

2023

### Workers' Comp Industry Insights Survey Report



Delivered by Healthesystems Powered by Risk & Insurance®

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#### Introduction

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The fifth annual Workers' Comp Industry Insights Survey was conducted in collaboration with Risk & Insurance® magazine, in person at the National Comp conference and online through mid-November. This survey continues to reveal important insights about the challenges, successes, innovations, and evolving needs in workers' comp medical care. In 2022, aftershocks from the COVID-19 pandemic were most strongly felt through price inflation, labor shortages, and mental/behavioral health crises. This year's survey explores the impact of these – and other – issues and how workers' comp organizations are managing them.

#### Strong Focus on Healthcare Industry Dynamics



want to increase use of network providers



concerned about medical price inflation



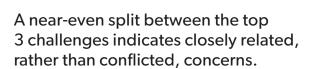
say inability to see/ control medical prices a claim complexity concern

Providing and paying for injured worker medical care is a top concern, not only for clinicians and medical program managers, but for executive and claims leaders. The top two industry challenges cited by survey participants in this year's survey were healthcare provider/service shortages and medical price inflation. This is a striking difference from last year when the changing workforce, employee retention and recruitment, and operational efficiencies dominated industry concerns and priorities. But the pandemic greatly accelerated an already looming shortage of physicians, nurses, and other healthcare workers, while lingering supply chain shortages and rising wages put pressure on prices. The unfortunate combination is causing both access to care issues and higher costs for some medical services and products.

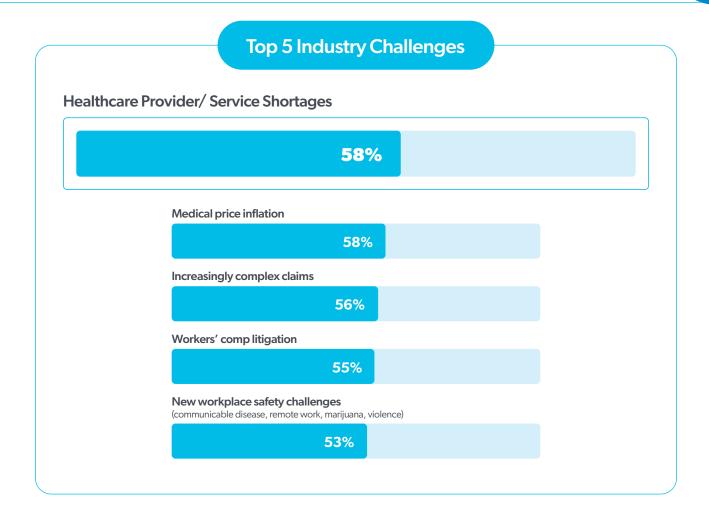
The number three challenge – increasingly complex claims – exacerbates concern over healthcare service shortages and costs because mental health conditions and comorbidities are top contributors to claim complexity. So, the top three challenges are likely so close in terms of percentage because they are so closely related as a matter of practical fact.



industry challenge = healthcare provider/service shortages



#### Strong Focus on Healthcare Industry Dynamics



The medical drives everything, the medical control drives the whole claim at the end of the day.

Risk Manager | Employer



#### Comorbidities a Chronic Condition for Workers' Comp





medical program priority is managing comorbidities





say comorbidities a claim complexity concern

say comorbidities is barrier to recovery

An aging workforce, chronic conditions, such as diabetes, obesity, and hypertension, and rising rates of mental health conditions, including depression and anxiety, are some of the reasons that managing comorbidities continues to be a growing priority for workers' comp healthcare. Unfortunately, these are problems not easily solved. Chronic conditions are increasingly common among the general population and good health outcomes for injured workers require treating the whole patient. Identifying at-risk patients early on to ensure appropriate treatment is key to managing comorbidities and keeping injured workers on a path to recovery.

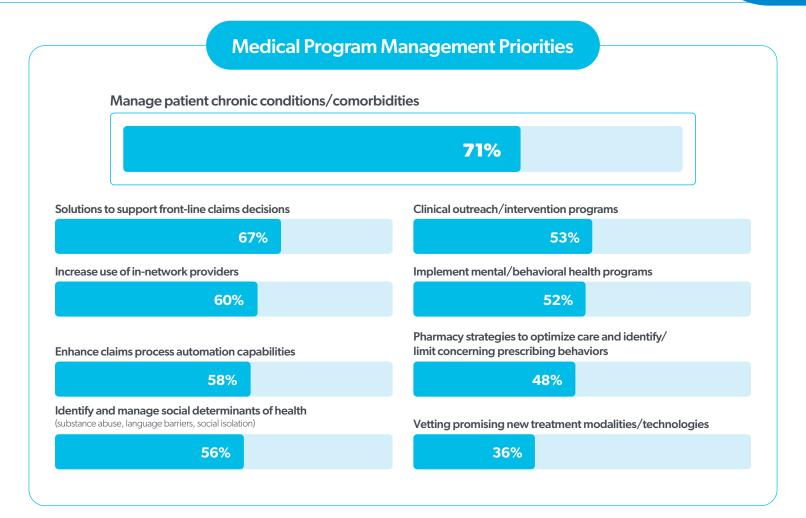
cite mental health conditions as

most concerning claim complexity

cite comorbidity management as medical program priority, an increase of 25% over last year's survey.



# Comorbidities a Chronic Condition for Workers' Comp





And while we don't own the comorbidity, the comorbidity is going to own us unless we deal with it.

Executive Leader | Insurance Carrier

#### Industry Banks on Technology

The healthcare worker shortage may be the industry's most pressing challenge in the coming year, but a shortage of qualified insurance industry professionals is also a concern for roughly 50% of survey participants. As with healthcare, the insurance industry was already contending with a labor shortage, which was exacerbated by the pandemic and "Great Resignation." In response, workers' comp leaders have made technological initiatives a priority. Claims process automation, virtual and mobile technologies, system integration and data sharing, and analytics are some of the solutions that organizations are turning to improve operational efficiency and enhance services. This includes a stronger emphasis on technical solutions in medical care management where clinical decision support, information sharing between payers and providers, and the use of analytics to identify opportunities for clinical intervention have grown in importance.



beneficial initiative for workers' comp organizations in 2022 was claims process automation



If we had more automation, we would be able to spend more time evaluating our claims. Adjustors have high volume, so they become more processors than analytical thinkers.

Claims Leader | Insurance Carrier



want better solutions to support front-line claims staff



#### Industry Banks on Technology

### Technologies Increasing in Importance

Technology	2022	2023
Claims process automation	48%	68%
Telemedicine	47%	59%
Interoperability/data sharing	33%	49%
Predictive/prescriptive analytics	31%	45%
Mobile technologies	33%	44%

#### Diverse Pharmacy Management Concerns

#### Pharmacy strategies to optimize care is a priority for:







of insurance carriers

of claims leaders

of medical program managers

Medical-related concerns were top of mind this year and several of them - price inflation, comorbidities, and increasing claim complexity are linked to pharmacy management strategies. Private label topicals (PLTs), specialty drugs, and physician dispensing are growing contributors to pharmacy costs. Comorbidities, including mental health conditions, are now common factors that must be considered when treating injured worker patients, and often contribute to claim complexity. These are likely some of the reasons that pharmacy strategies to optimize care and limit concerning prescribing behaviors was a priority for 48% of respondents overall, 57% of insurance carriers, and 60% of both claims leaders and medical program managers.

In addition, 60% of survey participants – and 67% of medical program managers – said that increasing use of in-network providers is a priority. In post-survey follow up interviews, participants

reported the highest incidence of out-of-network activity was within their pharmacy networks, which would also contribute to higher pharmacy/medical program costs.

