

Catastrophic Care Transformation

Carly Marie Eckert, MD MPH
April 28, 2016

Goals/areas of activity:

- * care coordination, communication, and planning
- * improved data systems
- * improved access to evidence-based medical care

5 Point Transformation Plan

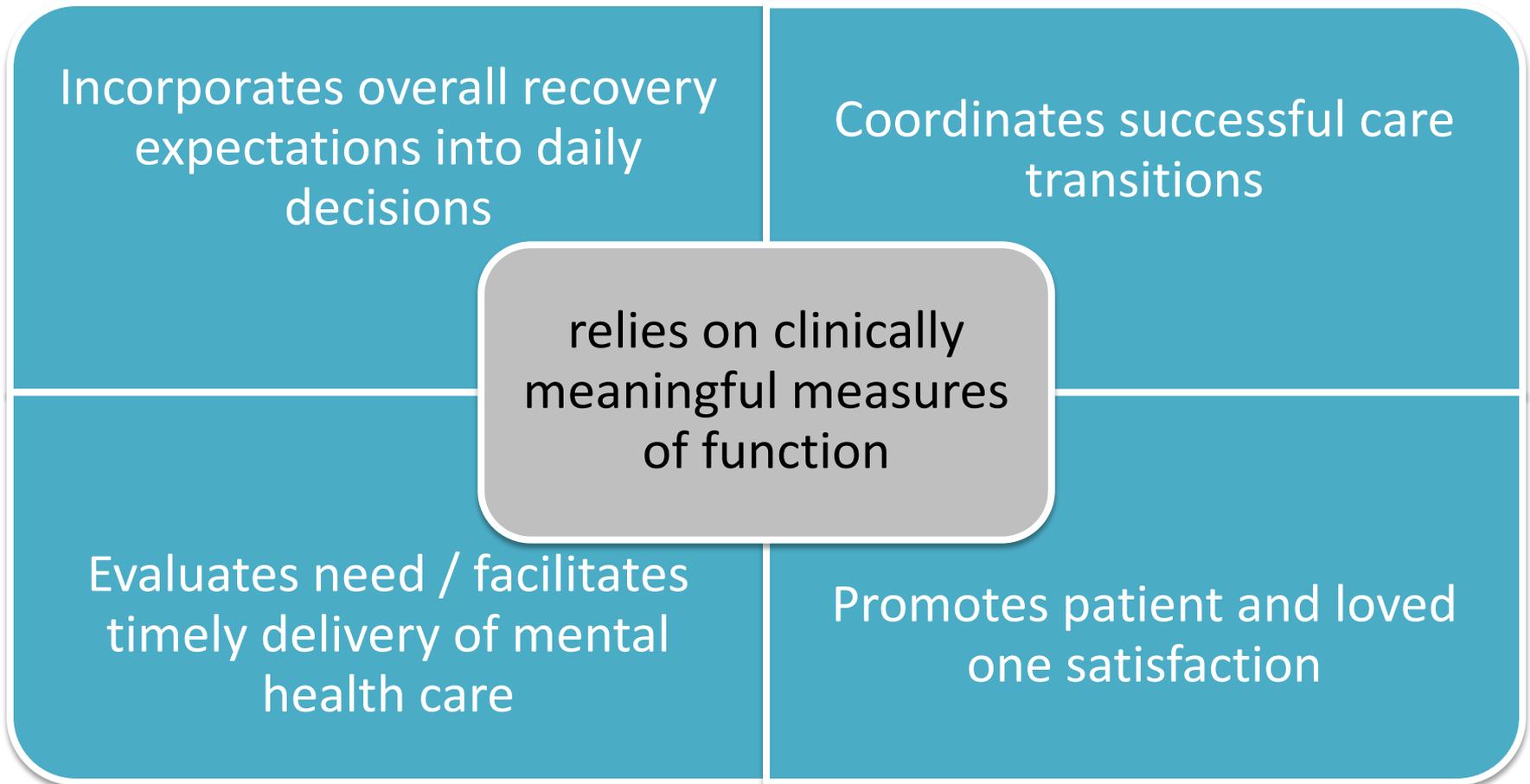
1. Strategically reallocate internal L&I resources for catastrophically injured worker care management
2. External catastrophic care management services
3. Establish Centers of Excellence
4. Establish catastrophic health services coordinator role
5. Conduct prospective evaluation for catastrophic management



