A successful managed care program must address every stage of workers’ compensation claims, and the first stage includes early intervention strategies. Early intervention is the first look at an injured worker’s claim, designed to initiate a proactive and coordinated response at the earliest, most critical point.

In this initial stage, managed care professionals identify any clinical or non-clinical risk factors impacting the claim. Based on these findings, a plan is set for the appropriate level of care. This helps workers get the best care, return to work sooner and, ultimately, lower medical and indemnity costs.

**Triage Review Process**

Early intervention strategies should be built around a triage review process led by registered nurse case managers who have the expertise to serve as “triage nurses”. Through an established mechanism for reporting injuries immediately, these nurses may get involved as early as the day of injury to collect all necessary information.

Triage nurses work to understand all the crucial information impacting the claim, and keep the key stakeholders informed as to the right course of treatment with the right providers.

The nurses monitor an injured worker’s care and help identify any mitigating factors, or “red flags,” before they have a significant impact on the worker’s treatment, medical outcomes and claim costs. Red flags, some of which were discussed in the last *PMA Executive Briefing*, include:

- **Pre-existing medical conditions**, or comorbidities, such as diabetes, obesity, drug abuse and hypertension.
- **The worker’s age**, especially if they are age 55 and older.
- **Psychosocial factors**, such as language barriers, dependents or second jobs that can affect treatment strategies.

![Red Flags that Could Impact Treatment, Outcomes and Claims Costs](image-url)
This monitoring process helps determine whether expert and specialist interventions are necessary.

**Aligning With Clinical Guidelines**

*Early intervention helps align injured workers' treatment with clinical guidelines as quickly as possible.* Using treatment protocols, nurses will identify the appropriate level of care. Clinical guidelines provide direction to a defined treatment plan based on the body part injury or diagnosis. The guidelines provide instruction on appropriate ancillary services (e.g., physical therapy), and treatment environment (emergency and non-emergency) needed for appropriate care. Through this process, many employers can lower medical costs by increasing the likelihood that treatment will be appropriate from the onset.

The *triage review process* also directs care to network providers which includes physicians, pharmacies and physical therapists to facilitate medical treatment that is based on the clinical guidelines and return-to-work benchmarks.

**Referral to a network specialist** means treatment is provided at less costly negotiated rates by occupational health specialists who are focused on returning the injured worker to work. In addition, early nurse intervention enables other types of medical treatment and services to be directed into specialty networks that provide services at a greatly reduced cost. These include networks for diagnostic imaging tests, durable medical equipment and physical therapy treatments.

**Pharmacy management** begins at this early stage with early pharmacy intervention driven by formulary alerts at the point of sale. These alerts can identify early issues with narcotics and inappropriate physician dispensing. Pharmacy interventions also ensure that reviews are conducted for generic versus brand medications, mail-order, therapeutic alternatives, non-injury related medications and narcotic over-utilization opportunities. Pharmacy management begins in early intervention but continues through the life of the claim. Network service partners provide the resource opportunities to address interventions that are medically and clinically based.

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**Early Intervention: Case Study**

A worker strained his back and was diagnosed with a lumbar strain, grade 1, mild injury. This type of diagnosis can easily lead to many costly tests, such as an MRI, and treatments.

With early intervention, the nurse worked with physicians to immediately invoke an appropriate—and less costly—treatment plan that included a clinical examination, lumbar x-rays and physical therapy.

This intervention of the nurse enabled the injured worker to avoid very costly and addictive opioid-pain medications. Rather, anti-inflammatory medications were prescribed, which cost approximately $8 per month, versus over $200 for opioids.

The injured worker returned to work on modified duty.
Critical Elements in Early Intervention/Triage Process

- Project Return to Work
- Identify Risk Factors
- Collect Injured Worker Data
- Provide Direction to Defined Treatment Plan
- Intervene with Early Pharmacy Management
- Align Treatment with Clinical Guidelines
- Determine Compensability Status
- Establish Special Handling Guidelines
- Determine Expert and Specialist Interventions
- Refer to Networks
- Share Information with Key Stakeholders
- Identify Appropriate Level of Care

Ongoing Checks and Balances

Early intervention through a triage review process plays a critical role in establishing an immediate and ongoing series of checks and balances. As will be discussed in the next PMA Executive Briefing, these checks and balances continue with case management throughout the managed care process.

These checks and balances help ensure an injured worker’s care is continuing in an appropriate way, alert the managed care team when interventions and corrective actions are necessary, and are critical to achieving optimum claims outcomes.

PMA Companies series of Executive Briefings explores the strategies necessary to effectively manage medical costs of workers’ compensation claims today. These include integrated occupational health and wellness, early intervention, case management, bill review, pharmacy management, narcotics utilization and physician dispensing.

About the Author

John Santulli, Executive Vice President, PMA Companies, leads PMA’s customer-focused service functions all integrated under a single umbrella including Claims, Managed Care, and Risk Control Departments and third-party administrators PMA Management Corp. and PMA Management Corp. of New England. With over 30 years of workers’ compensation expertise, Mr. Santulli has held leadership positions in the field as well as key operational departments such as underwriting, distribution management, claims and services across PMA. A graduate of Gettysburg College, he has a Chartered Property Casualty Underwriting (CPCU) designation.