

School:StakeholdersCourse:Medical Providers – A Key Stakeholder in Workers' CompensationFaculty:Dr. Maja Jurisic, Vice President, Medical Director Strategic Accounts,ConcentraConcentra

<u>Summary</u>

The course "Medical Providers – A Key Stakeholder in Workers' Compensation," taught by Dr. Maja Jurisic, discusses the critical role of medical providers in facilitating the return-to-work (RTW) process for injured workers. Dr. Jurisic, with over 30 years of experience in occupational medicine, emphasizes a holistic approach, recognizing that optimizing RTW requires collaboration among all stakeholders, including physicians, employers, claims handlers, and the injured workers themselves.

Dr. Jurisic outlines five stages that injured workers go through after an injury, highlighting the multifaceted nature of RTW. The first stage involves determining whether an injury or illness is work-related, requiring the clinician to evaluate the mechanism of injury and its causation. This task, while challenging, is vital in the workers' compensation process. The second stage focuses on diagnosis and treatment, where the importance of a thorough history, physical examination, and consistent findings are emphasized. Though diagnosis can be straightforward, complexities arise when dealing with occupational illnesses like cumulative trauma disorders.

The third stage involves determining the appropriate activity level and assessing whether the worker can return to work in some capacity. Dr. Jurisic stresses that early return to work is beneficial, but this requires clinicians to understand the nuances of RTW and to communicate effectively with employers to find suitable roles that match the worker's current abilities. In the fourth stage, the focus shifts to evaluating impairment and disability. Dr. Jurisic differentiates between the two, defining impairment as a loss or derangement of body function, which may or may not result in a disability affecting personal, social, or occupational capacity.

Dr. Jurisic also introduces the "Five Ds" of problem cases—dramatization, drug misuse, dysfunction, dependency, and a disability mindset. These indicators can signal cases at risk for delayed recovery, making early intervention crucial. She emphasizes the importance of understanding the psychological and social factors influencing recovery. Pain, for example, is not just a physical sensation but also involves neuroplasticity, meaning it can be influenced by emotions and thoughts. This underscores the need for a biopsychosocial approach to managing pain and guiding recovery.



Effective communication and negotiation are essential throughout the RTW process. Dr. Jurisic points out that miscommunication among stakeholders often leads to suboptimal outcomes. Physicians must educate patients on the benefits of returning to work, manage expectations, and address misconceptions. Dr. Jurisic shares strategies for successful negotiation, including setting the stage by informing patients about their treatment plan, uncovering hidden issues that may hinder recovery, and confirming the physician's role in guiding the injured worker.

The final stage involves settlement and resolution, where maximum medical improvement (MMI) is reached, and the physician may be asked to provide an impairment rating. Dr. Jurisic concludes that the role of the medical provider extends beyond clinical duties to include being a communicator, negotiator, and advocate. By fostering collaboration and education among all parties, medical providers can play a pivotal role in optimizing outcomes and ensuring a smooth transition back to work for injured workers.

Learning Objectives

- 1. Understand the role of medical providers in the workers' compensation system and their impact on return-to-work outcomes.
- 2. Learn the five stages that injured workers go through after an injury and how medical providers influence each stage.
- 3. Recognize the importance of communication and negotiation among all stakeholders involved in the workers' compensation process.
- 4. Identify signs of problem cases that may lead to delayed recovery and strategies for early intervention.
- 5. Explore the concept of pain from a neurological perspective and its implications for treatment and return-to-work strategies.

Primary Takeaways

- 1. Successful return to work requires a collaborative effort among all stakeholders, including medical providers, employers, and injured workers, to optimize outcomes.
- 2. Physicians play a key role in setting the tone for the injured worker's recovery journey, balancing between advocating for the worker's health and promoting functional recovery.
- 3. Understanding the stages of recovery helps medical providers tailor treatment plans that support a gradual return to normalcy.
- 4. Signs such as dramatization, drug misuse, dysfunction, dependency, and a disability mindset can indicate cases at risk for delayed recovery, highlighting the need for early intervention.



5. Pain is processed in the brain and can be influenced by thoughts, emotions, and perceptions. Medical providers need to focus on functional recovery rather than solely on pain levels to facilitate healing.

Course Outline

- 1) The Role of Medical Providers in Workers' Compensation
 - a) The Importance of Collaboration
 - i) The concept of "It takes a village" in return to work
 - ii) Coordination among physicians, employers, payers, and other stakeholders
 - b) Physician's Influence on Recovery
 - i) The role of medical providers in optimizing return-to-work outcomes
 - ii) Addressing misconceptions and building trust with injured workers
- 2) Stages of Injury and Recovery
 - a) Stage 1: Injury and Relationship to Workplace
 - i) Determining causation and work-relatedness
 - ii) Challenges in diagnosing occupational injuries and illnesses
 - b) Stage 2: Diagnosis and Treatment
 - i) Establishing an accurate diagnosis through history and examination
 - ii) Implementing treatment protocols and state-specific guidelines
 - c) Stage 3: Activity Level and Return to Work
 - i) Assessing appropriate activity restrictions and limitations
 - ii) Promoting early return to work and minimizing unnecessary disability
 - d) Stage 4: Impairment and Disability Assessment
 - i) Differentiating between impairment and disability
 - ii) Evaluating the impact on personal and occupational demands
 - e) Stage 5: Settlement and Resolution
 - i) Determining maximum medical improvement (MMI)
 - ii) Providing impairment ratings and facilitating claim resolution
- 3) Effective Communication and Negotiation
 - a) The Need for Education and Communication
 - i) Addressing the lack of common understanding among stakeholders
 - ii) Importance of consistent messaging to the injured worker
 - b) Strategies for Negotiation
 - i) Setting the stage and uncovering hidden issues
 - ii) Conferring intent, evaluating issues, and problem-solving collaboratively
- 4) Identifying and Addressing Problem Cases



- a) The Five Ds of Problematic Cases
 - i) Dramatization, drug misuse, dysfunction, dependency, and disability mindset
 - ii) Early intervention to prevent prolonged recovery and disability
- b) Neurological Perspective on Pain
 - i) Understanding neuroplasticity and its role in chronic pain
 - ii) Shifting focus from pain scales to functional outcomes
- 5) Return-to-Work Best Practices
 - a) Promoting Functional Recovery
 - i) Educating patients on the benefits of staying active
 - ii) Encouraging a focus on retained abilities and gradual return to function
 - b) Addressing Barriers to Return to Work
 - i) Providing support for transportation and workplace modifications
 - ii) Collaborating with employers and payers to create effective RTW plans
- 6) Conclusion: The Path to Optimal Outcomes
 - a) The Art and Science of Medicine in Workers' Compensation
 - i) Combining clinical expertise with empathy and communication
 - ii) Striving for collaborative partnerships for the benefit of all stakeholders

NOTE: Artificial Intelligence was used in the creation of this document.