OCCUPATIONAL HEALTH **BEST PRACTICES**

WORKING TOGETHER TO KEEP PEOPLE WORKING

A foundation of outcomes



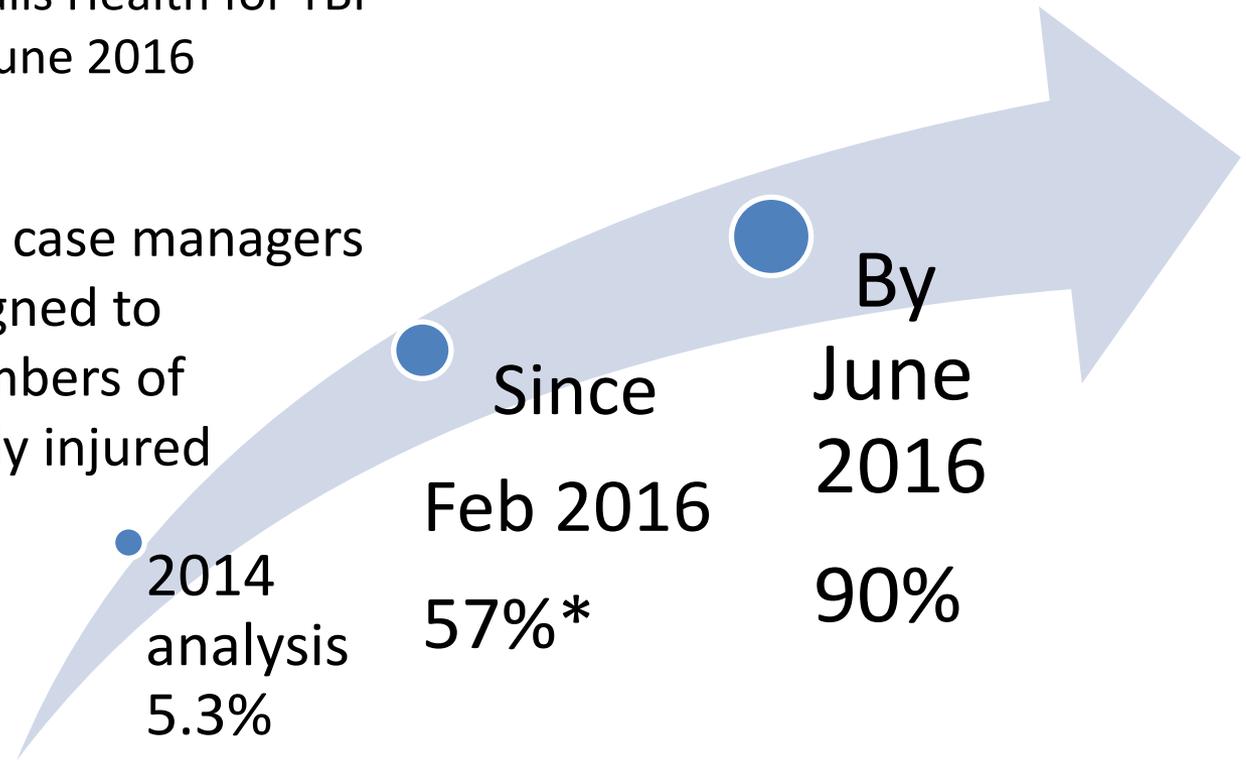
OCCUPATIONAL HEALTH **BEST PRACTICES**

WORKING TOGETHER TO KEEP PEOPLE WORKING

External catastrophic case management services

- RFP Complete
- 4 companies currently contracted
- 3 Companies underway
- Referrals to Qualis Health for TBI & SCI to begin June 2016

- External nurse case managers are being assigned to increasing numbers of catastrophically injured workers



OCCUPATIONAL HEALTH **BEST PRACTICES**

WORKING TOGETHER TO KEEP PEOPLE WORKING

Care coordination

- Data collected on multiple coordination activities
- L&I staff met to review current coordination roles
- L&I currently provides/pays for care coordination via:
 - Internal Staff
 - Headquarter Nurses, Regional Nurses, Medical Directors, Claims Managers
 - External Nurse Case Managers (including new catastrophic care NCM)
 - COHE Health Services Coordinators
 - Centers Of Excellence Care Coordinators
- Reviewing the interaction of the existing and newly developed roles to identify any additional or remaining gaps



