

AF Group - Causation Investigations

Tom Yoss - Causation Manager



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ISU Investigations



The Investigative Services Unit (ISU)

Investigates employees outside of work activities, hobbies, 2nd jobs, etc. The goal is to assess activities and report fraud potential based on these activities.

The Causation Unit investigates employees specific work related tasks and activities in relation to the injury reported. Aids in compensability decisions.

Causation Investigations



What is a Causation Investigation?

A causation investigation is a review of an employees job tasks to assess and evaluate the potential for an accident or reported injury. Investigations may be ergonomic (repetitive upper/lower extremity injuries, environmental disease, large or traumatic injuries, RTW, or subrogation)

How is a causation investigation initiated?

The causation investigation is initiated by the UH Claim Representative through collaboration with the technical college designated contacts



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Causation Investigation Goals

- Provide an overview of the risk factors of a specific job to assist the claim professional in making an informed decision. This is fair to the employee, technical college, and insurer. UH tracks Loss Avoidance and No Loss Avoidance.
- UH is one of the very few insurance companies that provides dedicated causation analysis.
- The report/video is provided to an IME, Record Review or on-staff physician who will make a compensability determination based on their findings. The IME has a much better view of the job duties in comparison to the treating physician that most likely has never observed the employees job tasks performed.
- If the injury is determined to be compensable, there may be recommendations to reduce further incidents and exposure. We may also assist with RTW job duties to allow for early return to work.
- If the injury is not-work related, the causation evaluation improves our ability to defend the company position if the case proceeds to a hearing. This may also result in lower/reduced settlement costs at a hearing.

Types of Causation Investigation

- Upper Extremity/Repetitive Motion, lower extremity knee injuries
- Environmental Disease; noise, mold, dermatitis, inhalation
- Traumatic Injuries; unusual cases
- Subrogation Cases; injuries caused by equipment failures
- RTW Cases; assist with determining whether physician restricted work tasks meet the assigned work



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Investigative Tools

- HD Camcorders – Used for all ergonomic related investigations
- Noise Dosimeter – measures noise exposures
- Force Meters – measure weights and push/pull forces
- MCE Team – Causation ED Analytics
- Inhalation – Measuring air contaminants with direct reading instruments or using air flow pumps to assess individual exposure, Alnor air flow, review of past air monitoring, review of Safety Data Sheets (SDS, etc.)
- Mold Testing – Moisture Content Meter, Relative Humidity Meter, analyzing mold remediation work and mold testing completed
- AMA Guides to Disease and Injury Causation



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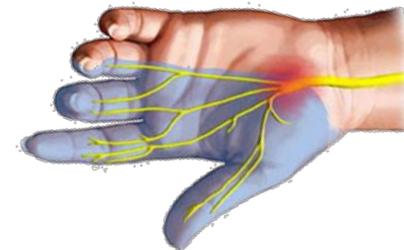
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American Medical Association (AMA) Guides to the Evaluation of Disease and Injury Causation

Carpal Tunnel Syndrome (CTS)

Occupational and Non-Occupational Exposures



Occupational Risk Factors - Median Nerve Entrapment at the Wrist (CTS)

- Indicates a very strong evidence for a combination of risk factors (e.g., force and repetition, force and posture) has consistently demonstrated that the highest rates of CTS occur in occupations with high upper extremity physical demands

Non-Occupational Risk Factors - Median Nerve Entrapment at the Wrist

- Includes “very strong evidence” in relation to age, BMI, gender, genetics, diabetes, and comorbidity (family history of other upper-limb musculoskeletal disorders)

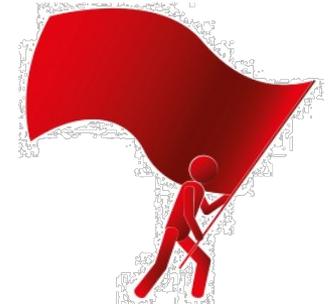


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Red Flags



- Injury occurs late Friday or early Monday morning
- Limited and/or vague details of the injury
- Injury is subjective in nature (back injury)
- Employee is a new or recent hire, or has a seasonal job about to end
- No witness or witness statements conflict with the employee's statements
- Employee is disgruntled (discipline, action plan, terminated, etc.)
- The accident is reported late
- Accident occurs in an area not normally occupied by the claimant and/or performing a job function not normally required (back injury – office)
- Conflicting 1st report of injury, accident investigation or recorded statements
- Fellow workers stating the injury is not legitimate
- Injuries reported by retired or soon-to-be retired individuals
- Employee relocates often and/or has a history of short term employment
- Employee is involved in outside contact sports, hobbies, 2nd jobs, etc.



