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A Team Approach to Managing Absence Proper Claims Management Will Benefit All

Introduction

In recent years, all insurers have experienced an increase in the number of disability claims. This phenomena is especially prevalent whenever there is a downturn in the economy as we're experiencing now. The significant factors affecting disability expenses are:

- **Longer duration claims.** Insurers are finding it more difficult to return employees to work, often experiencing resistance from the employer, the employee and the physician.
- **A higher incidence of stress-related, mental illness and depression claims.**

Increasing rates is not the only solution

The insurance industry's solution to the increased number of claims is to increase premiums; however, this spiral cannot continue indefinitely.

A better solution is to prevent or shorten disability claims. The employee, the physician and the employer must all take an active interest in this process. For a start:

- **Employees** must seek earlier intervention in consultation with their physicians, and in seeking ways to maintain their involvement in the workplace (even if on a reduced basis).
- **Physicians** need to actively develop return-to-work or continued-work strategies rather than support continued absences.
- **Employers** need to be prepared to look at workplace accommodations, and to actively manage short-term absences.

It is vital that all parties **view disabilities** as a **temporary absence** from the workplace. Most important of all, though, is the employee's **active participation** in returning to work.

The solution lies with the employees

Many claims are preventable. It is important to develop a system that involves the employee, the physician, the employer, and possibly the insurer **before** an employee becomes completely disabled.

For claims that are not preventable, once the insurer has accepted a claim, all parties need to actively work together to see if the employee can return to work, or if retraining and rehabilitation is required. Preventing the claim, or returning the employee to productive work, means a cost saving to the insurer, retention of a valuable employee to the employer, and minimal loss of income to the employee. This is truly a win-win-win scenario.

The physician, the employer and the insurer must all support the employee. But the employee must look to all of these parties for help in returning to work, not for continued support for the absence. This may require a more aggressive—but compassionate—manner than those involved took in the past.

Here's what can be done

Most insurers will now consider a claim as early as the employer and employee want to submit it. Upon their review, they will assess opportunities for job modification, rehabilitation or retraining that will minimize or eliminate the claim. They will make their rehabilitation departments available, and provide consulting services—prior to the elimination period. In some cases, they may even consider the costs of job modification, and in some cases they may recommend another occupation. So, if you see a potential claim, don't wait: contact us to determine the best route to take.