Unlike in years past when the industry was contending with the ubiquitous use of opioids, pharmacy program priorities have shifted to more subtle and diverse concerns, which will require vigilant and multi-pronged management strategies to ensure patient safety and avoid unnecessary costs.



An injured worker with comorbidities might be taking other medications that are going to conflict with some of the provider's recommendations... these are potential complications.

Executive Leader | Employer







	Top 5 Medical Pr	ogram Priorities	
	Insurance Carrie	rs and Key Roles	
Insurance Carriers	Claims Leaders	Medical Program Managers	Claims Professionals
Solutions to support front-line claims	Manage patient chronic conditions/ comorbidities	Increase use of in- network providers	Manage patient chronic conditions
Enhance claims process automation capabilities	Increase use of in- network providers	Manage patient chronic conditions/ comorbidities	Solutions to support front line claims decisions
Manage patient chronic conditions/ comorbidities	Enhance claims process automation capabilities	Clinical outreach/ intervention programs	Increase use of in- network providers
Pharmacy strategies to optimize care and identify/ limit concerning prescribing behaviors	Pharmacy strategies to optimize care and identify/ limit concerning prescribing behaviors	Pharmacy strategies to optimize care and identify/ limit concerning prescribing behaviors	Pharmacy strategies to optimize care and identify/ limit concerning prescribing behaviors
Increase use of in-network providers	Identify and manage social determinants of health (substance abuse, language barriers, social isolation)	Enhance claims process automation capabilities	Enhance claims process automation capabilities



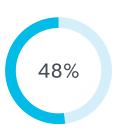
# Improving Injured Worker Patient Experience a Growing Priority



of claims professionals struggle to obtain info from injured workers



say most valuable use of analytics and Al is to personalize the injured worker experience



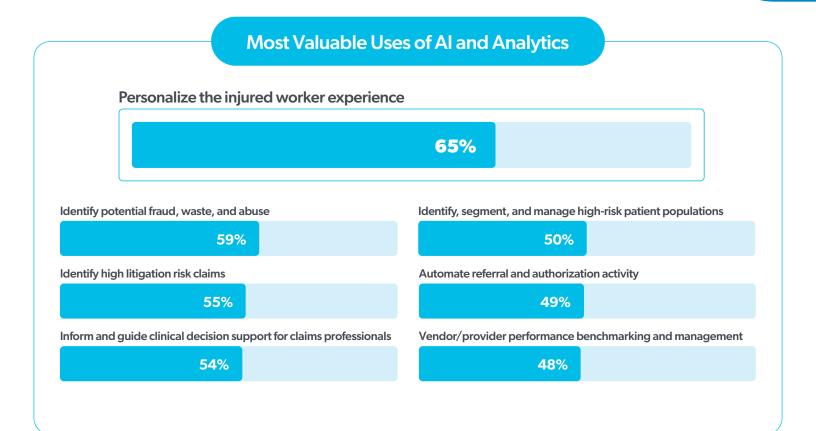
had success improving injured worker experience in 2022

For the past three years, survey participants have identified the injured worker's unfamiliarity with the workers' comp system as the #1 barrier to recovery. And each year the percentage of respondents who agree this is the case has increased, growing from 50% in 2020 to 66% in 2022. As awareness of the difficulties faced by injured workers grows, so too does the desire to improve their experience. The easier it is for injured workers to receive appropriate and effective treatment, the more likely it is that they will recover and return to work in a timely manner. Unsurprisingly, industry stakeholders are betting on technology to facilitate a smoother journey for injured workers through the complex environment of workers' compensation healthcare.



barrier to recover for 3 straight years is injured worker unfamiliarity with workers' comp system

# Improving Injured Worker Patient Experience a Growing Priority



You know the last thing an injured employee wants is a one size fits all phone call with a script or a form letter. The fact pattern can be identical for the injury, but the individual themselves can be much different.

Executive Leader | Employer

#### **Survey Results**

#### **Contributors**

The 2023 Workers' Comp Industry Insights Survey is a collaborative effort between Risk & Insurance® Magazine and Healthesystems. Uttam Kokil, PhD, User Researcher at Healthesystems served as principal researcher and analyst.

#### Methodology

The 2023 Workers' Comp Industry Insights Survey was launched on site at the National Comp Conference, October 19-21, 2022, where we surveyed and interviewed conference attendees in person. Online survey participation continued through November 11, 2022, followed by telephone interviews in December of 2022.

### Participant Demographics: Then and Now

Participant Totals     

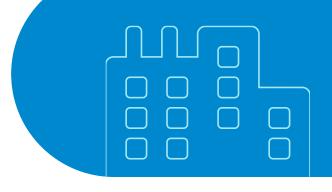
Organization Type	Percentage 2021/22	Percentage 2022/23	Change
Employer	23%	23%	
State/Government Agency	8%	5%	<del>-3</del> %
Insurance Carrier	15%	21%	16%
Healthcare Provider	9%	11%	<b>1</b> 2%
Third Party Administrator	6%	5%	<b>V</b> -1%
Brokerage	10%	6%	<del>\  -4</del> %
Managed Care Organization	3%	4%	1%
Consultancy	5%	6%	1%
Law Firm	4%	3%	<del>V</del> -1%
Other	17%	16%	<b>U-1</b> %

### Participant Demographics: Then and Now

Professional Role	Percentage 2021/22	Percentage 2022/23	Change
Executive Leadership	28%	25%	-3%
Claims Leadership	10%	14%	14%
Risk Management	15%	15%	
Broker/Agent	10%	6%	<del>-4</del> %
Clinical Case Management	5%	8%	13%
Claims Professional/Adjuster	5%	7%	1 2%
Medical Program Management	4%	3%	<b>↓</b> -1%
Legal/Regulatory	4%	3%	<del>-1</del> %
Healthcare Provider	3%	3%	
Procurement	1%	0%	<b>1</b> -1%
Other	15%	16%	1%

### **Industry Challenges**

What challenges facing the workers' compindustry most concern you today?



1.	Healthcare provider/ service shortages	58%
2.	Medical price inflation	58%
3.	Increasingly complex claims	56%
40	Workers' Comp litigation	55%
5.	New workplace safety challenges (communicable disease, remote work, marijuana, violence)	53%
(S <sub>0</sub> )	Poor worker health/comorbidities	52%
7.	Insurance industry labor shortage	49%
3.	Increasing regulation and/or expanding coverage requirements	47%
9.	Outdated technology/insufficient technological support	41%
10.	Cyber security risks	29%



Healthcare provider shortages was a close second top challenge for executive leaders who ranked medical price inflation as their biggest concern.



The top 3 challenges are closely related and reflect the circular challenges of strong demand, short supply, and high costs.

### **Beneficial Programs**

What programs implemented by your organization over the past 2-3 years have been most beneficial?



1.	Claims process improvements/operational efficiency	53%
2.	Implementation of virtual/remote technologies (telehealth, virtual case meetings, etc.)	50%
3.	Employee retention and recruitment	49%
40	Initiatives to improve the injured worker's experience	46%
5.	Technological integration with partners and providers	33%
(5°)	Initiatives to improve provider engagement	30%
7.	Analytics and/or artificial intelligence usage	28%
3.	Expansion of/access to medical services	24%
9.	Utilization of wearables/biometrics/telematics	8%



#### **Participant Perspective**

Claims process improvement and efficiency reaped big benefits for most organizations, but initiatives to improve the injured worker experience was the most beneficial program for state and government agencies.

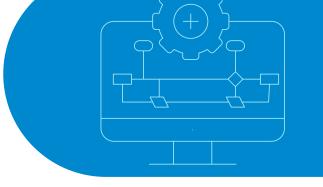


#### **Healthe Insight**

Top priorities from 2021 appear to have been realized as beneficial programs in 2022. In last year's survey, operational efficiency was the #2 industry priority and claims process automation was the #1 technology.