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Medical & Other Red Flags



- Employee is difficult to contact, does not answer the phone, or has their spouse speak on their behalf
- Excessive time off work for an injury that doesn't appear to warrant it
- Missed medical appointments
- Material misrepresentation of the employment application
- Employee has financial difficulty
- Employee does not have personal insurance coverage or has declined coverage from their employer
- Recent insurance carrier change
- Employee is employed at another company, self employed, etc.
- Employee has family members receiving WC benefits, unemployment, etc.



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Ergonomic Evaluations

- Medical/Work History
- Detailed Job Steps
- Applicable AMA Guidelines
- Risk Factors
 - Frequency (of tasks performed during the shift)
 - Posture (flexion/extension, radial/ulnar)
 - Force (pinch/full hand grasp, weights, extended reaching)
 - Static duration (forceful grasping in excess of 10 seconds)
 - Other risk factors (contact/impact stress, cold temps, vibration, etc.)
- Attachments/Distribution/References



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Injury – Bilateral CTS

- The employee teaches 5-8 online health related courses
- Class size is 1-37 students/class with an average of 10-15/class
- The instructor is home based and is compensated for 35 hrs/wk
- 70% is computer work, 30% meetings with students
- 50% of the computer work is mouse & 50% is keying (1-2 hands)
 - Reading emails from students, and other school individuals
 - Internet research of related informational literature
 - Phone calls (with students) about 30-45 minutes/day
 - Processing student papers for approximately 2-3 hours/day (reading reports/assignments, grading and corrections)

