

A black and white photograph of a man with a beard and short hair, wearing a white button-down shirt. He is smiling broadly while looking at a smartphone held in his hands. The background is softly blurred, showing what appears to be an indoor setting with some hanging lights.

icareTM

Workers Insurance

Employer Forum

March 2018

Laura Ulrick

Senior Account Manager

Agenda

- Welcome
- Peter Meighan - Update on underwriting and MPPG
- Zoe Wang - Update on the claims model
- Rob Dickson - EML Business update
- Sally Kelleher - Capacity for employment
- Dr Victoria Oey - NTD engagement
- Rachel Timmermann - Medical Support Panel
- Morning tea - 11.30am





Injury Prevention & Pricing Update

Peter Meighan – Operations Manager
Injury Prevention and Pricing

IP&P – Underwriting Update

- ✓ Over 290,000 policies processed (including new business and renewals)
- ✓ 30 June and 1 July policies completed – delay was due to data migration – once off transition
- ✓ Focus on August – December renewals – more data required from GIO to complete – once off transition
- ✓ 16/17 hindsight adjustments commenced processing with taskforce in place – was migration constrained
 - ✓ Scheme Performance Adjustment (SPA) will be applied to customers with a CPR of less than 100%
 - ✓ No 15 month adjustment will be required for LPR
 - ✓ 16/17 SPA is Lower than 15/16 SPA due to lower investment market
- ❖ Phase 2 of Broker portal under development
 - ❖ Focus on key requirements for 30 June renewals and build with you from there

IP&P – Market Practice & Premiums Guidelines Update

- ✓ Draft Market Practice & Premium Guidelines (MPPG) last year released for comment
 - ✓ icare responded in writing pointing out key considerations around experience rated employers and the premium capping impact to the good performing employers
- ✗ MPPG's released late last month
 - ❖ Result of premium capping will result in a shortfall that will need to be recovered from good performers
 - ✓ We are looking to move to automatically renewing experience rated employers on their renewal date, as we do currently for small employers
 - ✓ We have been working for 12 months on a number of premium model improvements to improve customer experience

IP&P – General Update

We hear you asking for premium forecasting

- ❖ We have some limitation imposed on us by limitations on claims reporting – once off transition
- ❖ We know that many of you do your own and we don't want to get in the way of those
- ❖ We are nearly in the position to offer you a forecast tool
- ❖ We will continue to provide forecasts direct to customers and cc you when you request
- ❖ Our vision is that this capability will be part of the portal

Re-launched icare Aware awards

- ✓ Accepting nominations via our website
- ✓ Social media postings to build awareness
- ✓ Aware winners will be entrants into the annual CASE awards

We have commenced a more pro-active injury prevention engagement

- ✓ Jennifer Cameron leading Team
- ✓ Now have 3 Injury Prevention & Intervention Specialists
- ✓ We will engage you if we identify your clients as a prospective participant
- ✓ More to come in this space



Claims Model Update

Zoe Wang – Manager Service Delivery
Return to Work and Support

The lodgement portal



 Contact Us [137 722](tel:137722)

Notify us of an injury

Let's get started. To notify us of an injury, please tell us a bit about yourself first.