### **Medical Program Priorities**

What are the top priorities for your workers' comp medical management program?



1.	Manage patient chronic conditions/comorbidities	71%
2.	Solutions to support front-line claims decisions	67%
B.	Increase use of in-network providers	60%
40	Enhance claims process automation capabilities	58%
5.	Identify and manage social determinants of health (substance abuse, language barriers, social isolation)	56%
(S <sub>0</sub> )	Clinical outreach/intervention programs	53%
7.	Implement mental/behavioral health programs	52%
800	Pharmacy strategies to optimize care and identify/limit concerning prescribing behaviors	48%
90	Vetting promising new treatment modalities/technologies	36%



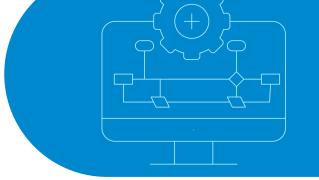
Solutions to support front-line claims decision was the top priority for insurance carriers.



Out of network activity is most prevalent in pharmacy programs according to survey follow up interviews.

### **Medical Program Priorities**

Please rank the top priorities for your workers' comp medical management program with #1 being the most important.



1.	Solutions to support front-line claims decisions
2.	Manage patient chronic conditions/comorbidities
Bo	Enhance claims process automation capabilities
40	Increase use of in-network providers
5.	Identify and manage social determinants of health (substance abuse, language barriers, social isolation)
(S <sub>0</sub> )	Clinical outreach/intervention programs
70	Implement mental/behavioral health programs
	Pharmacy strategies to optimize care and identify/limit concerning prescribing behaviors
90	Vetting promising new treatment modalities/technologies



**Participant Perspective** 

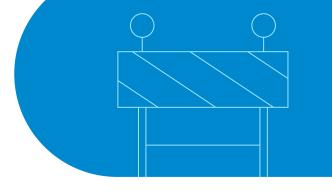


**Healthe Insight** 

Clinical managers and healthcare providers ranked managing comorbidities ahead of solutions to support claims decisions. When ranked in order, medical program priorities change slightly, reflecting the difference between priorities in general and the order in which they might be tackled.

### **Recovery Barriers**

What do you feel are the biggest barriers to injured worker recovery?



1.	Injured workers' unfamiliarity navigating workers' comp system	66%
2.	Comorbidities	57%
Bo	Limited availability of transitional duty/return to work options	53%
450	Care coordination/communication challenges	52%
5.	Injured worker social determinants of health (e.g., substance abuse, language barriers, social isolation)	48%
(S <sub>0</sub> )	Access to timely/quality care	43%
7.	Negative interactions with supervisors/claims staff treating providers	41%
(B)	Medical history and/or other relevant information unavailable to payers or providers	40%
9.	Language/cultural barriers	35%





Claims leaders differed in selecting comorbidities as the top barrier to recovery.

The percentage of survey participants who say that injured workers' unfamiliarity with the workers' comp systems is top barrier has increased steadily for 3 years.

### **Technology**

Which technological advances will be most important to your workers' comp medical management program in the next 3-5 years?



1.	Claims process automation	68%
2.	Telemedicine/virtual technologies	59%
3.	Interoperability and data sharing between payers, providers & vendors	49%
	Predictive/prescriptive analytics	45%
5.	Mobile technologies	44%
(5°)	Wearables/digital medicine/smart devices	28%
7.	Artificial intelligence/machine learning	28%



Among healthcare providers, claims process automation and telemedicine/virtual technologies were tied for the #1 spot.



Participants who selected interoperability and data sharing increased by 16% over last year, possibly reflecting a growing movement toward system integration.

#### **Analytics**

Which applications of enhanced data analytics and artificial intelligence would be most valuable to your organization?



1.	Personalize the injured worker experience	65%
2.	Identify potential fraud, waste, and abuse	59%
B.	Identify high litigation risk claims	55%
40	Inform and guide clinical decision support for claims professionals	54%
5.	Identify, segment, and manage high-risk patient populations	50%
(G <sub>0</sub> )	Automate referral and authorization activity	49%
70	Vendor/provider performance benchmarking and management	47%



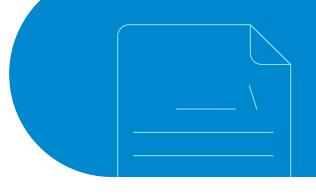
Personalizing the injured worker experience was a clear #1 for employers, but insurance carriers selected inform and guide clinical decisions as the most valuable data application.



94% of workers reported mobile as their most-used device and 88% use smart phones daily, according to a separate Healthesystems' study.

### **Claim Complexity**

Which types of claim complexity most concern you?



1.	Mental health conditions	62%
2.	Comorbidities	61%
B.	Undetected fraud	46%
40	Lack of transparency into/inability to control medical prices	43%
5.	Injured worker substance abuse	41%
(S <sub>0</sub> )	Charges for medical services unrelated to injury	41%
7.	Unknown/unmanaged social determinants of health (SDoH)	35%
3.	Polypharmacy (simultaneous use of multiple drugs to treat one or more conditions)	29%



Mental health conditions were a smaller concern for employers, who ranked it #3.



The portion of participants who cited mental health conditions as a claim complexity concern increased by 11% over 2021 and those citing comorbidities increased by 15%.

# Claims Professional Perspective

What obstacles do you face when facilitating care for injured workers?



1.	Difficulty obtaining information from medical providers	69%
2.	Difficulty reaching and/or obtaining information from injured workers	66%
3.	Too many claims to manage	62%
	Lack of reliable and accessible clinical decision support information	45%
5.	Legislative/regulatory requirements	41%
(5 <sub>0</sub> )	Outdated or inadequate claims processing system	38%
7.	Visibility into the progression of medical care	31%
8.	Working between multiple, disconnected systems and software	28%
9.	Inflated provider prices and fees	28%
3. 4. 5. 5. 5. 5. 5. 5. 5. 5. 5. 5. 5. 5. 5.	Lack of reliable and accessible clinical decision support information  Legislative/regulatory requirements  Outdated or inadequate claims processing system  Visibility into the progression of medical care  Working between multiple, disconnected systems and software	45% 41% 38% 31%



62% of claims professionals reported having too many claims to manage, as opposed to 42% last year.



23% of claims professionals from employer organizations had difficulty obtaining information from medical providers, compared with 19% from TPAs and 15% from insurance carriers.

# Success Begins and Ends with the Injured Worker

The top three industry challenges from this year's survey – medical provider/service shortages, medical price inflation, and increasingly complex claims – were separated by less than two percentage points. This is the smallest margin between top challenges we have ever seen and a marked departure from last year's survey when changing workforce/workplace, was the dominant choice selected by 71% of participants.

The nearly even distribution reflects the close connections between the three top challenges. Healthcare professionals of all kinds are in high demand, which drives higher wages and contributes to rising service costs. Prices are also under pressure from supply chain disruptions and labor shortages in other economic sectors, such as transportation. Access to a wide variety of medical services and products is in shorter supply, while more comorbidities and mental health conditions among injured worker populations are contributing to increasingly complex medical claims.

In addition to comorbidities, we are seeing a growing awareness of Social Determinants of Health (SDoH) and how they can impact injured worker recovery. Many workers experienced changes in economic circumstances and living arrangements during the pandemic, which could affect their access to care. This has long been a concern in rural regions and now some urban areas are experiencing similar challenges, due to pharmacies and healthcare facilities closing in poorer neighborhoods.