OCCUPATIONAL HEALTH **BEST PRACTICES**

WORKING TOGETHER TO KEEP PEOPLE WORKING

Centers of Excellence

- The Center of Excellence for Amputee Care has been established
 - contract signed (2/17/2016)
 - first referrals have been placed
 - working on implementation plan for continued referrals and legacy claimants
- The Center of Excellence for Burn Care
 - ongoing discussions with Harborview Burn Center
- Discussions regarding telemedicine begun



OCCUPATIONAL HEALTH **BEST PRACTICES**

WORKING TOGETHER TO KEEP PEOPLE WORKING

Center of Excellence in Amputee Care

NEWS

Communication Services 360-902-5400 ■ PublicAffairs@Lni.wa.gov

Workers who lose limbs will receive state-of-the-art care at new Center of Excellence for Amputations thanks to partnership between Harborview Medical Center and L&I

[More news releases](#)

February 23, 2016



Tumwater – Amputations are among the worst on-the-job injuries. Each year, about 25 workers in Washington suffer from amputations so serious — lost arms, hands, legs or feet — that they require ongoing specialized care. The medical care and assistance these injured workers receive are key to their physical and mental recovery.

The Department of Labor & Industries (L&I) and Harborview Medical Center today announced a new agreement to provide focused help for the most traumatic on-the-job amputations. The two organizations have worked together to create a new Center of Excellence for medical care for amputees.

Harborview, part of UW Medicine, is already nationally recognized for its work with amputees. Thanks to the agreement, workers with amputations can now have their ongoing medical care managed by UW Medicine physicians and staff at the new Center of Excellence.

Traumatic amputations increase the complexity of patients' medical needs. These cases often involve multiple types of health care providers working together.

"We want these catastrophically injured workers to know that we're going to be there for them," said Joel Sacks, director of L&I. "By improving the coordination of care, workers with amputations can concentrate on recovery and not feel overwhelmed with details."

Workers will leave the hospital with a discharge plan that carefully coordinates follow-up appointments with specialists. Then the doctors and care coordinators at the new Center of Excellence will communicate with all of the worker's health-care providers, as well as with the employer and L&I.

"The new Center of Excellence for Amputations will reinforce our touchstone role in bringing the best available trauma care to Washington's citizens," said Dr. Janna Friedly, director, UW Medicine Rehabilitation Amputee Program at Harborview Medical Center. "We commend Labor & Industries for leading the way on paying for care coordination."

To streamline care for amputees insured by L&I, a group of highly-trained staff from the agency will manage catastrophic claims. They will coordinate closely with UW Medicine and with staff at hospitals where workers are initially treated.



OCCUPATIONAL HEALTH **BEST PRACTICES**

WORKING TOGETHER TO KEEP PEOPLE WORKING

Evaluation

- Initial Retrospective evaluation complete
- Specific Aims:
 - To describe long-term disability following catastrophic injury
 - A) to evaluate predictors of long-term disability in a severity adjusted analysis
 - B) to evaluate modifiers of long-term disability in a severity adjusted analysis



OCCUPATIONAL HEALTH **BEST PRACTICES**

WORKING TOGETHER TO KEEP PEOPLE WORKING

Retrospective Evaluation

- Predictors

- Injury Severity Score

ISS	Minor	Moderate	Severe
	24.6% (490)	42.6% (847)	32.7% (651)