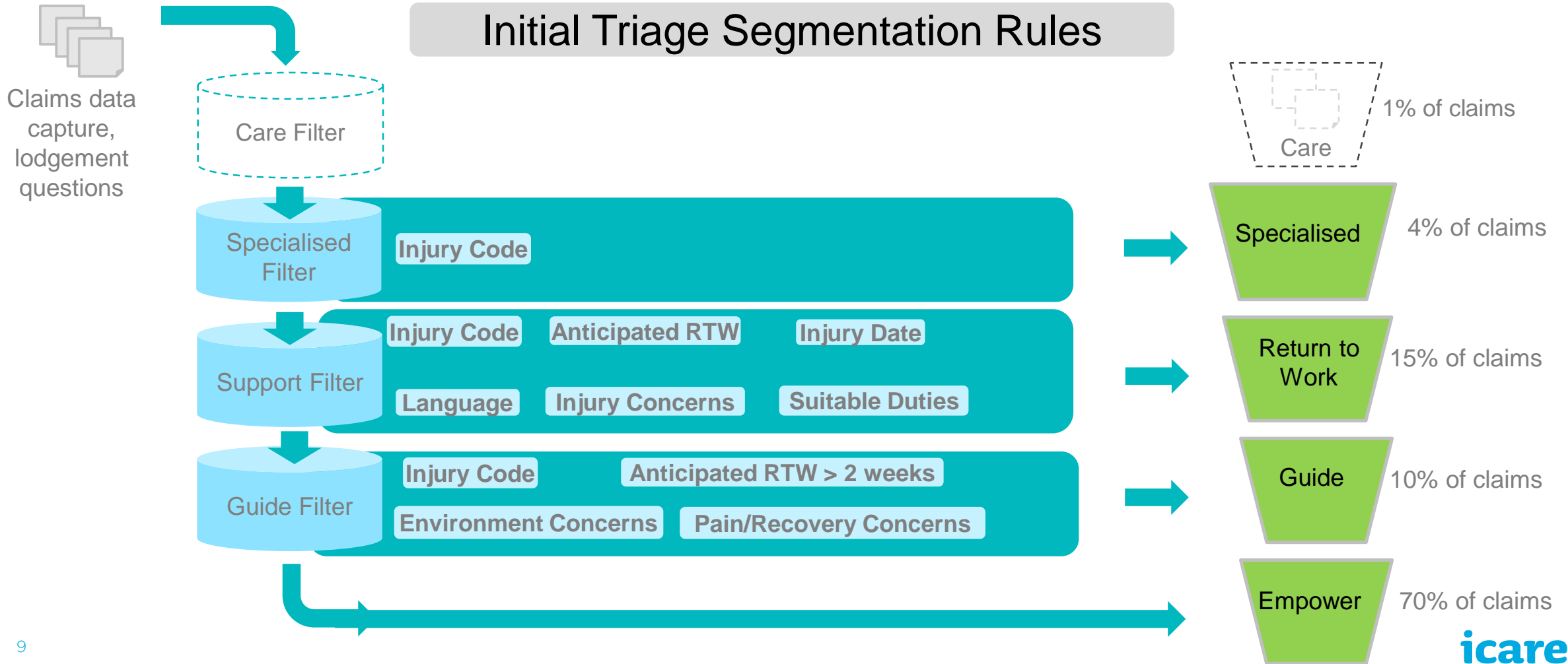
Who is notifying us of the injury? *

Employer

Injured person

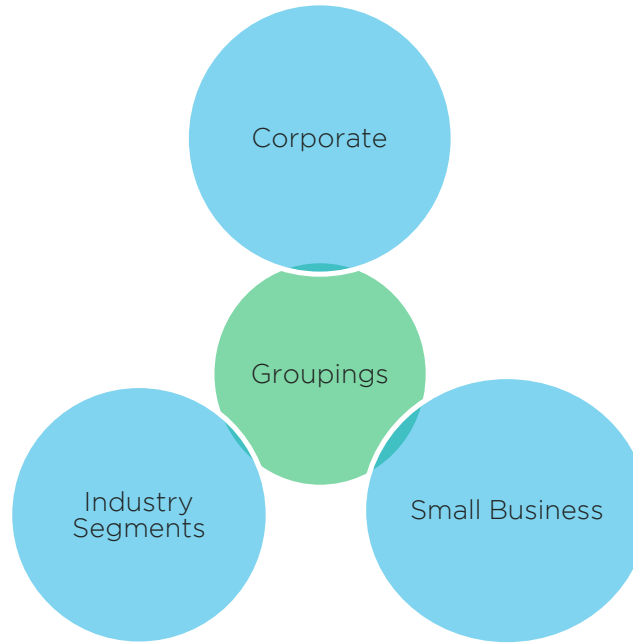
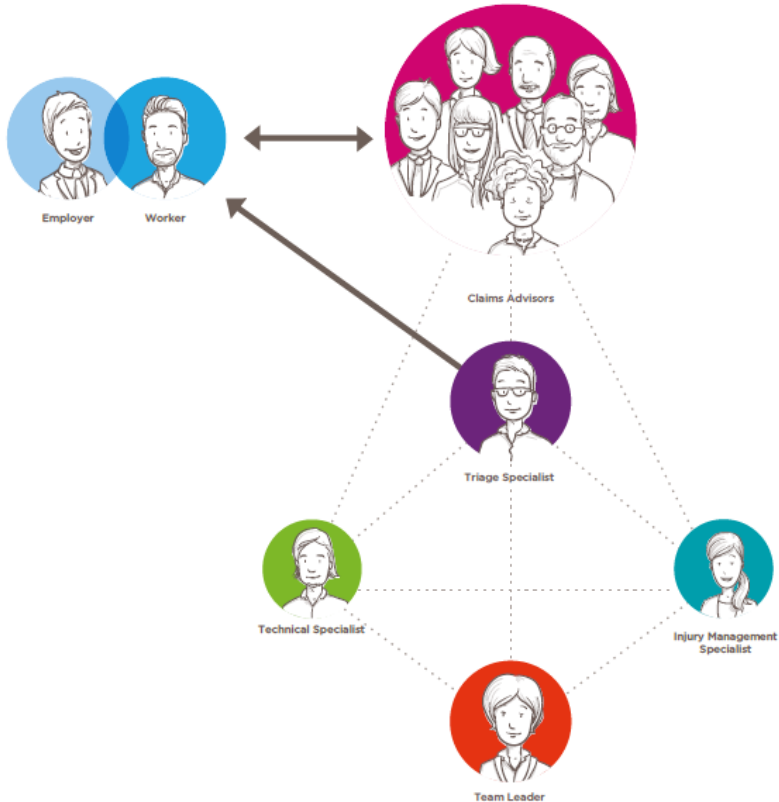
Third party
representative