Providing effective care for injured workers requires a combination of physician/provider care, medication, and a variety ancillary products and services, such as physical therapy and DME. This is a lot of care to coordinate with a very fragmented healthcare system, and workers' remote payers are right to prioritize technology.

# Success Begins and Ends with the Injured Worker

Automation, analytics, integration, artificial intelligence, and remote and mobile technologies all have a role in streamlining the process and executing effective claims and medical program management strategies.

At the center of those strategies, of course, is the injured worker. Industry stakeholders are demonstrating their understanding that injured worker patients are not merely passive recipients of prescribed treatments. They are active participants in their own care whose levels of engagement and enthusiasm may depend on their service experience. And the expectations for that experience have been changed by healthcare consumerism and the proliferation of mobile and remote technologies that have enhanced the patient experience in group health environments.

As noted earlier, for three consecutive years survey participants have opined that the injured worker's unfamiliarity with the workers' comp system is the number one barrier to care. Recognizing this was an important first step that is now being followed by tangible efforts to improve the injured worker's experience through data analytics, system integration and information sharing, automation, and mobile technologies. Those initiatives are bound to pay dividends, not only for patients, but for providers and payers as well. Injured workers are at the center of everything we do and necessarily the starting point to achieve success.

#### Results by Featured Job Roles

	Executive Leader	Claims Leader	Clinical/Case Manager	Medical Program Manager	Claims Professional
Industry Challenges	<ol> <li>Medical price inflation</li> <li>Healthcare provider/service shortages</li> <li>Increasing regulation and/or expanding coverage requirements</li> <li>Insurance industry labor shortage</li> <li>Increasingly complex claims</li> <li>New workplace safety challenges (communicable disease, remote work, marijuana, violence)</li> <li>Outdated technology/insufficient technological support</li> <li>Workers' Comp litigation</li> <li>Poor worker health/comorbidities</li> <li>Cyber security risks</li> </ol>	<ol> <li>Insurance industry labor shortage</li> <li>Medical price inflation</li> <li>Workers' Comp litigation</li> <li>Poor worker health/ comorbidities</li> <li>Healthcare provider/ service shortages</li> <li>Increasingly complex claims</li> <li>Outdated technology/ insufficient technological support</li> <li>Increasing regulation and/or expanding coverage requirements</li> <li>New workplace safety challenges (communicable disease, remote work, marijuana, violence)</li> <li>Cyber security risks</li> </ol>	<ol> <li>Healthcare provider/service shortages</li> <li>Poor worker health/comorbidities</li> <li>Increasingly complex claims</li> <li>Insurance industry labor shortage</li> <li>New workplace safety challenges (communicable disease, remote work, marijuana, violence)</li> <li>Workers' Comp litigation</li> <li>Medical price inflation</li> <li>Increasing regulation and/or expanding coverage requirements</li> <li>Outdated technology/insufficient technological support</li> <li>Cyber security risks</li> </ol>	<ol> <li>Increasingly complex claims</li> <li>Medical price inflation</li> <li>Outdated technology/insufficient technological support</li> <li>Workers' Complitigation</li> <li>New workplace safety challenges (communicable disease, remote work, marijuana, violence)</li> <li>Insurance industry labor shortage</li> <li>Healthcare provider/service shortages</li> <li>Increasing regulation and/or expanding coverage requirements</li> <li>Poor worker health/comorbidities</li> <li>Cyber security risks</li> </ol>	<ol> <li>Increasingly complex claims</li> <li>Workers' Comp litigation</li> <li>Healthcare provider/ service shortages</li> <li>Poor worker health/ comorbidities</li> <li>Medical price inflation</li> <li>New workplace safety challenges (communicable disease, remote work, marijuana, violence)</li> <li>Increasing regulation and/or expanding coverage requirements</li> <li>Insurance industry labor shortage</li> <li>Outdated technology/ insufficient technological support</li> <li>Cyber security risks</li> </ol>
Beneficial Programs	<ol> <li>Employee retention and recruitment</li> <li>Claims process improvements/ operational efficiency</li> <li>Implementation of virtual/remote technologies (telehealth, virtual case meetings, etc.)</li> <li>Initiatives to improve the injured workers' experience</li> <li>Initiatives to improve provider engagement</li> <li>Technological integration with partners and</li> </ol>	<ol> <li>Claims process improvements/ operational efficiency</li> <li>Implementation of virtual/remote technologies (telehealth, virtual case meetings, etc.)</li> <li>Employee retention and recruitment</li> <li>Initiatives to improve the injured workers' experience</li> <li>Technological integration with partners and providers</li> </ol>	<ol> <li>Claims process improvements/ operational efficiency</li> <li>Implementation of virtual/remote technologies (telehealth, virtual case meetings, etc.)</li> <li>Initiatives to improve the injured workers' experience</li> <li>Employee retention and recruitment</li> <li>Initiatives to improve provider engagement</li> <li>Expansion of/access to medical services</li> </ol>	<ol> <li>Analytics and/or artificial intelligence usage</li> <li>Technological integration with partners and providers</li> <li>Employee retention and recruitment</li> <li>Implementation of virtual/remote technologies (telehealth, virtual case meetings, etc.)</li> <li>Expansion of/access to medical services</li> <li>Claims process improvements/</li> </ol>	<ol> <li>Claims process improvements/ operational efficiency</li> <li>Implementation of virtual/remote technologies (telehealth, virtual case meetings, etc.)</li> <li>Employee retention and recruitment</li> <li>Initiatives to improve the injured workers' experience</li> <li>Technological integration with partners and providers</li> </ol>

- integration with partners and providers
- 7. Analytics and/or artificial intelligence usage
- 8. Expansion of/access to medical services
- 9. Utilization of wearables/ biometrics/telematics

- 6. Analytics and/or artificial intelligence
- 7. Initiatives to improve provider engagement
- 8. Expansion of/access to medical services
- 9. Utilization of wearables/ biometrics/telematics
- to medical services
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- 9. Utilization of wearables/ biometrics/telematics

improvements/

7. Initiatives to improve

8. Initiatives to improve

experience

wearables/

9. Utilization of

the injured workers'

biometrics/telematics

operational efficiency

provider engagement

- 6. Expansion of/access to medical services
- 7. Initiatives to improve provider engagement
- 8. Analytics and/or artificial intelligence usage
- Utilization of wearables/ biometrics/telematics