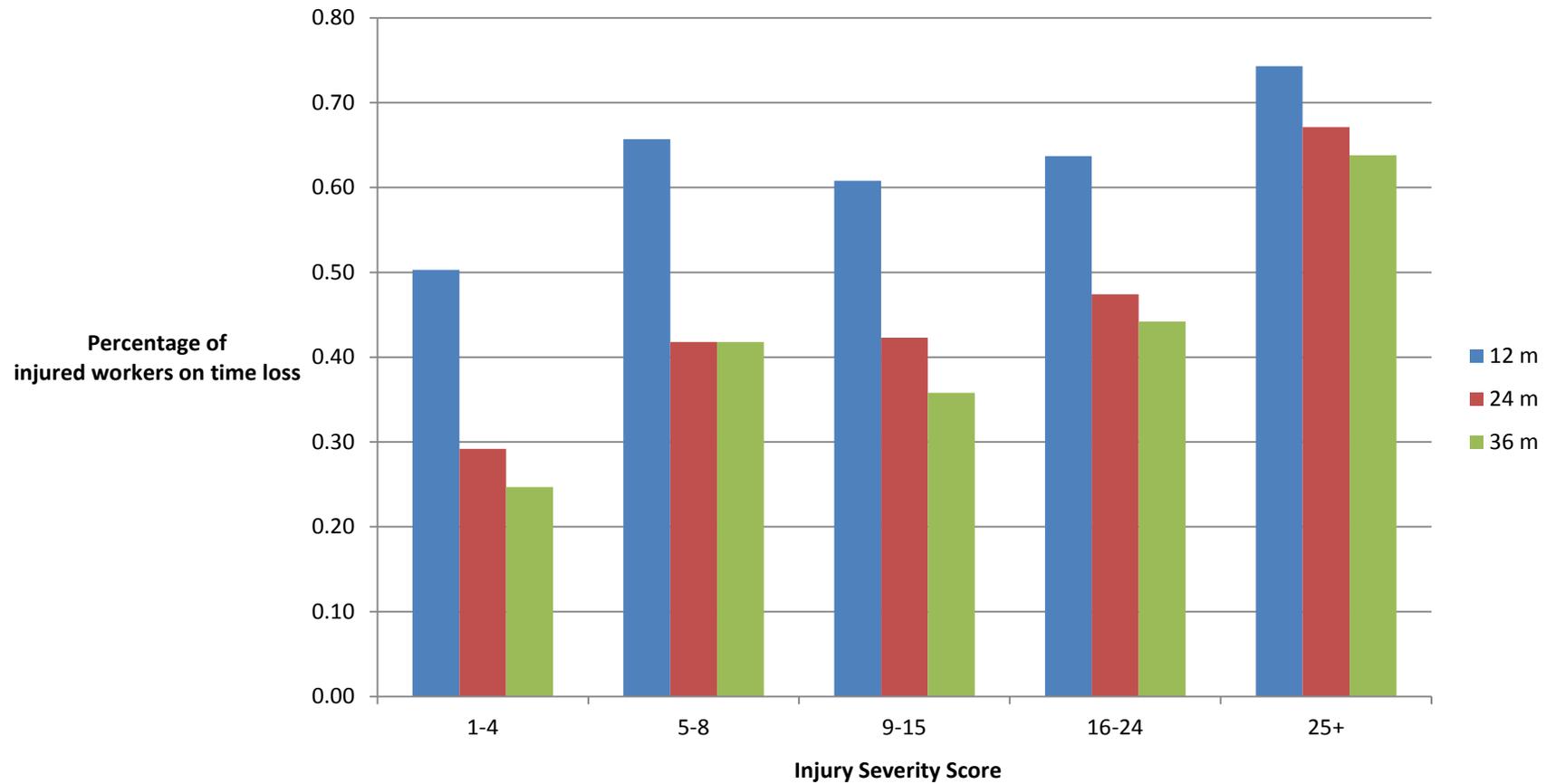
- Outcomes

- Warrant data

Time loss at	12 months	24 months	36 months
	61.8%	44.6%	40%



Retrospective Evaluation



OCCUPATIONAL HEALTH **BEST PRACTICES**

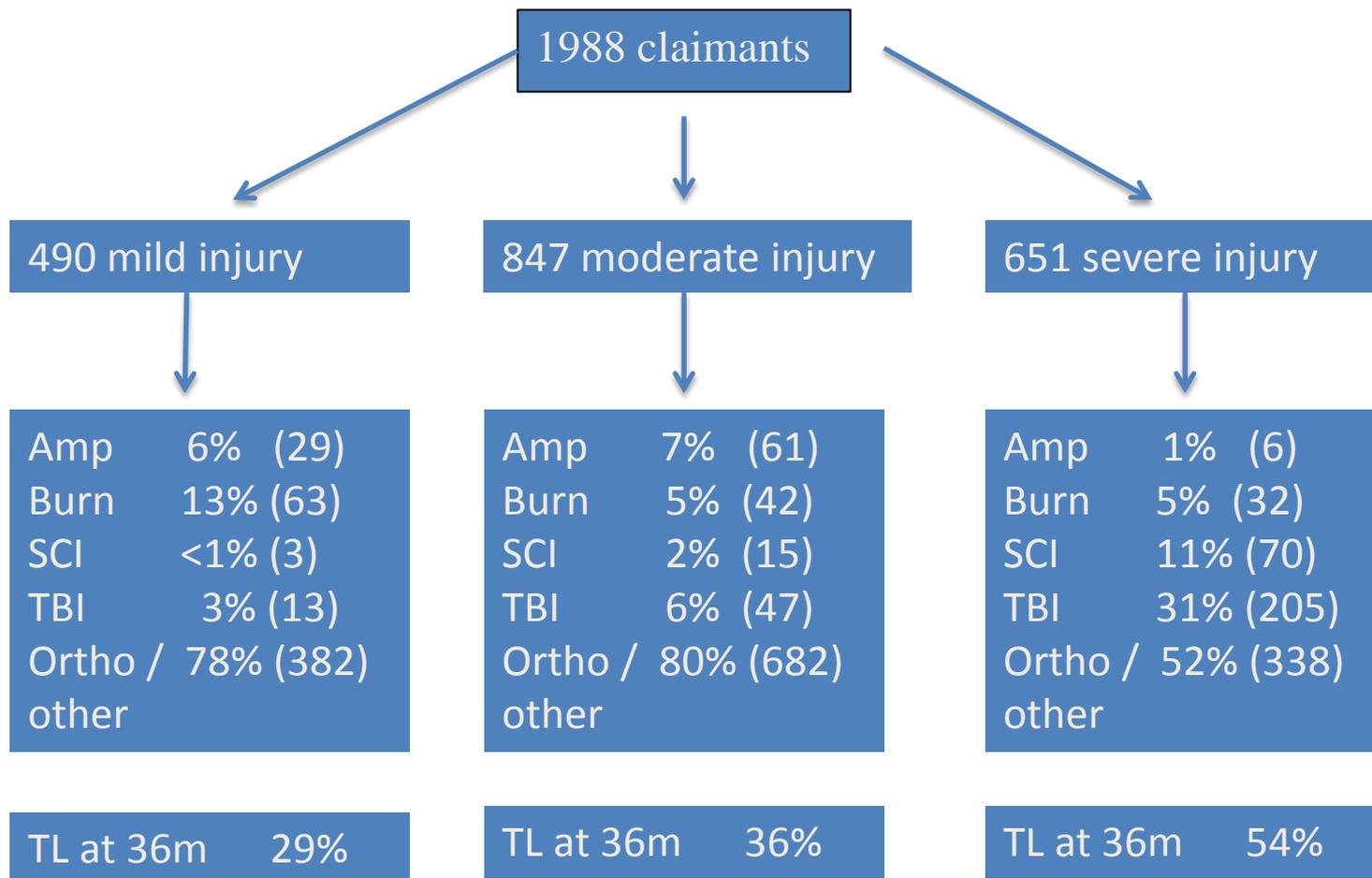
WORKING TOGETHER TO KEEP PEOPLE WORKING

Key covariates considered

- Standard demographics
 - Age, gender, race, income, marital status
- Job Factors
 - Employer size, history of prior claim, legal services
- Injury Variables
 - Injury severity, concurrent neurotrauma, extremity injury
- Hospital information
 - Harborview, length of stay, readmission within 30 days
- L&I services
 - Nurse case management, vocational services, COHE AP



Descriptive Statistics



OCCUPATIONAL HEALTH **BEST PRACTICES**

WORKING TOGETHER TO KEEP PEOPLE WORKING

Key Findings

- Covariates associated with time loss in a severity-adjusted analysis:
 - Increasing age
 - Injury type
 - Use of legal representation
 - Employer size
 - Mental health diagnosis
 - Opioid use > 90 days



OCCUPATIONAL HEALTH **BEST PRACTICES**

WORKING TOGETHER TO KEEP PEOPLE WORKING

How do these data inform our prospective evaluation?

- Inform us of predictors of long-term disability as well as areas of potential intervention
- Gap analysis
- Literature Review
- Severity-adjusted retrospective evaluation



OCCUPATIONAL HEALTH **BEST PRACTICES**

WORKING TOGETHER TO KEEP PEOPLE WORKING

Next Steps in Prospective Evaluation

- Continue to discuss details of study design
- Will likely be a prospective randomized controlled trial
- Involving arms of different approaches / intensity of care
- A variety of interventions with smaller sub-studies to focus on specific interventions
 - Enhanced case management
 - Mental health
 - Activity coaching
 - Opioid use



OCCUPATIONAL HEALTH **BEST PRACTICES**

WORKING TOGETHER TO KEEP PEOPLE WORKING

Contact information:

Carly Eckert, MD, MPH

Associate Medical Director

Washington State Department of Labor & Industries

Carly.Eckert@LNI.wa.gov



OCCUPATIONAL HEALTH **BEST PRACTICES**

WORKING TOGETHER TO KEEP PEOPLE WORKING