The business rules segmentation model



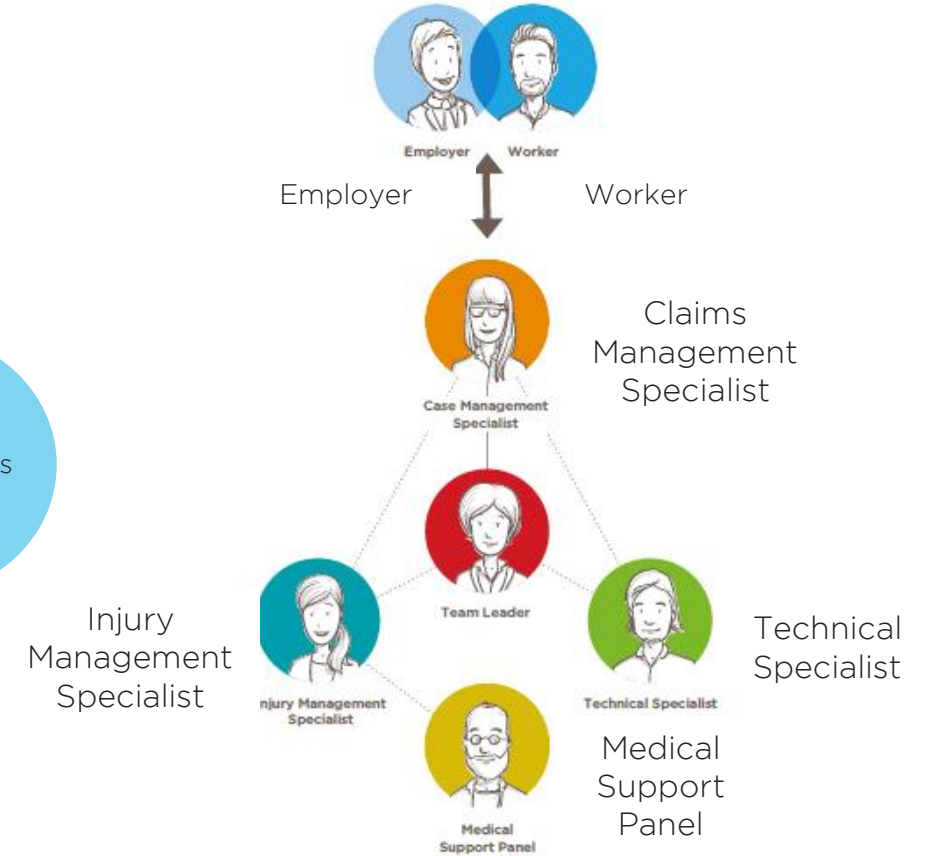
Who's who in the new model

Support Centre



Teams aligned to business size and industry sectors

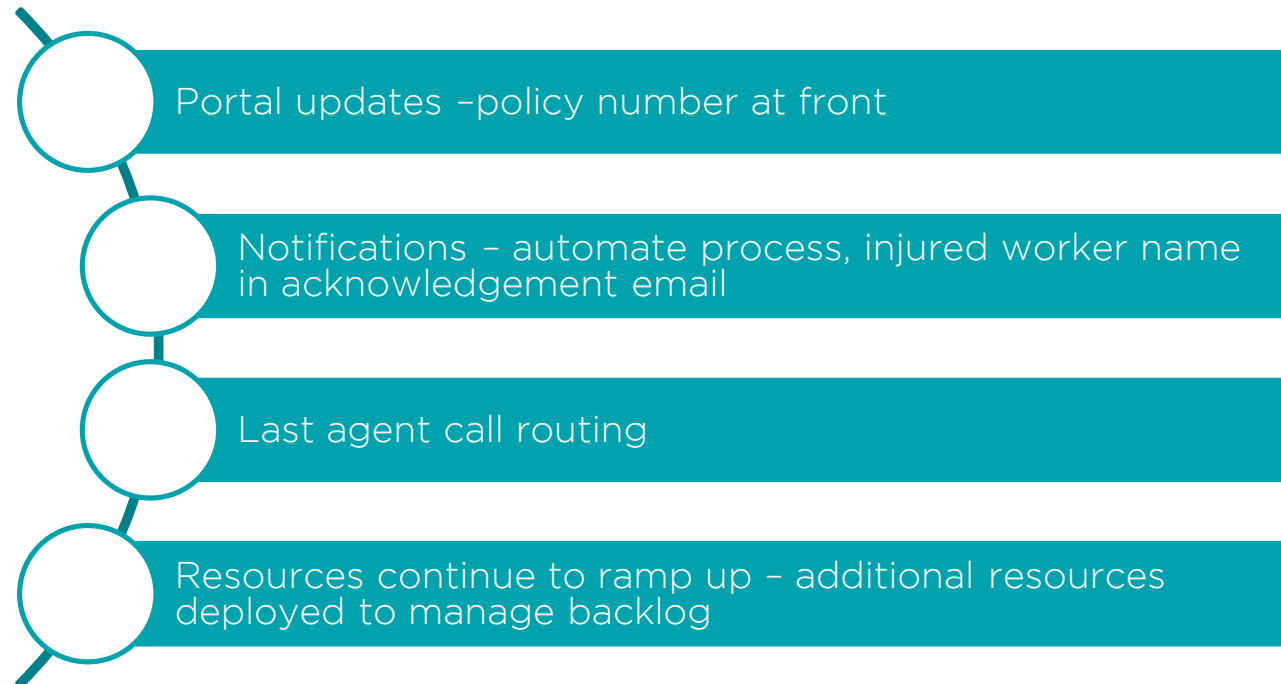
RTW/Support and Specialised



Service levels and stabilisation

- Around 9,000 claims lodged
- An additional 3,500 'injury only' notifications
- 35,000 inbound calls handled
- 26,000 outbound calls made, including approximately 14,000 HUG calls made

- ✓ Triage engine
- ✓ Portal performance
- ✗ Call waiting times and returning calls
- ✗ Backlog of tasks to be completed
- ✓ Injured worker feedback
- ✓ Employer feedback



Focus for this year



Client
Service
Managers for
one point of
contact for
claims

Combined
claims
reporting

Industry level
benchmarking
and reporting



Client service model

- ❑ Single point claims management contact
- ❑ Conduct claims reviews and support claims reporting
- ❑ Day to day touch point for employers
- ❑ Partner and advisor on claims impacts and claims management strategies
- ❑ Maximising the access to wider EML data, insights and reports



- ❑ Escalation point for the EML service manager
- ❑ Facilitate claims reviews across Scheme Agents
- ❑ Support underwriting queries eg: premium, invoicing and late payments
- ❑ Maximise access to wider icare data/insights, including benchmark reporting and yearly strategic reviews
- ❑ Represent the customer and support access to wider icare functions

- ❑ Lead the renewal process
- ❑ Support relationship manager with the performance and strategic review process
- ❑ Monitor performance and develop prevention strategies
- ❑ Resolve technical issues

Consolidated reporting

Claims Data
Existing Claims



Allianz 



Claims Data
New Claims



Consolidated
Reporting Suite

Collate and
distribute from
existing sources

Cost of
Claims
reporting

No need for employers/brokers
to gather information from
multiple sources

Co-design with employers for future needs

Q1 reporting available
in April

Industry data insights tool

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Treatment & care Employers Builders & homeowners Government agencies About us

Your insurance obligations

- Brokers & Industry
- Take out a policy
- Manage your policy
- Make a claim
- Caring for your people

The location of businesses we cover
Business Location by Region (Coloured by Number of Businesses)

Businesses we cover: 300,000 (100% of scheme)

