



5 Steps to Reduce Costs Associated With Health Care Worker Injuries

Injuries happen, but you don't need to be overwhelmed with the process or just accept all injury claims as a cost of doing business. As with any loss prevention process, the goal is to keep honest employees honest, to dissuade dishonest employees from attempting to defraud the company and to finally detect fraud so you can effectively defend your company from dishonest claims.

Here are five steps medical facilities can take right now to reduce costs associated with Health Care worker injuries:

1. Have a Safety Plan

Lowering Health Care worker injury costs starts with having a safety plan in place and enforcing that plan. When employees know there is a automated process in place for reporting injuries, they are less likely to “try and pull a fast one.” Knowing their co-workers (witnesses), Supervisor and department Director will all be validating and reviewing their incident will go a long way towards promoting honesty in the process.

Your company safety plan should include job descriptions, job duties and safety hazards. It should outline what steps to take in the event of an injury. This plan should be displayed in a common room in each department, as well as in company vehicles, and ideally should be signed-off on, annually to ensure compliance. In addition this policy should be enforced 100 percent of the time. You should work with your insurer or hire a professional insurance defense investigator to implement a safety-management program that can eliminate as many safety problems as possible.

A well-written safety plan can accomplish several things:

- Help employees know what they should and shouldn't do
- Protect the employer with a written policy
- Violations can be written off as misconduct and not be covered under workers' compensation

2. Provide and Promote a Safe Work Environment

One of the easiest ways to prevent fraudulent injury claims is to provide a safe and comfortable workplace. Assure your employees that safety - and their well-being - are top priorities. If an employee expresses concerns about unsafe working conditions, address them immediately. Your company workplace stands a better chance of remaining injury-free if your employees feel appreciated and know you care about good working conditions and - more importantly - their health.

A good way to promote a safe work environment is to track and display the number of days that elapse without an incident. This can be quite effective with high-incident departments that are prone to injuries such as patient lifting or needle sticks. Celebrate milestones by putting on a department pizza party or taking employees out to lunch. Giving an incentive to be safe may seem like an unnecessary expense, but it is less expensive than the cost of a workplace injury. It can also be very effective to dissuade employees from allowing co-workers to file fraudulent claims.

3. Communicate Zero Tolerance for Injury Fraud

Building strong teamwork among your employees about injury fraud, and making sure they understand it won't be tolerated, goes a long way toward preventing fraudulent claims. Communicate that your company has zero tolerance for injury fraud and that violators will be prosecuted to the full extent of the law. Be sure to publicize your workers' compensation policy to all new hires, and current employees, and provide them with updates at least once each year. But don't go overboard or take too harsh of an approach: if you treat all injury claims with suspicion, you run the risk of alienating the majority of your workers, who are honest.

4. Recognize “Red Flags”

According to the Coalition Against Insurance Fraud, the most common forms of workers' compensation fraud by workers are:

- **Remote injury.** Workers get injured away from work, but say they were hurt on the job so that their workers comp policy will cover the medical bills.
- **Inflating injuries.** A worker has a fairly minor job injury, but lies about the magnitude of the injury in order to collect more workers comp money and stay away from work longer.
- **Faking injuries.** Workers fabricate an injury that never took place, and claim it for workers compensation benefits.
- **Old injury.** A worker with an old injury that never quite healed claims it as a recent work injury in order to get medical care covered.
- **Lingering.** A worker stays home by pretending the disability is ongoing when it is actually healed.

Knowing the common warning signals of suspicious claims will help you identify workplace injury scams. For example, the most commonly faked injuries are ones to the muscles of the back and neck. Monday morning injuries are another common red flag. These are often an injury an employee sustained over the previous weekend and reported as work-related so it is covered by workers' compensation. Other common red flags include injuries with no witnesses, new employees reporting injuries and injuries reported by employees with poor attendance or a history of disciplinary action.

Even if a claim displays several “red flags” that does not prove fraud. However, if the claim

raises more than one of these, the Injury Prevention manager should consider bringing in a fraud investigator to delve deeper into the claim. The more fraudulent claims you identify and deny, the lower your overall cost will be for workers compensation insurance. You can obtain a list of fraud indicators from your workers comp insurer.

Another good way to combat fraud is through careful screening of all job applicants. Conduct background checks on all candidates prior to hiring. Carefully verify all references and background information. Be wary of criminal records and any individual with a history of injury claims. Being diligent early on in the hiring process ensures you have a more ethical workforce and can save you headaches down the road.

5. Have an Automated Injury Process in Place

All injuries should be handled according to a company notification policy. When an injury occurs, supervisors and your HR department should be notified immediately. Time is not on your side the sooner everyone is in the loop the more accurate your information will be. Other best practices and procedures include:

- Keeping detailed records
- Procuring eye witness accounts for accidents that result in medical care
- Taking pictures of the accident scene
- Documenting the use of safety equipment such as gloves, goggles, safety lift-equipment, etc.
- Reviewing the history of any employee who reports an injury, even if there's no evidence of wrongdoing.
- Obtaining written accounts of what did and did not happen

A critical step in some states is the timing of the notification of an injury. Some states allow employers and insurance carriers only a few days or weeks to make a determination of liability - in other words: to accept or deny the claim.

Even if you do not suspect fraud, it is important to keep the line of communication with an injured employee open. After all, you hired this person. They rely on you for their livelihood. Maintaining a solid employer/employee relationship is a psychological advantage you need to pursue. The exception to this is if the injured party has retained an attorney and you receive a letter of representation requesting that all communication be directed through the attorney's office. In that case, you are legally prevented from contacting them directly.

At this point, the employer should assess their safety plan, then assess the injury and look for red flags. If red flags are present, it is a judgment call on the part of the employer whether or not to attempt to mitigate the claim by having an investigation conducted.

The SHARPeTools eROI program is designed to automate the reporting and collecting of all the information that the Injury Prevention Manager needs to properly assess and process injury incident reports. Online tools automate collecting information from the Witnesses, Supervisors, Department Directors, the Security team and Employee Health in one place. Collecting this information electronically is far more cost and time-efficient than manual systems. Most importantly these tools will reduce fraud and will allow the management team to identify trends and pro-actively prevent future incidents. Source: <http://SHARPeTools.com>