



2022

WORKERS' COMPENSATION MEDICAL
ACCESSIBILITY STUDY

EXECUTIVE SUMMARY

PREPARED BY FIELDGOALS.US

Background

In the Commonwealth of Pennsylvania (Commonwealth), the workers' compensation system protects both employees and employers. Employees receive medical treatment and are compensated for lost wages associated with work-related injuries and disease, while employers provide the cost of such coverage and are protected from direct lawsuits by employees.

The Pennsylvania Bureau of Workers' Compensation (BWC), under the auspices of the Pennsylvania Department of Labor & Industry (L&I), is required under the Workers' Compensation Act (Act) to retain an independent consulting firm to conduct a study to determine whether there is adequate access to quality healthcare and products for injured workers.

The Medical Accessibility Study collects data from injured workers, healthcare providers, and insurance companies in the Commonwealth to consider the effects the current fee schedules and utilization of provider panels may have on access to quality care and lost days from work. If the research indicates there is not sufficient access to quality healthcare or products for persons suffering injuries covered by this Act, the Secretary may make recommendations for modifications or changes to the Insurance Commissioner.

FieldGoals.US was commissioned by the BWC to collect data, analyze, and provide recommendations in this report to assist the Secretary of L&I in determining whether injured workers have adequate access to timely quality healthcare, and the impact the use of provider panels is having on the program.

The 2022 survey collected data from three workers' compensation stakeholders:

- Injured workers
- Insurance carriers
- Healthcare providers

Methodology

FieldGoals.US conducted a comprehensive survey of workers injured during 2022 using a list of 88,623 contacts from 67 counties across Pennsylvania. The list provided by the BWC was cleaned of duplicates and a statistically significant sample size was selected. The number of injured workers surveyed provides results at a 99 percent confidence level with a +/- 3 confidence interval, deeming the information contained herewith of the highest reliability. Telephone interviews were utilized to collect the injured worker responses for the 2022 study. One thousand six hundred eight workers representing all regions of Pennsylvania shared their experiences.

For the insurance carrier survey, FieldGoals.US elicited responses from insurance carriers, self-insured employers, group members, and self-insured group funds via email and traditional mail.

Emails, including two follow-up reminders, were sent to healthcare providers who submitted claims on the portal in 2022. Additionally, FieldGoals.US reached out to healthcare providers via email and mail to elicit participation and spread awareness of the survey. An announcement was also made at the 22nd Annual Pennsylvania Workers’ Compensation Conference. The 2022 healthcare provider survey, with 51 responses, represents 228 workers’ compensation healthcare providers who treated injured workers across the Commonwealth in 2022.

Survey Results

Injured Worker Survey

The objectives of the injured worker survey match the requirements of the Act. The injured worker survey provides findings in several key areas:

1. Provider panel utilization and acknowledgment of workers’ compensation rights and duties
2. Prompt return to work
3. Healthcare satisfaction and quality of care
4. Timely access to treatment

Timely Access to Quality Care

Timely access to quality care remains one of the priorities for this study; therefore, survey questions are asked to determine the timeliness of care and to measure the quality-of-care metrics relating to communication of diagnosis and treatment plans. The 2018 data is based on previous reports by another vendor.