Workers we cover: 3,700,000 (100% of scheme)

Claims Lodged: 61,000 (100% of scheme)

Number of Claims Per \$1m Wages: 0.35 (0.35 Scheme - Frequency of Claims)

Average Days Off Work: 41 (41 Scheme - Average)

The businesses we cover by industry
Industry Category by Percentage of Premium and Wages (Coloured by Share of Businesses)

Industry	% Premium	% Wages
Construction	~22%	~10%
Property And Business Services	~8%	~25%
Retail Trade	~10%	~10%
Transport And Storage	~10%	~5%
Finance And Insurance	~5%	~10%
Agriculture...	~5%	~5%

The businesses we cover by business size

Business Size	% Coverage
Small Businesses	94.3%
Medium-Large Businesses	5.5%
Large (CPR) Businesses	0.2%

What Type of Injuries

Injury Type	% Claims
Traumatic Joint/L...	43%
Wounds Lacerati...	23%
Musculoskeletal ...	7%
Other Injuries	7%
Fractures	7%
Others	12%

Where Did Injuries Occur

Location	% Claims
Upper Limbs	36%
Lower Limbs	28%
Trunk	19%
Head	11%
Others	14%

A sneak peek into what's coming throughout 2018...



Fully
integrated
solution

Enhanced
portal

Track the
progress of
individual
claims

Dynamic
triage

Automatic
approval of
treatment
requests

RTW Plans
online





EML Business Update

Rob Dickson – State Relationship Manager

EML

EML Operational Update

Support Centre

69% of all claims or 11,457

Above 85% of calls now directly answered
Average wait time is now 60 seconds

Close to 100 staff segmented by industry then Corporate and SME

Support Return to Work

26.35% of all claims or 4,372

Case Managers portfolio of claims is still “maturing”

Clear aim to get to know you and your business

Specialised

4.62% of all claims or 766

New experienced case managers on boarded in the past few weeks

High touch and sensitive claims



Improving Work Capacity

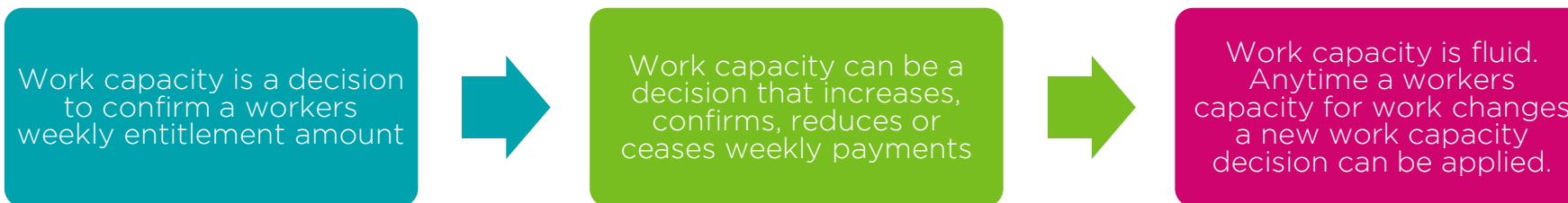
Sally Kelleher – Capacity for Employment Leader

Return to Work and Support

What is work capacity

Learning from past experience to better understand the appropriate and intended application of work capacity

Since the introduction of work capacity into the scheme in 2012 we now have a better understanding as to the intended application and interpretation of work capacity. The last 6 years of working have provided a body of evidence around the correct application and interpretation of the legislation from Merit Review, SIRA, WIRO and working closely with our scheme agents and external stakeholders.



With this understanding and the roll out of work capacity training and support material to the scheme icare aim to achieve a new way of working with improved results.



Our approach to work capacity is changing

We are adopting a new way of thinking to better align ourselves to improve customer experiences while applying the legislation as it was intended

Case Management

Work capacity is the by product of good case management

The focus of case management will remain on sustainable RTW

Information used to support work capacity is gathered through the life of the claim, not sought for the purpose of a decision

Consistent process for claims between 78-130 weeks with an increased application of S38

Suitable Employment

Suitable employment is determined by a case manager not a rehabilitation provider

Vocational assessments are always for the purpose of RTW

Suitable employment options need to be realistic and consider the worker holistically

SIRA recover at work programs and vocational programs are encouraged

Liability v Work Capacity

A work capacity decision is not a tool to dispute liability or cease weekly payments

Work capacity decisions and decisions to deny liability for compensation under the legislation are two different types of decisions and each have different requirements

❑ Liability Decisions

A decision to **deny** an employer's liability for a type of compensation being claimed i.e. weekly payments, medical expenses, lump sum compensation and property damage etc

❑ Work Capacity Decisions

Limited to the types of decisions listed under Section 43(1) and may affect the amount a worker is entitled to receive
An employer is still liable to pay compensation either for full or partial weekly payments and for medical/rehabilitation
If a worker's current work capacity changes a new decision may be required and therefore weekly payments may be reinstated or change

Timely Decision Making

It is important that a work capacity decision is made at the right time on the right claim

When you should make a work capacity decision

When you want to confirm a current weekly payment amount or need to determine what a worker should be paid

When a worker is working and begins submitting payslips and you need to know what to pay them

