insurance carriers, third-party administrators and self-insured employers. The company focuses on delivering professional, reliable and cost-effective solutions for workers’ comp claims.

- **Speak Easy Translation and Transportation (SET)—transportation and translation services.** SET offers a broad range of transportation services, from local ground transportation for office visits to domestic and international air ambulatory services. The translation branch of the company includes interpreters and document translators skilled in more than 200 languages and dialects, all of whom are certified by the American Translators Association.

Liberty Mutual Insurance Enters Into Agreement to Sell Summit to American Financial Group, Inc.

On January 9, 2014, Liberty Mutual Insurance reached a definitive agreement to sell Summit Holding Southeast, Inc., and its related companies (together, “Summit”) to American Financial Group, Inc. (“AFG”) in an all-cash transaction. Following the transaction, Summit will continue to operate under the Summit brand as a member of AFG’s Great American Insurance Group. Heritage Summit HealthCare LLC will be included in the sale as one of the Summit companies. We do not anticipate any changes to provider contracts and plan for all operations to continue as usual. The transaction is subject to customary regulatory approvals.

Return-to-Work Success Starts with You

As more people enter the health care system, providers who are already busy may become overwhelmed with more new patients, limiting the availability of timely care for injured employees who are trying to get back to work. As the treating physician, you’re the return-to-work gatekeeper, and you can make all the difference.

Here are a few tips to help you expedite the return-to-work process for your patients.

- Focus on what patients can do, rather than what they can’t. Helping patients see their abilities, rather than their disabilities, is a skill worth cultivating. Passing that information on to an employer can set the tone for a speedy and more complete recovery.

- Provide the work release even if you’re not sure if there’s work available. Once we have your go-ahead, we will work with the employer to see that there’s a suitable transitional-duty position available for your patient that meets with his/her current physical abilities.

- Remind patients that any restrictions you give them apply at home as well as at work. Recovery setbacks are always frustrating for you and your patient, and inconsistent application of restrictions can be a prime culprit.

Not sure where to start? You can always email back2work@summitholdings.com to connect with one of our Back2work coordinators or call our nurse case managers.

Back2work®, Summit’s return-to-work program, offers resources to employers and physicians to help injured workers return to productive employment. To learn more, click on the Provider Resources section of our website, and then Back2Work.
The first doctor an employee sees at their workplace is often an occupational or environmental medicine (OEM) specialist—and this is often before an injury even occurs. That’s because the role of OEM continues to shift to comprise both injury management and prevention.

The American College of Occupational and Environmental Medicine describes it this way. “In the early days of occupational medicine, physicians specializing in the health of employees were primarily reactive to the injuries and exposures that occurred in the workplace. Now the role of the occupational physician has changed significantly. As disease prevention and wellness have become a greater part of the health care equation, occupational and environmental medicine has expanded its scope and presence accordingly.”

This expanding role demands a broad skill set from practitioners. Successful OEM physicians understand the complexities of their position, which includes much more than the medical components of injury prevention and treatment. OEM doctors also navigate the many layers of workplace health and safety, such as government regulations, labor union agreements, corporate management expectations and, of course, workers’ comp.

OEM and workers’ comp
Common sense dictates a clear relationship between OEM practitioners and workers’ comp professionals. Health, safety and return-to-work are the primary goals in both arenas. Most OEM practitioners also know the ins and outs of workers’ comp laws and procedures in their state, which can make them a great resource for physicians in other specialties.

When to refer
While some employers have a standing relationship with an OEM specialist, many smaller businesses do not. You may want to recommend the services of an OEM professional to a patient or his/her employer in certain situations. In fact, OSHA requires occupational health services for certain types of workplaces (visit www.osha.gov for a complete, current listing). To find an in-network OEM provider near you, visit our website and click on Find a Medical Provider. For more information and resources about this specialty, be sure to visit www.acoem.org/OEMLinks.

OEM and employee wellness
A growing area of intervention for OEM professionals is employee wellness. More and more companies are recognizing the value of wellness not only in improved health care costs, but in increased productivity as well. A qualified OEM provider is often a great resource to develop and implement corporate health initiatives.

Employers in your area may consider the following reasons to hire an OEM professional.

- Employers spend about $13,000 per employee each year on health-related costs.9
- Productivity losses related to personal and family health problems cost U.S. employers an annual $1,685 per employee or a total of $225.8 billion.10
- Obesity and its related chronic diseases cost U.S. employers up to $93 billion each year in health insurance claims. The cost of obesity, including medical expenditures and absenteeism, for a company with 1,000 employees is estimated to be $277,000 per year.10
- Health-related issues are exacerbated by an aging workforce. By 2018, nearly 24 percent of the total U.S. workforce will be age 55 or older compared to 18 percent in 2008.10 Note: Comorbidities, such as diabetes and heart disease, are common concerns for aging workers.

The good news: For every dollar spent on wellness, employers get a return on investment ranging from $2 to $5. This includes reduced absenteeism, medical costs and increased productivity.7
If you know of a provider who may be interested in joining our network, please give us a call or send an email to provider.leads@summitholdings.com.

If you have any questions or comments about the content of this newsletter, please send an email to heritagenews@summitholdings.com.

Who Is Summit?

With more than 35 years of experience, Summit is a leading provider of workers’ compensation insurance products and services to employers throughout the Southeast.

Summit includes Summit Consulting LLC and its subsidiary, Heritage Summit HealthCare LLC. Summit is also the managing general agent of Bridgefield Casualty Insurance Company, Bridgefield Employers Insurance Company, BusinessFirst Insurance Company, Retailers Casualty Insurance Company and RetailFirst Insurance Company.

For a full listing of the workers’ compensation payor customers who lease and have access to the Heritage Summit HealthCare LLC preferred provider network, visit the Provider Resources section of our website and click on State-specific payors.

How to Contact Us

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PO Box 2928
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24-hour injury reporting
1-800-762-7811

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References


2. 42 U.S.C.A. § 18031(g)(1)(D) (West 2013) (“(g) Rewarding quality through market-based incentives (1) Strategy described * * * (D) the implementation of wellness and health promotion activities.”).

   Niki Ingram is a shareholder and assistant director of the workers compensation department at Marshall Dennehey Warner Coleman & Goggin, a civil defense litigation firm.

   Sam J. Friedman is Research Team Leader at the Deloitte Center for Financial Services and is the former Editor in Chief of National Underwriter P&C.

5. Vasanth Sathiyakumar, BA; Daniel J. Stinner, MD; William T. Obremskey, MD, MPH; A. Alex Jahangir, MD; and Manish K. Sethi, MD, (authors are associated with the Vanderbilt Center for Health Policy.) The Future of Workers’ Compensation under PPACA: What the Massachusetts experience can teach us. (November 2012.) Available at http://www.aaos.org/news/aaosnow/nov12/advocacy2.asp.

   Interview of Tom Hebson, vice president, product development and government relations, at Safety National, the market leader in excess workers’ compensation based in St. Louis, Mo.