### Results by Featured Job Roles

	Executive Leader	Claims Leader	Clinical/Case Manager	Medical Program Manager	Claims Professional
Medical Program Management Priorities	Manage patient chronic conditions/ comorbidities     Solutions to support	Manage patient chronic conditions/ comorbidities     Solutions to support	Manage patient chronic conditions/ comorbidities     Solutions to support	<ol> <li>Increase use of innetwork providers</li> <li>Manage patient chronic conditions/</li> </ol>	Manage patient chronic conditions/ comorbidities     Solutions to support
THORNES	front-line claims decisions  3. Clinical outreach/intervention programs  4. Increase use of innetwork providers  5. Identify and manage social determinants of health (substance abuse, language barriers, social isolation)  6. Enhance claims process automation capabilities  7. Implement mental/behavioral health programs  8. Pharmacy strategies to optimize care and identify/limit concerning prescribing behaviors	front-line claims decisions  3. Enhance claims process automation capabilities  4. Pharmacy strategies to optimize care and identify/ limit concerning prescribing behaviors  5. Identify and manage social determinants of health (substance abuse, language barriers, social isolation)  6. Increase use of innetwork providers  7. Implement mental/ behavioral health programs  8. Clinical outreach/ intervention programs	front-line claims decisions  3. Identify and manage social determinants of health (substance abuse, language barriers, social isolation)  4. Increase use of innetwork providers  5. Enhance claims process automation capabilities  6. Implement mental/behavioral health programs  7. Clinical outreach/intervention programs  8. Pharmacy strategies to optimize care and identify/limit concerning prescribing behaviors	comorbidities  3. Clinical outreach/intervention programs  4. Pharmacy strategies to optimize care and identify/limit concerning prescribing behaviors  5. Enhance claims process automation capabilities  6. Solutions to support front-line claims decisions  7. Identify and manage social determinants of health (substance abuse, language barriers, social isolation)  8. Implement mental/behavioral health programs	front-line claims decisions  3. Increase use of innetwork providers  4. Pharmacy strategies to optimize care and identify/ limit concerning prescribing behaviors  5. Enhance claims process automation capabilities  6. Clinical outreach/ intervention programs  7. Implement mental/ behavioral health programs  8. Identify and manage social determinants of health (substance abuse, language barriers, social isolation)
	9. Vetting promising new treatment modalities/ technologies	9. Vetting promising new treatment modalities/ technologies	9. Vetting promising new treatment modalities/ technologies	9. Vetting promising new treatment modalities/ technologies	9. Vetting promising new treatment modalities/ technologies
Barriers to Recovery	Injured workers'     unfamiliarity     navigating workers'     comp system      Comorbidities	1. Comorbidities 2. Limited availability of transitional duty/ return to work options 3. Injured workers'	Injured workers' unfamiliarity navigating workers' comp system     Comorbidities	Injured workers' unfamiliarity navigating workers' comp system     Injured worker social	Injured workers' unfamiliarity navigating workers' comp system     Comorbidities
	<ol> <li>Limited availability of transitional duty/ return to work options</li> <li>Care coordination/ communication challenges</li> <li>Injured worker social determinants of health (e.g., substance abuse, language barriers, social isolation)</li> </ol>	unfamiliarity navigating workers' comp system  Injured worker social determinants of health (e.g., substance abuse, language barriers, social isolation)  Language/cultural barriers	<ol> <li>Care coordination/communication challenges</li> <li>Limited availability of transitional duty/return to work options</li> <li>Access to timely/quality care</li> </ol>	determinants of health (e.g., substance abuse, language barriers, social isolation)  3. Negative interactions with supervisors/ claims staff treating providers  4. Access to timely/ quality care  5. Limited availability of transitional duty/	<ul> <li>3. Injured worker social determinants of health (e.g., substance abuse, language barriers, social isolation)</li> <li>4. Limited availability of transitional duty/return to work options</li> <li>5. Access to timely/quality care</li> </ul>

return to work options

### Results by Job Role

	Executive Leader	Claims Leader	Clinical/Case Manager	Medical Program Manager	Claims Professional
(cont'd) Barriers to Recovery	<ol> <li>Medical history and/or other relevant information unavailable to payers or providers</li> <li>Access to timely/ quality care</li> <li>Negative interactions with supervisors/ claims staff treating providers</li> <li>Language/cultural barriers</li> </ol>	<ul> <li>6. Medical history and/or other relevant information unavailable to payers or providers</li> <li>7. Access to timely/ quality care</li> <li>8. Care coordination/ communication challenges</li> <li>9. Negative interactions with supervisors/ claims staff treating providers</li> </ul>	<ul> <li>6. Negative interactions with supervisors/ claims staff treating providers</li> <li>7. Language/cultural barriers</li> <li>8. Injured worker social determinants of health (e.g., substance abuse, language barriers, social isolation)</li> <li>9. Medical history and/or other relevant information unavailable to payers or providers</li> </ul>	<ul> <li>6. Comorbidities</li> <li>7. Care coordination/communication challenges</li> <li>8. Language/cultural barriers</li> <li>9. Medical history and/or other relevant information unavailable to payers or providers</li> </ul>	<ol> <li>Negative interactions with supervisors/claims staff treating providers</li> <li>Care coordination/communication challenges</li> <li>Medical history and/or other relevant information unavailable to payers or providers</li> <li>Language/cultural barriers</li> </ol>
Most Important Technologies in Next 3-5 Years	<ol> <li>Claims process automation</li> <li>Telemedicine/virtual technologies</li> <li>Interoperability and data sharing between payers, providers &amp; vendors</li> <li>Mobile technologies</li> </ol>	<ol> <li>Claims process automation</li> <li>Telemedicine/virtual technologies</li> <li>Predictive/ prescriptive analytics</li> <li>Interoperability and data sharing between payers, providers &amp; vendors</li> </ol>	<ol> <li>Telemedicine/virtual technologies</li> <li>Interoperability and data sharing between payers, providers &amp; vendors</li> <li>Claims process automation</li> <li>Predictive/prescriptive analytics</li> </ol>	<ol> <li>Predictive/ prescriptive analytics</li> <li>Claims process automation</li> <li>Interoperability and data sharing between payers, providers &amp; vendors</li> <li>Artificial intelligence/ machine learning</li> </ol>	<ol> <li>Claims process automation</li> <li>Telemedicine/virtual technologies</li> <li>Interoperability and data sharing between payers, providers &amp; vendors</li> <li>Predictive/ prescriptive analytics</li> </ol>
	<ul> <li>5. Predictive/ prescriptive analytics</li> <li>6. Artificial intelligence/ machine learning</li> <li>7. Wearables/digital medicine/smart devices</li> </ul>	<ul> <li>5. Mobile technologies</li> <li>6. Wearables/digital medicine/smart devices</li> <li>7. Artificial intelligence/machine learning</li> </ul>	<ul> <li>5. Mobile technologies</li> <li>6. Wearables/digital medicine/smart devices</li> <li>7. Artificial intelligence/machine learning</li> </ul>	<ul><li>5. Telemedicine/virtual technologies</li><li>6. Mobile technologies</li><li>7. Wearables/digital medicine/smart devices</li></ul>	<ul> <li>5. Mobile technologies</li> <li>6. Wearables/digital medicine/smart devices</li> <li>7. Artificial intelligence/machine learning</li> </ul>
Most Valuable Analytics and Al Applications	<ol> <li>Personalize the injured worker experience</li> <li>Identify, segment, and manage high-risk patient populations</li> <li>Identify potential fraud, waste, and abuse</li> <li>Inform and guide clinical decision support for claims professionals</li> <li>Identify high litigation risk claims</li> <li>Automate referral and authorization activity</li> <li>Vendor/provider</li> </ol>	<ol> <li>Personalize the injured worker experience</li> <li>Identify potential fraud, waste, and abuse</li> <li>Inform and guide clinical decision support for claims professionals</li> <li>Identify high litigation risk claims</li> <li>Automate referral and authorization activity</li> <li>Vendor/provider performance benchmarking and management</li> <li>Identify, segment,</li> </ol>	<ol> <li>Personalize the injured worker experience</li> <li>Identify potential fraud, waste, and abuse</li> <li>Vendor/provider performance benchmarking and management</li> <li>Automate referral and authorization activity</li> <li>Inform and guide clinical decision support for claims professionals</li> <li>Identify high litigation risk claims</li> <li>Identify, segment,</li> </ol>	<ol> <li>Inform and guide clinical decision support for claims professionals</li> <li>Vendor/provider performance benchmarking and management</li> <li>Identify, segment, and manage high-risk patient populations</li> <li>Automate referral and authorization activity</li> <li>Personalize the injured worker experience</li> <li>Identify potential fraud, waste, and abuse</li> </ol>	<ol> <li>Personalize the injured worker experience</li> <li>Identify potential fraud, waste, and abuse</li> <li>Inform and guide clinical decision support for claims professionals</li> <li>Identify high litigation risk claims</li> <li>Identify, segment, and manage high-risk patient populations</li> <li>Automate referral and authorization activity</li> <li>Vendor/provider performance</li> </ol>