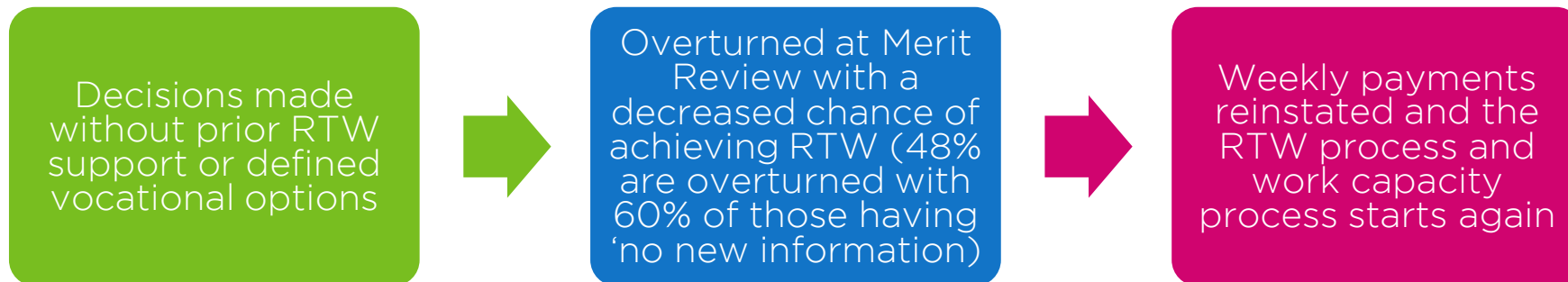
When a worker has exhausted their return to work rehabilitation and suitable employment has been identified

When are decisions not appropriate

Making a decision early purely to avoid the notice period

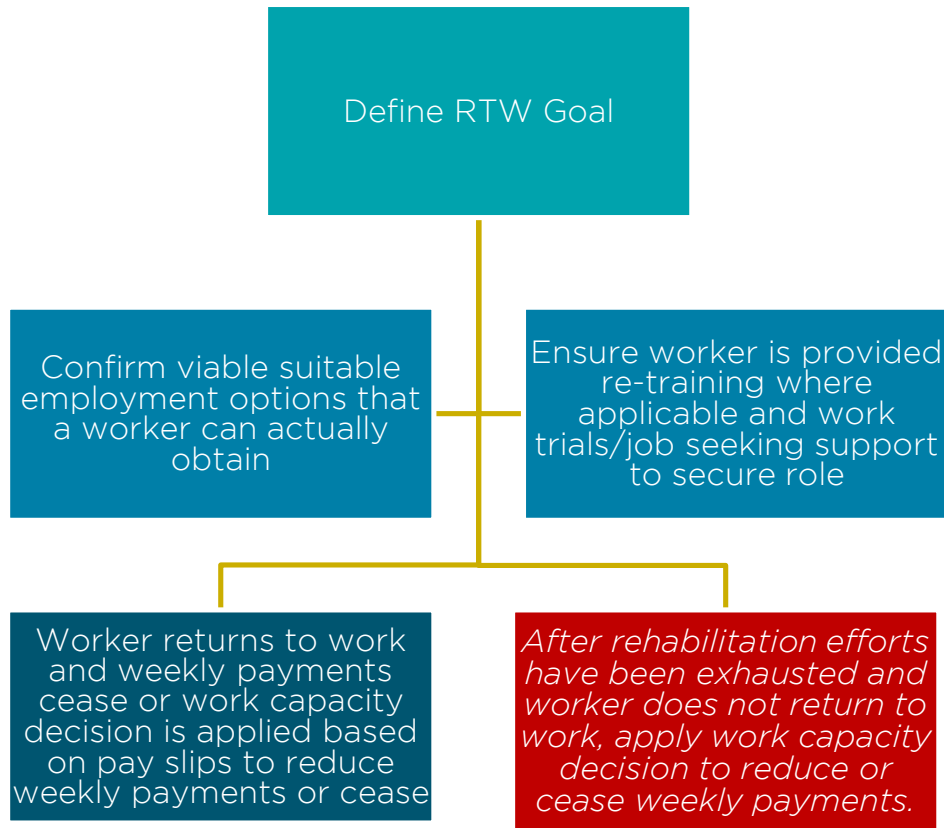
Making a decision because a liability dispute was not issued or was not successful or there is not enough information to dispute liability

Making a decision when a worker has not had adequate time to seek alternate employment or been provided adequate support specific to their needs



Focus on RTW and prior support

Work capacity is an outcome of the RTW process with the focus on sustainable return to work



- ❑ Work capacity decisions will be made to confirm a workers current situation i.e.: no current work capacity. This is to educate workers in the process and familiarise them with the terminology. This assists in eliminating surprises when an adverse decision is made.
- ❑ Case managers will now include the doctor at the fair notice stage. This is to ensure that any barriers are addressed early and reduce the likelihood of a worker downgrading when a decision is issued

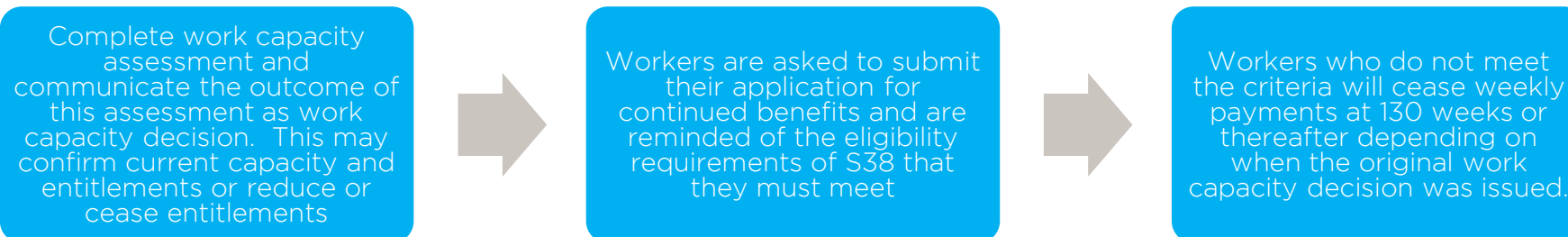
A consistent process for applying S38 Decision Making

Through the work capacity training icare have rolled out a consistent process for managing claims between 78-130 weeks and correctly applying S38

The requirements of S38 and who is eligible?

