

# Getting Patients Back to Functionality: How to Succeed in Treating The Most Difficult Workers' Compensation Cases

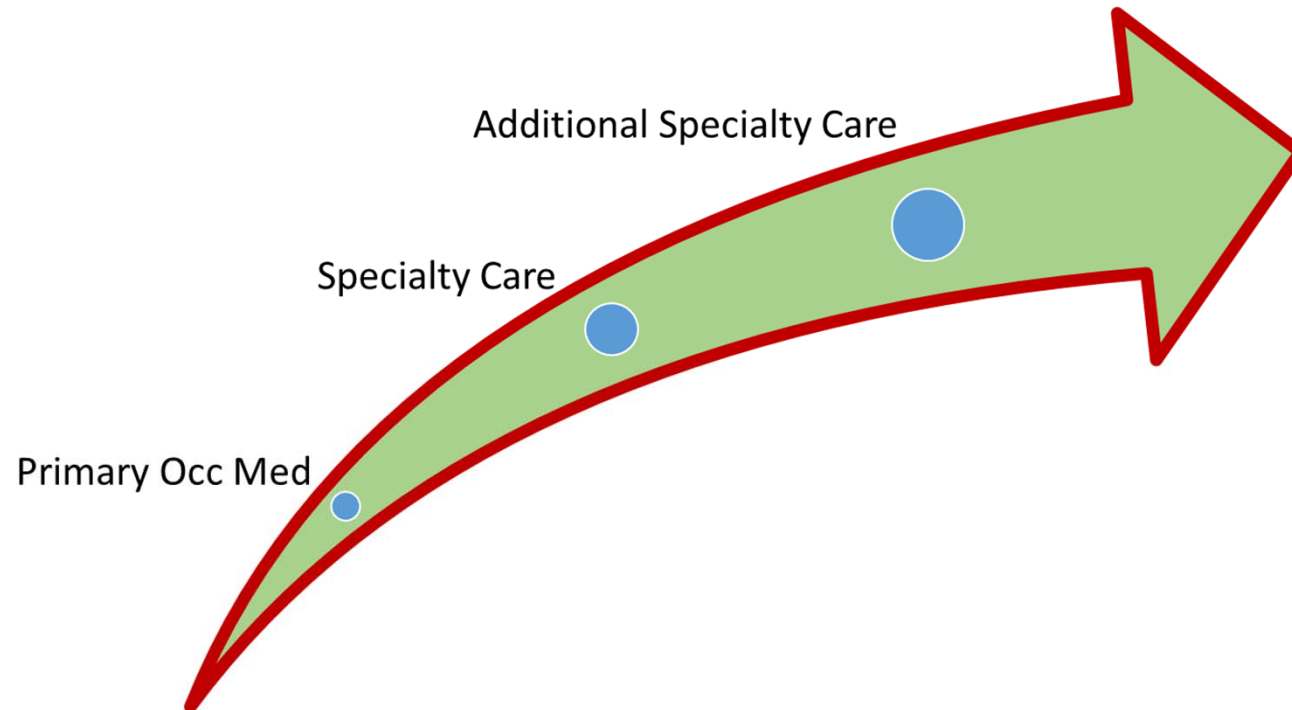
IWCF's National Occupational Disability  
and Risk Management Conference

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## ➤ Traditional Approach Concept

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# Unidirectional Approach



## ➤ Red Flags

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- Functional decline
- Disability out of proportion to impairment
- Includes
  - Distress, depression, anxiety
  - Excessive pain/disability behaviors
  - High pain ratings – opioids > 2 weeks
  - Fear-avoidance/maladaptive beliefs
  - Somatization
  - Job dissatisfaction – workplace issues and excessive off work