### Results by Featured Job Roles

	Executive Leader	Claims Leader	Clinical/Case Manager	Medical Program Manager	Claims Professional
Most Concerning Claims Complexities	1. Mental health conditions 2. Comorbidities 3. Lack of transparency into/inability to control medical prices 4. Injured worker substance abuse 5. Undetected fraud 6. Charges for medical services unrelated to injury 7. Unknown/ unmanaged social determinants of health (SDoH) 8. Polypharmacy (simultaneous use of multiple drugs to treat one or more conditions)	<ol> <li>Comorbidities</li> <li>Mental health conditions</li> <li>Undetected fraud</li> <li>Injured worker substance abuse</li> <li>Lack of transparency into/inability to control medical prices</li> <li>Unknown/ unmanaged social determinants of health (SDoH)</li> <li>Charges for medical services unrelated to injury</li> <li>Polypharmacy (simultaneous use of multiple drugs to treat one or more conditions)</li> </ol>	<ol> <li>Mental health conditions</li> <li>Comorbidities</li> <li>Undetected fraud</li> <li>Charges for medical services unrelated to injury</li> <li>Injured worker substance abuse</li> <li>Unknown/ unmanaged social determinants of health (SDoH)</li> <li>Polypharmacy (simultaneous use of multiple drugs to treat one or more conditions)</li> <li>Lack of transparency into/inability to control medical prices</li> </ol>	<ol> <li>Mental health conditions</li> <li>Comorbidities</li> <li>Injured worker substance abuse</li> <li>Unknown/ unmanaged social determinants of health (SDoH)</li> <li>Lack of transparency into/inability to control medical prices</li> <li>Polypharmacy (simultaneous use of multiple drugs to treat one or more conditions)</li> <li>Undetected fraud</li> <li>Charges for medical services unrelated to injury</li> </ol>	<ol> <li>Mental health conditions</li> <li>Comorbidities</li> <li>Undetected fraud</li> <li>Charges for medical services unrelated to injury</li> <li>Lack of transparency into/inability to control medical prices</li> <li>Polypharmacy (simultaneous use of multiple drugs to treat one or more conditions)</li> <li>Injured worker substance abuse</li> <li>Unknown/ unmanaged social determinants of health (SDoH)</li> </ol>
			aims ssional		
Claims' Professionals' Obstacles	<ol> <li>Difficulty reaching and/</li> <li>Too many claims to man</li> </ol>	essible clinical decision suppequirements	n injured workers		

- 6. Outdated or inadequate claims processing system
- 7. Visibility into the progression of medical care
- 8. Working between multiple, disconnected systems and software
- 9. Inflated provider prices and fees

	Insurance Carrier	Employer	TPA	Govt Agency	Healthcare Provider
Top Industry Challenges	Increasingly complex claims	Workers' Comp     litigation	Poor worker health/ comorbidities	New workplace safety challenges	Healthcare provider/ service shortages
Chancinges	<ol> <li>Medical price inflation</li> <li>Healthcare provider/</li> </ol>	2. Poor worker health/comorbidities	2. New workplace safety challenges	(communicable disease, remote work, marijuana, violence)	2. Increasingly complex claims
	service shortages  4. Poor worker health/	3. Healthcare provider/ service shortages	(communicable disease, remote work, marijuana, violence)	Increasingly complex claims	3. Poor worker health/comorbidities
	comorbidities  5. Insurance industry	4. New workplace safety challenges	3. Insurance industry labor shortage	3. Healthcare provider/ service shortages	4. Workers' Comp litigation
	labor shortage  6. Workers' Comp	(communicable disease, remote work, marijuana, violence)	4. Increasingly complex claims	4. Outdated technology/	<ul><li>5. Medical price inflation</li><li>6. Increasing</li></ul>
	litigation  7. Outdated	5. Medical price inflation	5. Workers' Comp litigation	insufficient technological support	regulation and/or expanding coverage
	technology/ insufficient	<b>6.</b> Increasingly complex claims	6. Healthcare provider/ service shortages	<ol><li>Insurance industry labor shortage</li></ol>	requirements  7. New workplace
	technological support  8. Increasing	7. Increasing regulation and/or	7. Medical price inflation	6. Medical price inflation	safety challenges (communicable
	regulation and/or expanding coverage	expanding coverage requirements	8. Increasing regulation and/or	7. Workers' Comp litigation	disease, remote work marijuana, violence)
	requirements  9. New workplace	8. Insurance industry labor shortage	expanding coverage requirements	8. Poor worker health/ comorbidities	8. Outdated technology/ insufficient
	safety challenges (communicable disease, remote work,	9. Outdated technology/ insufficient	<ol> <li>Cyber security risks</li> <li>Outdated</li> </ol>	<ol> <li>Increasing regulation and/or expanding coverage</li> </ol>	technological suppor  1. Insurance industry
	marijuana, violence)	technological support	technology/ insufficient	requirements	labor shortage
	10.Cyber security risks	10.Cyber security risks	technological support	10.Cyber security risks	10.Cyber security risks
Most Beneficial Programs Implemented	Claims process improvements/ operational efficiency     Implementation of virtual/remote	<ol> <li>Claims process improvements/ operational efficiency</li> <li>Employee retention and recruitment</li> </ol>	Employee retention and recruitment     Implementation of virtual/remote technologies	1. Implementation of virtual/remote technologies (telehealth, virtual case meetings, etc.)	Implementation of virtual/remote technologies (telehealth, virtual case meetings, etc.)
in 2022	technologies (telehealth, virtual case meetings, etc.)	3. Initiatives to improve the injured workers'	(telehealth, virtual case meetings, etc.)	2. Claims process improvements/ operational efficiency	2. Initiatives to improve the injured workers' experience
	3. Employee retention and recruitment	experience  4. Implementation of virtual/remote	<ol><li>Claims process improvements/ operational efficiency</li></ol>	3. Initiatives to improve the injured workers'	3. Employee retention and recruitment
	4. Initiatives to improve the injured workers' experience	technologies (telehealth, virtual case meetings, etc.)	<b>4.</b> Analytics and/or artificial intelligence usage	experience  4. Technological integration with	<ol> <li>Initiatives to improve provider engagemen</li> </ol>
	5. Analytics and/or artificial intelligence	<ol> <li>Initiatives to improve provider engagement</li> </ol>	5. Initiatives to improve the injured workers'	partners and providers  5. Employee retention	5. Expansion of/access to medical services
	usage  6. Technological	<b>6.</b> Expansion of/access to medical services	experience  6. Technological	and recruitment  6. Initiatives to improve	<ol><li>Claims process improvements/ operational efficiency</li></ol>
	integration with partners and providers	7. Analytics and/or artificial intelligence	integration with partners and providers	provider engagement  7. Expansion of/access	<ol> <li>Technological integration with</li> </ol>
	<ol><li>Initiatives to improve provider engagement</li></ol>	usage  8. Technological	<ol><li>Initiatives to improve provider engagement</li></ol>	to medical services  8. Analytics and/or	partners and provider  8. Analytics and/or
	8. Expansion of/access	integration with	8. Expansion of/access	artificial intelligence	artificial intelligence