High Needs Workers	Workers WPI Less Than 21%
Must submit application for continued benefits form	Must submit application for continued benefits
	Must be working more than 15 hours per week and earning more then \$155 (indexed)
	Must be incapable of increasing capacity for work

The correct application of S38 will ensure that every worker in the scheme has a work capacity decision made prior to 130 weeks and that only those workers eligible to continue payments will receive compensation after 130 weeks





NTD Engagement

Dr Victoria Oey – Senior Medical Officer
Chief Medical Office

Healthcare Practitioner Engagement

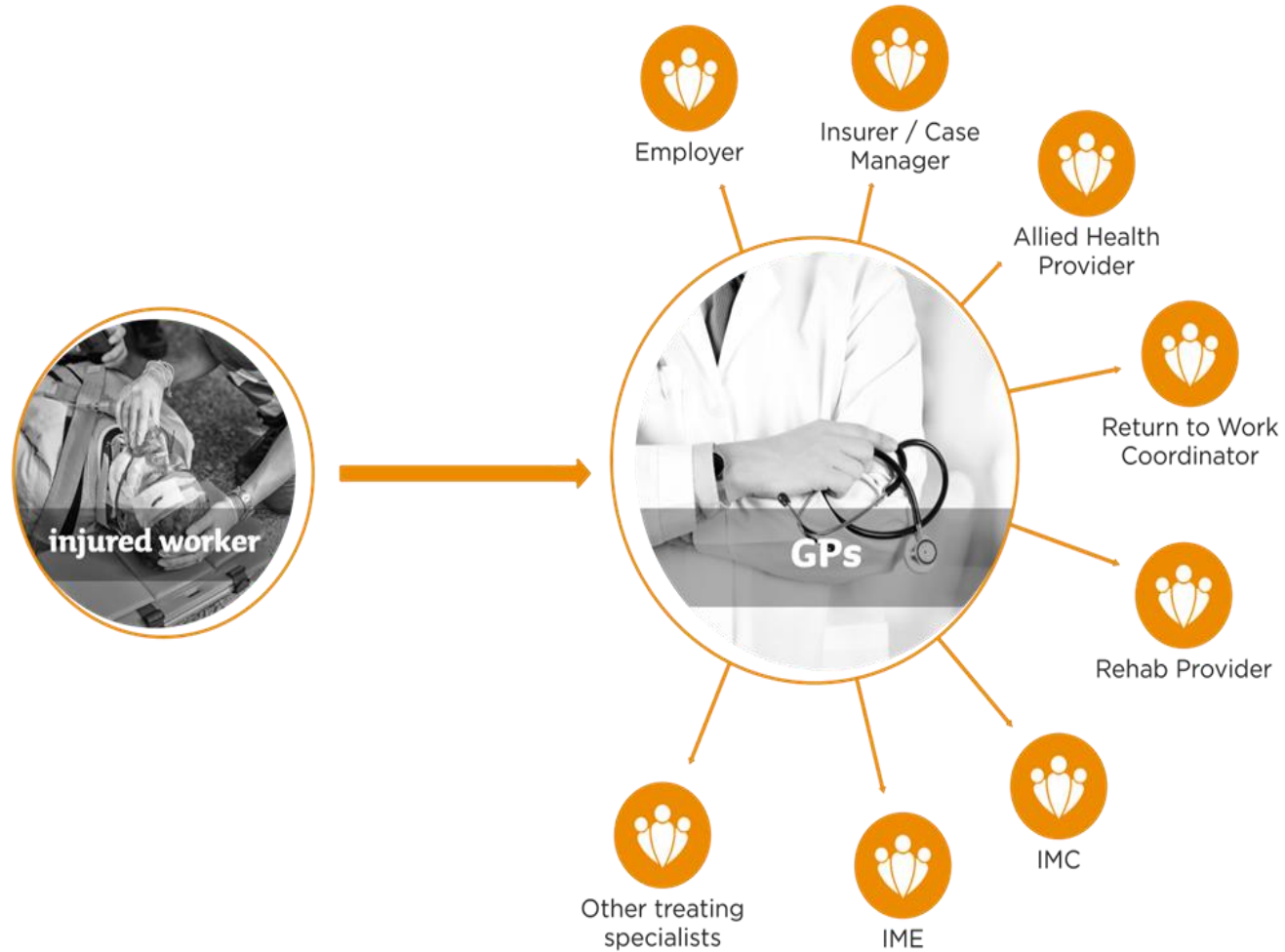
What we want to see

A system where workers are able to return and recover at work which is attributed to good communication by all parties to ensure this happens in a quickly and effectively

Workers compensation vs non workers compensation outcomes

“Compensated patients (workers) have more than three times the odds of an unsatisfactory outcome than uncompensated patients”