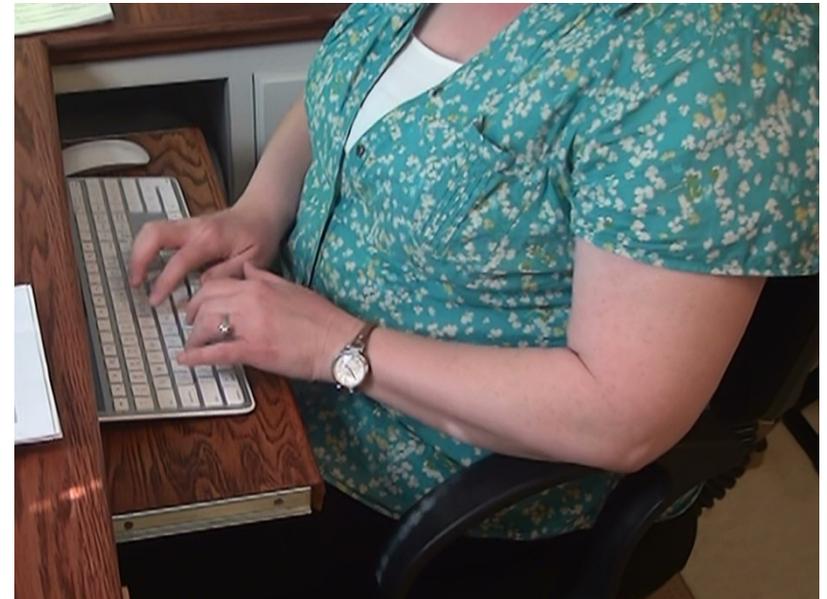


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Injury – Bilateral CTS

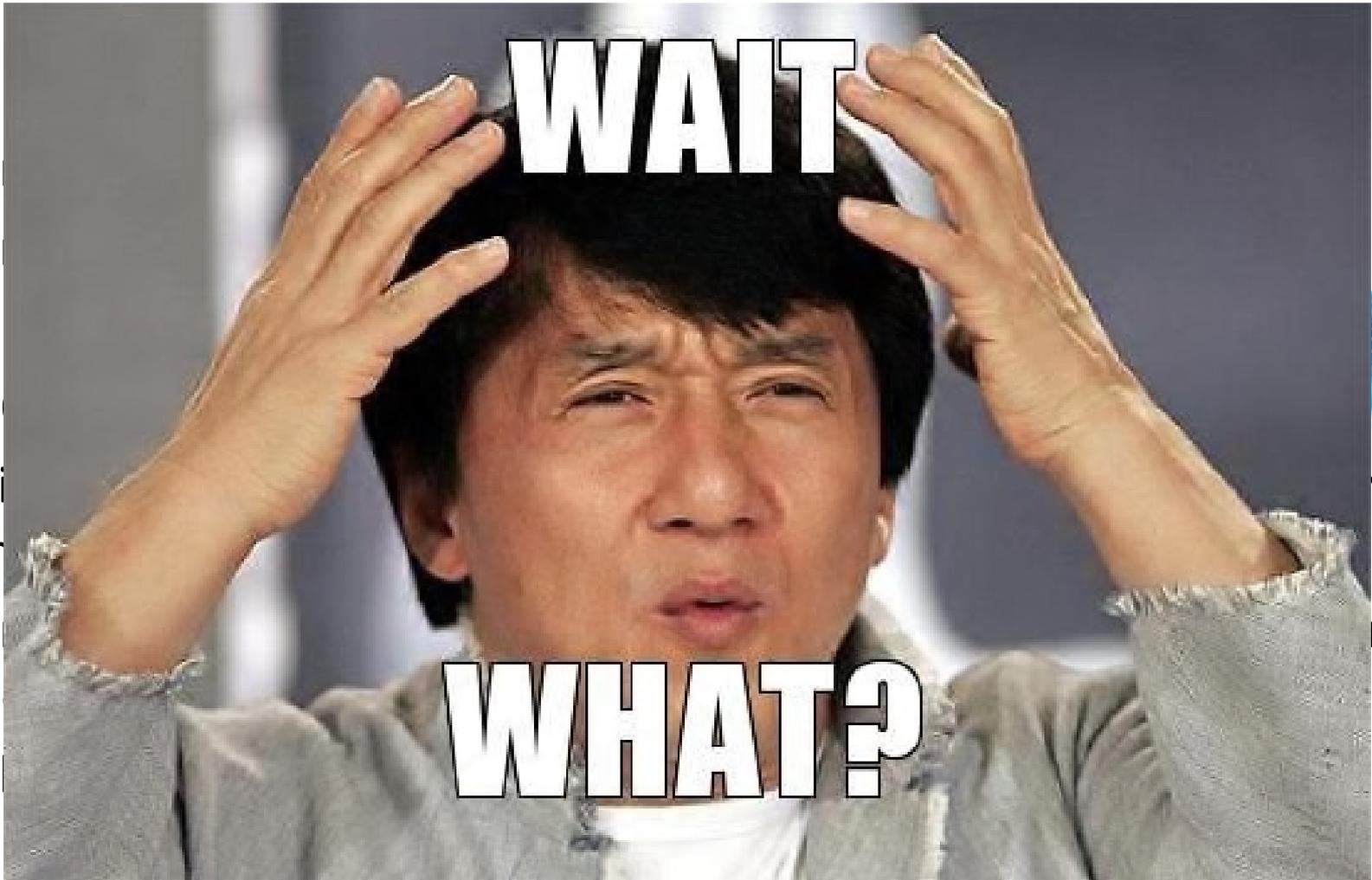


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Traumatic Injury – Back



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Environmental Disease – Subrogation

- Employee is an Assistant Lab Tech with 3 years experience
- Employee had been exposed to mold while cleaning the intravenous mannequin arms in the laboratory
- Resulting upper respiratory cough with cold like symptoms
- Mold testing was performed on a sampling of the injection arms
- Nasco Care and Maintenance states *“the injection arm should be completely drained of fluid and dry before storing”*
- The veins in the injection arms are supposed to be “self sealing”
- Nasco sent a company-wide email informing employees not to receive the injection arm mannequins (that have mold) from customers as they may be a health hazard to their employees



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Environmental Disease – Subrogation



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Traumatic Injury – Shoulder

- Masonry instructor for 21 years (1 class/semester and 1 day/week (7:00 - 3:30))
- Carrying 40-45 pound blocks to build a mock wall
- Doing the activity for about 20-30 minutes when he felt his shoulder pop (students finished the wall)
- 50% classroom and 50% hands-on demonstrations



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Traumatic Injury – Shoulder



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**Tom Yoss – Causation Manager
Investigative Services Unit (ISU)
Corporate Claims
Phone: (262) 787-7856**



thank you!



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