8. Expansion of/access

9. Utilization of

wearables/

to medical services

biometrics/telematics

artificial intelligence

biometrics/telematics

usage

9. Utilization of

wearables/

8. Expansion of/access

9. Utilization of

wearables/

to medical services

biometrics/telematics

integration with

partners and providers

artificial intelligence

biometrics/telematics

usage

9. Utilization of

wearables/

	Insurance Carrier	Employer	TPA	Govt Agency	Healthcare Provider
Medical Program	Solutions to support front-line claims decisions	Manage patient chronic conditions/ comorbidities	Solutions to support front-line claims decisions	Enhance claims     process automation     capabilities	Manage patient chronic conditions/ comorbidities
Management Priorities	2. Enhance claims process automation capabilities	2. Solutions to support front-line claims decisions	2. Manage patient chronic conditions/comorbidities	2. Manage patient chronic conditions/comorbidities	2. Enhance claims process automation capabilities
	3. Manage patient chronic conditions/comorbidities	3. Increase use of innetwork providers	3. Increase use of innetwork providers	3. Increase use of innetwork providers	<ol> <li>Vetting promising new treatment modalities/ technologies</li> </ol>
	4. Pharmacy strategies to optimize care	4. Identify and manage social determinants of health (substance	<ol> <li>Enhance claims process automation capabilities</li> </ol>	<ol> <li>Solutions to support front-line claims decisions</li> </ol>	4. Clinical outreach/ intervention programs
	and identify/ limit concerning prescribing behaviors	abuse, language barriers, social isolation)	5. Identify and manage social determinants of health (substance	5. Implement mental/ behavioral health	5. Increase use of innetwork providers
	5. Increase use of innetwork providers	5. Enhance claims process automation capabilities	abuse, language barriers, social isolation)	<ul><li>programs</li><li>ldentify and manage social determinants</li></ul>	<b>6.</b> Solutions to support front-line claims decisions
	<ul><li>6. Clinical outreach/ intervention programs</li><li>7. Identify and manage</li></ul>	<ul><li>6. Implement mental/ behavioral health programs</li></ul>	6. Clinical outreach/intervention programs	of health (substance abuse, language barriers, social isolation)	7. Identify and manage social determinants of health (substance
	social determinants of health (substance abuse, language	7. Clinical outreach/ intervention programs	<ol> <li>Implement mental/ behavioral health programs</li> </ol>	7. Clinical outreach/intervention programs	abuse, language barriers, social isolation)
	barriers, social isolation)  8. Implement mental/	8. Pharmacy strategies to optimize care and identify/	8. Pharmacy strategies to optimize care and identify/	8. Pharmacy strategies to optimize care and identify/	8. Implement mental/ behavioral health programs
	behavioral health programs	limit concerning prescribing behaviors	limit concerning prescribing behaviors	limit concerning prescribing behaviors	9. Pharmacy strategies to optimize care
	<ol> <li>Vetting promising new treatment modalities/ technologies</li> </ol>	<ol> <li>Vetting promising new treatment modalities/ technologies</li> </ol>	<ol> <li>Vetting promising new treatment modalities/ technologies</li> </ol>	<ol> <li>Vetting promising new treatment modalities/ technologies</li> </ol>	and identify/ limit concerning prescribing behaviors
	<ol> <li>Comorbidities</li> <li>Injured workers'</li> </ol>	<ol> <li>Injured workers' unfamiliarity</li> </ol>	<ol> <li>Comorbidities</li> <li>Limited availability</li> </ol>	<ol> <li>Injured workers' unfamiliarity</li> </ol>	<ol> <li>Injured workers' unfamiliarity</li> </ol>
Barriers to Recovery	unfamiliarity navigating workers'	navigating workers' comp system	of transitional duty/ return to work options	navigating workers' comp system	navigating workers' comp system
	comp system  3. Injured worker social	<ol> <li>Comorbidities</li> <li>Care coordination/</li> </ol>	3. Injured worker social determinants of health	<ol> <li>Comorbidities</li> <li>Limited availability</li> </ol>	2. Care coordination/ communication
	determinants of health (e.g., substance	communication challenges	(e.g., substance abuse, language	of transitional duty/ return to work options	challenges  3. Limited availability
	abuse, language barriers, social isolation)	4. Limited availability of transitional duty/	barriers, social isolation)	<ol> <li>Access to timely/ quality care</li> </ol>	of transitional duty/ return to work options
	4. Limited availability of transitional duty/	return to work options  5. Medical history	<ol> <li>Negative interactions with supervisors/ claims staff treating</li> </ol>	5. Negative interactions with supervisors/	4. Access to timely/ quality care

- of transitional duty/ return to work options
- 5. Care coordination/ communication challenges
- 6. Medical history and/or other relevant information unavailable to payers or providers
- 7. Access to timely/ quality care
- 8. Language/cultural barriers
- 9. Negative interactions with supervisors/ claims staff treating providers

- Medical history and/or other relevant information unavailable to payers or providers
- 6. Injured worker social determinants of health (e.g., substance abuse, language barriers, social isolation)
- 7. Negative interactions with supervisors/ claims staff treating providers
- 8. Access to timely/ quality care
- 9. Language/cultural barriers

- claims staff treating providers
- 5. Medical history and/or other relevant information unavailable to payers or providers
- 6. Injured workers' unfamiliarity navigating workers' comp system
- 7. Care coordination/ communication challenges
- 8. Language/cultural barriers
- 9. Access to timely/ quality care

5. Comorbidities

claims staff treating

6. Care coordination/

communication

7. Injured worker social

(e.g., substance

abuse, language

barriers, social

isolation)

8. Medical history

and/or other

or providers

barriers

9. Language/cultural

relevant information

unavailable to payers

determinants of health

challenges

providers

- 6. Negative interactions with supervisors/ claims staff treating providers
- 7. Injured worker social determinants of health (e.g., substance abuse, language barriers, social isolation)
- 8. Medical history and/or other relevant information unavailable to payers or providers
- 9. Language/cultural barriers