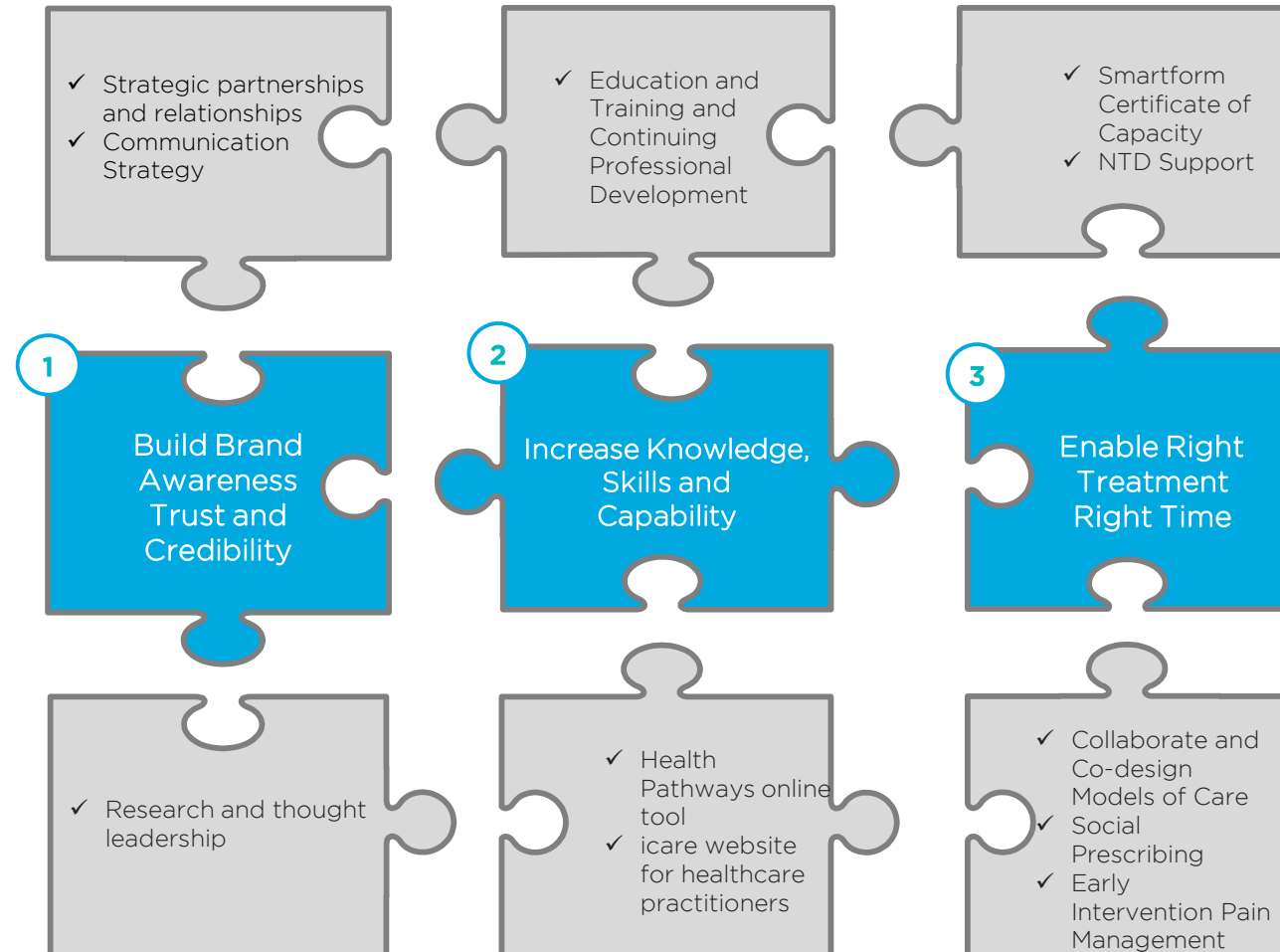
GP/NTD journey



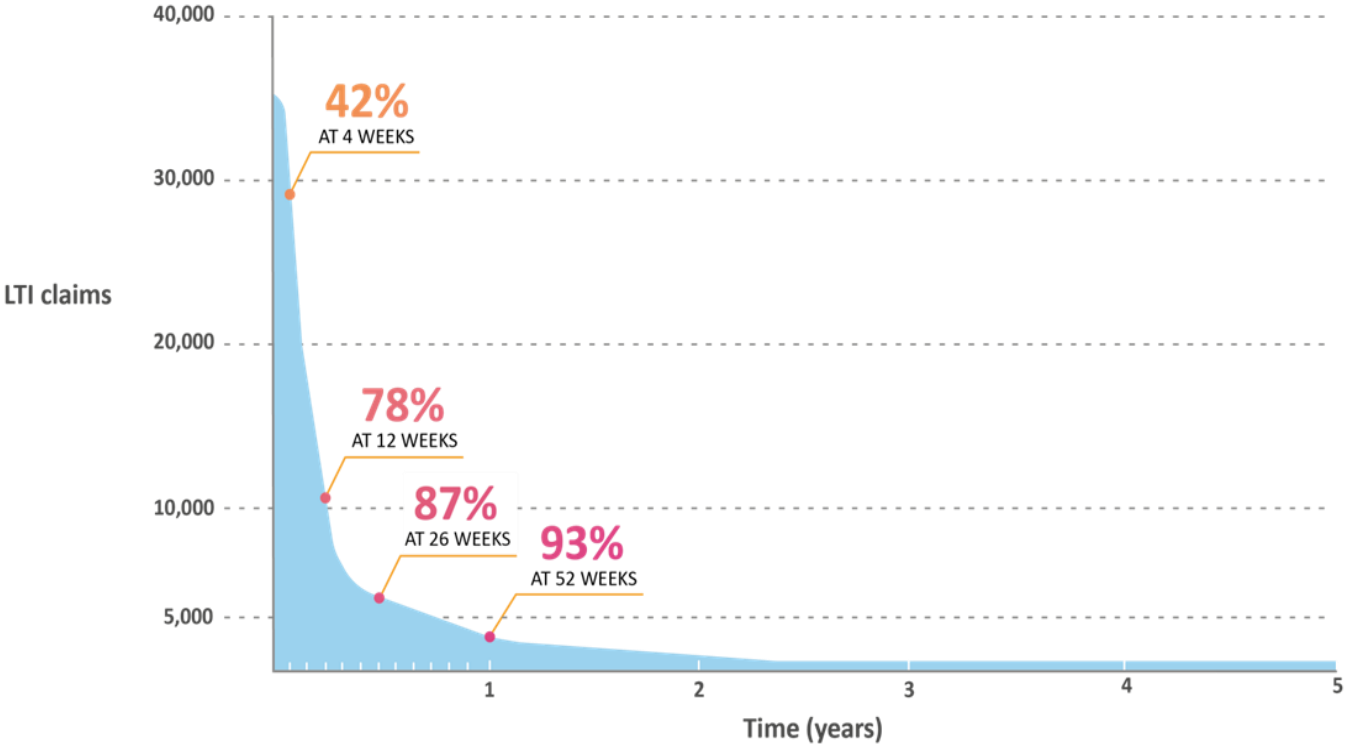
We've been talking to GPs



Healthcare Practitioner engagement strategy



The Return to Work curve



LTI: Loss Time Injury

Healthcare Practitioner Engagement

What we want to see

A system where workers are able to return and recover at work which is attributed to good communication by all parties to ensure this happens in a quickly and effectively