## ➤ Integrated Approach

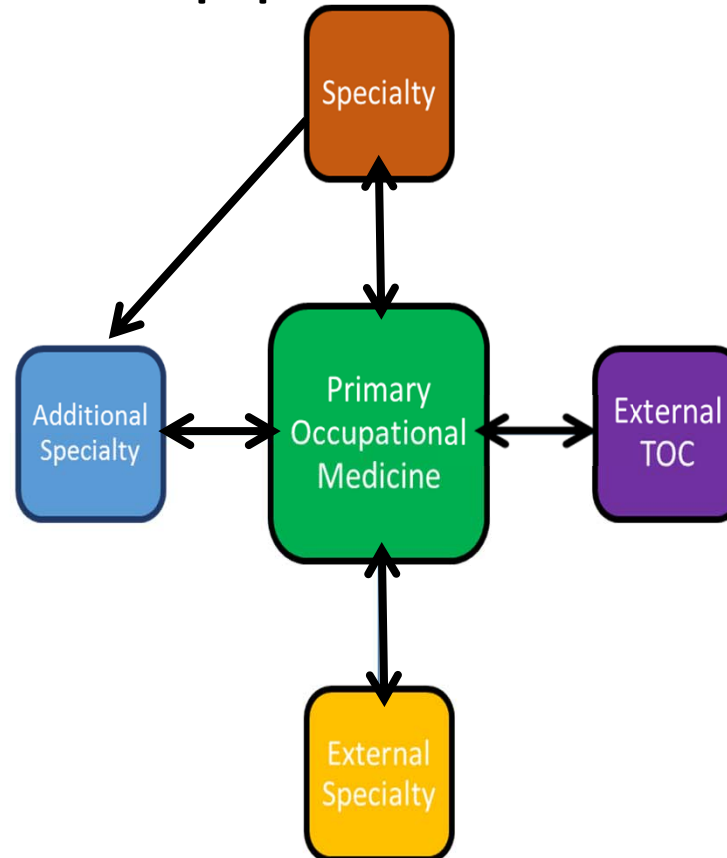
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- A *proactive* model for case management
- Case management as a continuum of care and not as a separate visit or as an intervention
- Requires expertise of our experienced occupational medicine clinicians (CMDs)

## ➤ Integrated Approach

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### Centralized Approach



## ➤ Selecting the Right Patient

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- Screen/Refer for Delayed Recovery
  - Utilize inter-disciplinary approach
  - ACOEM 2<sup>nd</sup> edition chronic pain chapter

## ➤ Selecting the Right Patient

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### Screening for Delayed Recovery

The Örebro Musculoskeletal Pain Questionnaire (ÖMPQ) is a screening tool which assesses the risk that a worker will develop long-term disability or fail to return to work following a musculoskeletal injury. It consists of 21 questions which address psycho-social factors (yellow flags), including beliefs and expectations that may influence recovery and return to work.

## ➤ Selecting the Right Patient

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### Screening for Delayed Recovery

- Done at 4 and 12 weeks following a musculoskeletal injury.
- Identifies possible risks factors and applies appropriate interventions to reduce the risk of long-term disability in injured workers.
- Evidence indicates that these factors can be changed if they are addressed early in the recovery process.



## ➤ Selecting the Right Patient

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Medical Treatment Utilization Schedule (MTUS)

Chronic Pain Medical Treatment Guidelines

8 C.C.R. § § 9792.20 - 9792.26

- “Functional restoration is an established treatment approach that aims to minimize the residual complaints and disability resulting from acute and/or chronic medical conditions. Functional restoration can be considered if there is a delay in return to work or a prolonged period of inactivity according to ACOEM Practice Guidelines, 2nd Edition, page 92. Functional restoration is the process by which the individual acquires the skills, knowledge and behavioral change necessary to avoid preventable complications and assume or re-assume primary responsibility ("locus of control") for his/her physical and emotional well-being post injury. The individual thereby maximizes functional independence and pursuit of vocational and avocational goals, as measured by functional improvement (see 8 CCR § 9792.20 (f)).”

## ➤ Selecting the Right Patient

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### ACOEEM 2nd Edition Guidelines

“Research has shown that multidisciplinary care is beneficial for most patients with chronic pain, and likely should be considered the treatment of choice for persons who are at risk for, or who have, chronic pain and disability.” (page 114)

## ➤ Selecting the Right Patient

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### Complexity

- Multiple diagnoses
- Co-morbidities
- Causation confusion
- Medical decision making difficulties
- Disability management difficulties
- Treatment plan changes
- Secondary Gain