	Insurance Carrier	Employer	TPA	Govt Agency	Healthcare Provider
	Claims process     automation	<ol> <li>Claims process automation</li> </ol>	<ol> <li>Claims process automation</li> </ol>	<ol> <li>Claims process automation</li> </ol>	<ol> <li>Claims process automation</li> </ol>
Most Important Technologies Next	2. Predictive/ prescriptive analytics	<ol><li>Telemedicine/virtual technologies</li></ol>	<ol><li>Telemedicine/virtual technologies</li></ol>	<ol><li>Telemedicine/virtual technologies</li></ol>	<ol><li>Telemedicine/virtual technologies</li></ol>
3-5 Years	<ul><li>3. Telemedicine/virtual technologies</li><li>4. Interoperability and</li></ul>	<ol> <li>Mobile technologies</li> <li>Interoperability and data sharing between</li> </ol>	<ul><li>3. Mobile technologies</li><li>4. Predictive/ prescriptive analytics</li></ul>	3. Interoperability and data sharing between payers, providers & vendors	3. Interoperability and data sharing between payers, providers & vendors
	data sharing between payers, providers & vendors	payers, providers & vendors  5. Predictive/	<ol><li>Artificial intelligence/ machine learning</li></ol>	<b>4.</b> Predictive/ prescriptive analytics	<b>4.</b> Predictive/ prescriptive analytics
	5. Artificial intelligence/	prescriptive analytics	6. Interoperability and data sharing between	5. Mobile technologies	5. Mobile technologies
	machine learning  6. Mobile technologies	6. Wearables/digital medicine/smart	payers, providers & vendors	<ol><li>Wearables/digital medicine/smart</li></ol>	<ol><li>Wearables/digital medicine/smart</li></ol>
	7. Wearables/digital	devices	7. Wearables/digital	devices	devices
	medicine/smart devices	<ol> <li>Artificial intelligence/ machine learning</li> </ol>	medicine/smart devices	<ol> <li>Artificial intelligence/ machine learning</li> </ol>	<ol> <li>Artificial intelligence/ machine learning</li> </ol>
Marak Valoralala	Inform and guide clinical decision	Personalize the injured worker experience	Inform and guide clinical decision	Personalize the injured worker experience	Personalize the injured worker experience
Most Valuable Applications of	support for claims professionals	<ol><li>Identify potential fraud, waste, and</li></ol>	support for claims professionals	<ol><li>Identify potential fraud, waste, and</li></ol>	2. Automate referral and authorization activity
Analytics and Al	<ol> <li>Personalize the injured worker experience</li> <li>Vendor/provider</li> </ol>	<ul><li>abuse</li><li>Identify high litigation risk claims</li></ul>	2. Identify potential fraud, waste, and abuse	<ul><li>abuse</li><li>3. Identify high litigation risk claims</li></ul>	3. Identify, segment, and manage high-risk patient populations
	performance benchmarking and management	<ol> <li>Identify, segment, and manage high-risk patient populations</li> </ol>	<ul><li>3. Personalize the injured worker experience</li><li>4. Identify high litigation</li></ul>	4. Automate referral and authorization activity	4. Identify high litigation risk claims
	4. Identify, segment, and manage high-risk patient populations	5. Automate referral and authorization activity	risk claims  5. Vendor/provider	<ol><li>Identify, segment, and manage high-risk patient populations</li></ol>	<ol><li>Identify potential fraud, waste, and abuse</li></ol>
	5. Identify potential fraud, waste, and abuse	<b>6.</b> Vendor/provider performance benchmarking and management	performance benchmarking and management  6. Automate referral and	<b>6.</b> Vendor/provider performance benchmarking and management	<ol> <li>Inform and guide clinical decision support for claims professionals</li> </ol>
	<ol><li>Identify high litigation risk claims</li></ol>	7. Inform and guide	authorization activity	7. Inform and guide	7. Vendor/provider
	7. Automate referral and authorization activity	clinical decision support for claims professionals	<ol> <li>Identify, segment, and manage high-risk patient populations</li> </ol>	clinical decision support for claims professionals	performance benchmarking and management
	Mental health conditions	<ol> <li>Comorbidities</li> <li>Undetected fraud</li> </ol>	<ol> <li>Mental health conditions</li> </ol>	<ol> <li>Mental health conditions</li> </ol>	<ol> <li>Mental health conditions</li> </ol>
Most Concerning Claims	2. Comorbidities	3. Mental health	2. Comorbidities	2. Comorbidities	2. Comorbidities
Complexities	3. Lack of transparency into/inability to	conditions	3. Injured worker substance abuse	3. Undetected fraud	3. Undetected fraud
	control medical prices	<ol> <li>Charges for medical services unrelated to</li> </ol>	4. Charges for medical	<ol> <li>Charges for medical services unrelated to</li> </ol>	<ol> <li>Injured worker substance abuse</li> </ol>
	<ul><li>4. Undetected fraud</li><li>5. Injured worker substance abuse</li></ul>	<ul><li>injury</li><li>5. Lack of transparency into/inability to</li></ul>	services unrelated to injury  5. Polypharmacy	injury  5. Lack of transparency into/inability to	5. Lack of transparency into/inability to control medical prices
	6. Unknown/ unmanaged social determinants of health	control medical prices  6. Injured worker substance abuse	(simultaneous use of multiple drugs to treat one or more	control medical prices  6. Unknown/ unmanaged social	6. Unknown/ unmanaged social determinants of health
	(SDoH)  7. Charges for medical	7. Unknown/ unmanaged social	conditions)  6. Undetected fraud	determinants of health (SDoH)	(SDoH)  7. Polypharmacy
	services unrelated to	determinants of health	7. Lack of transparency	<ol><li>Polypharmacy</li></ol>	(simultaneous use

(simultaneous use

treat one or more

of multiple drugs to

injury

8. Polypharmacy

conditions)

services unrelated to

(simultaneous use

treat one or more

of multiple drugs to

(SDoH)

8. Polypharmacy

conditions)

determinants of health

7. Lack of transparency

into/inability to

8. Unknown/

(SDoH)

control medical prices

determinants of health

unmanaged social

Polypharmacy

conditions)

8. Injured worker

(simultaneous use

treat one or more

substance abuse

of multiple drugs to

(simultaneous use

treat one or more

8. Charges for medical

services unrelated to

conditions)

injury

of multiple drugs to

	Insurance Carrier	Employer	TPA	Govt Agency	Healthcare Provider
Claims Professionals'	Difficulty obtaining information from medical providers     Too many claims to	Difficulty reaching and/or obtaining information from injured workers	Difficulty reaching and/or obtaining information from injured workers	Difficulty reaching and/or obtaining information from injured workers	<b>9.</b> N/A
Obstacles to Facilitating Care	manage  3. Difficulty reaching	2. Outdated or inadequate claims	2. Too many claims to manage	2. Legislative/regulatory requirements	
J	and/or obtaining information from injured workers	processing system  3. Too many claims to manage	3. Visibility into the progression of medical care	3. Lack of reliable and accessible clinical decision support	
	4. Outdated or inadequate claims	4. Legislative/regulatory requirements	<b>4.</b> Legislative/regulatory requirements	information  4. Outdated or	
	<ul> <li>5. Legislative/regulatory requirements</li> <li>6. Working between multiple, disconnected systems and software</li> <li>7. Lack of reliable and accessible clinical</li> </ul>	<b>5.</b> Working between multiple, disconnected systems and software	5. Lack of reliable and accessible clinical decision support information	inadequate claims processing system  5. Too many claims to manage	
		<ul><li>6. Inflated provider prices and fees</li><li>7. Lack of reliable and accessible clinical decision support</li></ul>	<ul> <li>6. Outdated or inadequate claims processing system</li> <li>7. Working between multiple,</li> <li>Inflated provider prices and fees</li> <li>Difficulty obtaining information from medical providers</li> </ul>		
				information from	
	decision support information  8. Visibility into the progression of	information  8. Visibility into the progression of medical care	disconnected systems and software  8. Inflated provider prices and fees	8. Working between multiple, disconnected systems and software	
	medical care  9. Inflated provider prices and fees			<b>9.</b> Visibility into the progression of medical care	

#### **Related Resources**

#### From Healthesystems:

#### **Giving Notice: How Workforce Attrition Impacts Workers' Comp**

Millions of workers are changing occupations, leading to ripple effects for comp.

#### Out of Stock: Medical Supply Chain Shortages Impacting Workers' Comp

Ancillary medical product and service shortages and how to manage them.

#### **Things Change: The Growing Diversity of Pharmacy Cost Drivers**

Smaller, more niche drug trends across different populations and geographies.

#### **Making Telemedicine Work for Workers' Comp**

The future of telemedicine and practical tips to make it effective in workers' comp.

#### The Patient Experience in Perspective: Applying Empathy to the Work Comp Claims Process

Understanding patients' pain points with comp can lead to insights that improve program outcomes.

#### **Empowering the Patient as a Mitigator of Claims Complexity**

Patients hold significant influence over the outcomes of their care.

#### When Demand Exceeds Supply: Older Patients and Fewer Physicians in Workers' Comp

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#### From Risk & Insurance®:

#### 500 Workers' Compensation Stakeholders Identified the Top 10 Industry Challenges

Stakeholders from across the workers' comp industry listed the top challenges in a survey conducted by Risk & Insurance.

#### 3 Tips for Tackling Technology Projects Amid IT's Talent Shortage

Investing in new technology is of paramount importance to complete projects, meet service expectations, and retain the best talent.

#### 4 Ways to Manage Medical Supply Chain Disruption in Workers' Comp

Effective strategies to mitigate disruptions.

#### Powering People with Technology to Close Gaps Across the Life of a Claim

Advanced technologies support stronger claims processes that bring out the best of what claims teams can offer injured workers.



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