"...long term worklessness is one of the greatest risks to health in our society. It is more dangerous than the most dangerous jobs in the construction industry, or the North Sea, and too often we not only fail to protect our patients from long term worklessness, we sometimes actually push them into it, inadvertently..." ^[1]

Professor Gordon Waddell, CBE DSc MD FRCS, summarizing from the evidence review *"Is work good for your health and well being?"* ^[2]



Medical Support Panel

Rachel Timmermann – Medical Support Panel Manager
Chief Medical Office

Medical Support Panel

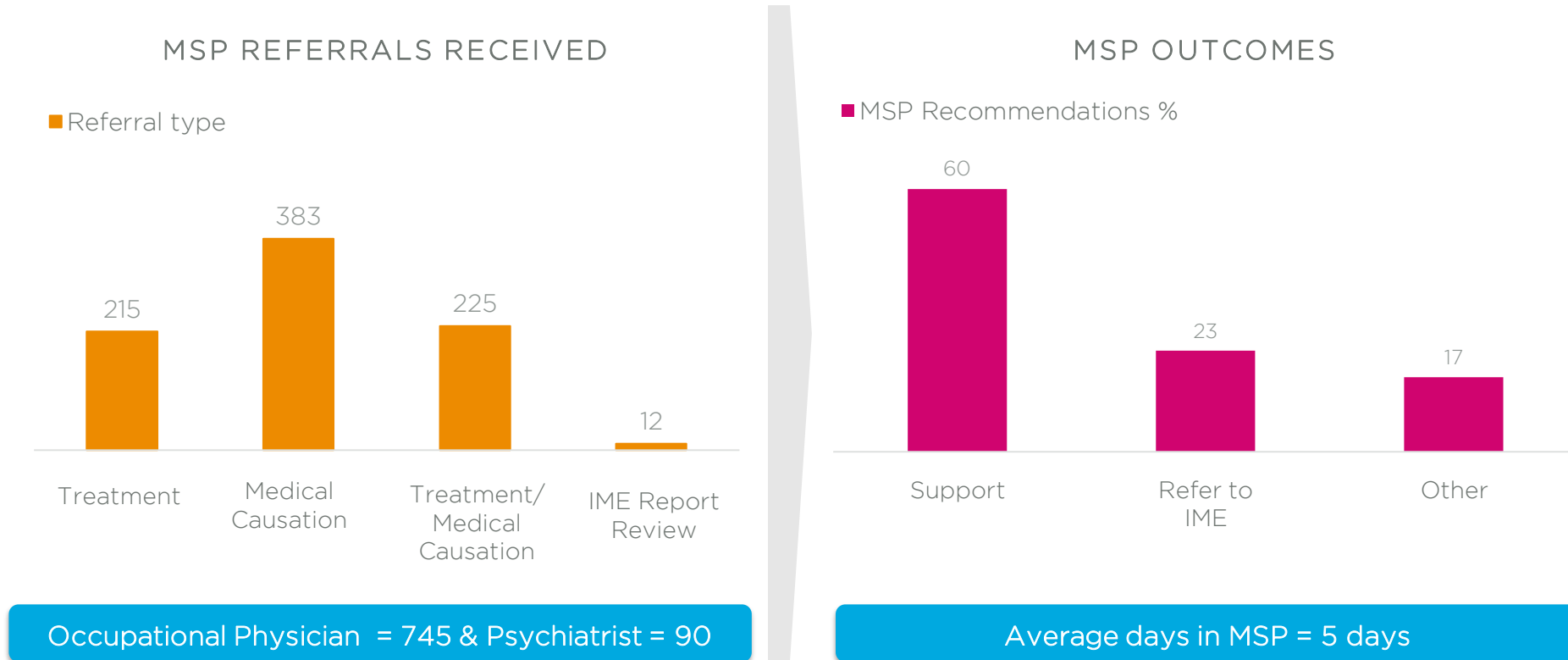
Overview

WHY	WHAT	HOW
<ul style="list-style-type: none">The MSP is designed to support case managers to deliver better customer outcomes for injured workers	<ul style="list-style-type: none">The MSP is comprised of medical specialists with the expertise to review case files and make recommendations in relation to treatment and medical causation leading to better customer outcomes	<ul style="list-style-type: none">The MSP provides recommendations to scheme agents to enable them to determine whether medical investigations and health interventions are evidenced based, best practice and reasonably necessary; and whether medical causation exists



Medical support panel

Pilot outcomes (15/05/17 – 30/11/17)



Strengths of the Panel



Learnings from the pilot



Increased stakeholder contact (Employers, Brokers and Medical Providers)



Providing case strategies to support case manager and workers with their treatment plans



Escalation Resolution Process



Detailed face to face training for scheme agent and case managers

What's next Medical support panel

MSP as a permanent feature of icare Workers Insurance

Communications Plan

- Webinars
- Fact Sheets/Brochures
- FAQs

MSP Scope

- Consideration of further opportunities for MSP

Psychological Claims

- Consideration of best approach for MSP to add value in relation to psychological injury cases

How to contact us

MSP as a permanent feature of icare Workers Insurance

Service issues or complaints which cannot be resolved should be escalated to your scheme agent case manager or you can contact the MSP Manager for resolution.

Medical Support Panel: medicalsupportpanel@icare.nsw.gov.au

For all Broker and Employer complaints please email the central inboxes.

Brokers: wibrokers@icare.nsw.gov.au

Employers: wiemployers@icare.nsw.gov.au



Thank you