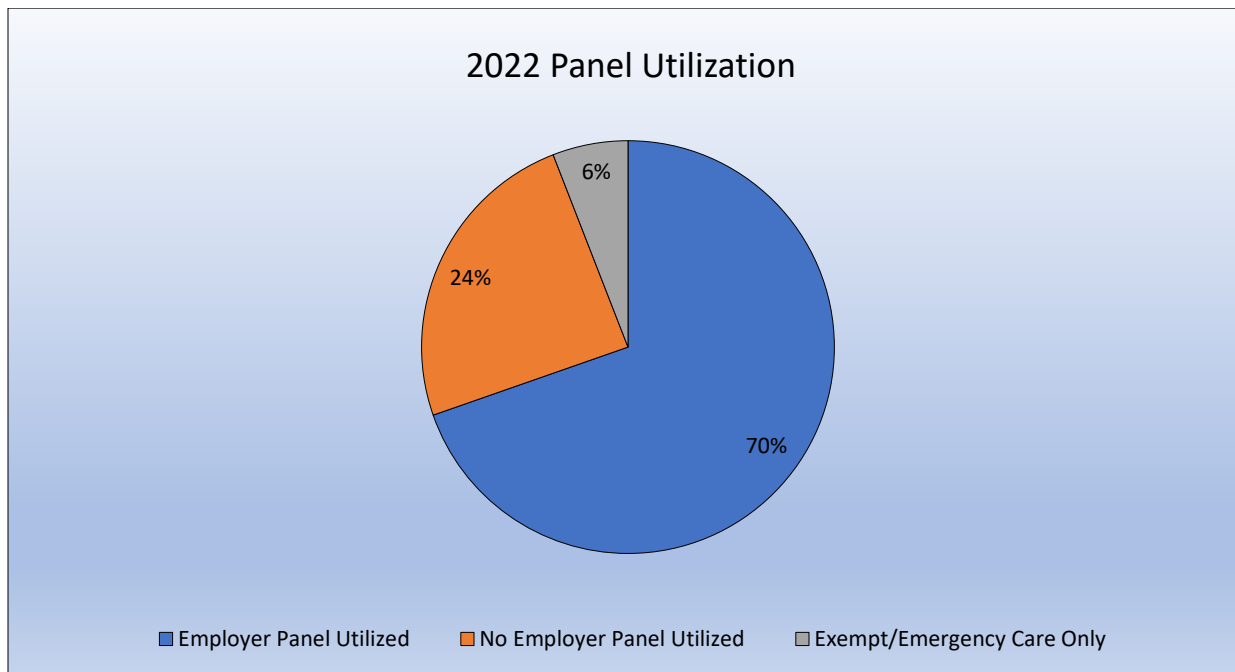
Timely Access to Appropriate Care	2018	2019	2020	2021	2022
Seen by a doctor within 48 hours	82%	83%	80%	80%	82%
Doctor explained injury	86%	78%	70%	65%	69%
Doctor discussed treatment options	81%	70%	62%	59%	61%
Doctor gave diagnosis (this question was changed in 2021 from “My doctor gave me a correct diagnosis”)	80%	60%	55%	54%	57%
Rights and Duties					
Rights and Duties explained at injury** (in 2019, 2020 this included “within 48 hours”; since 2021 this was modified to “a few days”)	87%	44%	44%	64%***	60%
Patient Satisfaction					
Overall, Extremely Satisfied, Very Satisfied or Moderately Satisfied with care	88%	85%	86%	85%	86%

Medical care Much Better, Somewhat Better or Similar/Same as other healthcare	83%	82%	82%	83%	84%
Satisfied with timing of return to work	70%	50%	47%	50%	49%
Lost Time & Return to Work					
Percent without other injury after return to work	95%	89%	89%	90%	89%

*99 percent confidence, +-3 percent Margin of Error
 **Only injured workers subject to use of panel included
 ***This increase could be a result of the change in language for this question

Provider Panel Utilization and Acknowledgment of Workers’ Compensation Rights and Duties

When asked about their initial visit, 70 percent of injured workers reported they were treated by a panel physician, or a physician chosen by their employer. Of those who used a panel physician, 24 percent chose a doctor from a list of several doctors, 42 percent stated their employer sent them to their workers’ compensation doctor, and 34 percent asked their employer to choose one of the doctors from a list of several doctors the employer uses for workers’ compensation injuries. Twenty-four percent of all respondents chose their own doctor without a list, or their employer does not use specific doctors for work-related injuries, and six percent sought only emergency care.*



*This number is pulled from those who indicated they used a physician from an employer list in q5 or q5a. Those who went to an emergency room for their initial visit were asked the employer panel provider question as a follow-up. N=95 who did not receive treatment after the initial visit were excluded.

In 2022, although a significant 60 percent of those questioned stated their employer spoke to them about their rights, another 30 percent said their employer never spoke to them about their rights. Only 10 percent did not recall.

- 7) *After your 2022 injury, did someone from the company or insurance carrier explain your medical treatment rights and duties under workers' compensation within a few days after the injury?*

Q7. Informed of Rights	# of Responses	% of Total
Yes	968	60.19%
No	487	30.28%
Don't remember	153	9.52%
Totals	1,608	100%

To dig a little deeper, injured workers who indicated their employer never spoke to them about their rights, or who did not remember (640 responses), were asked a follow-up question. Of those who responded to this follow-up question, 67 percent, or 427 injured workers, were not aware they had the right to choose their own doctor from the employer's list and the right to use a doctor not on the employer's list after 90 days. This represents 27 percent of the total population of injured workers.

- 7a) *Were you aware that you had the right to choose any doctor from the employer's list and the right to use a doctor not on the employer's list after 90 days?*

Q7a. Aware of rights	# of Responses	% of Total
Yes	213	33.30%
No	427	66.70%
Totals	640	100%

Prompt Return to Work

In 2022, 29 percent (465) of the total surveyed population responded they did not miss any work as a result of their injury. Thirty-two percent of respondents missed a month or less of work. Twenty-seven percent of injured workers missed one to six months of work due to their injuries. The numbers are similar to the 2020 and 2021 results.

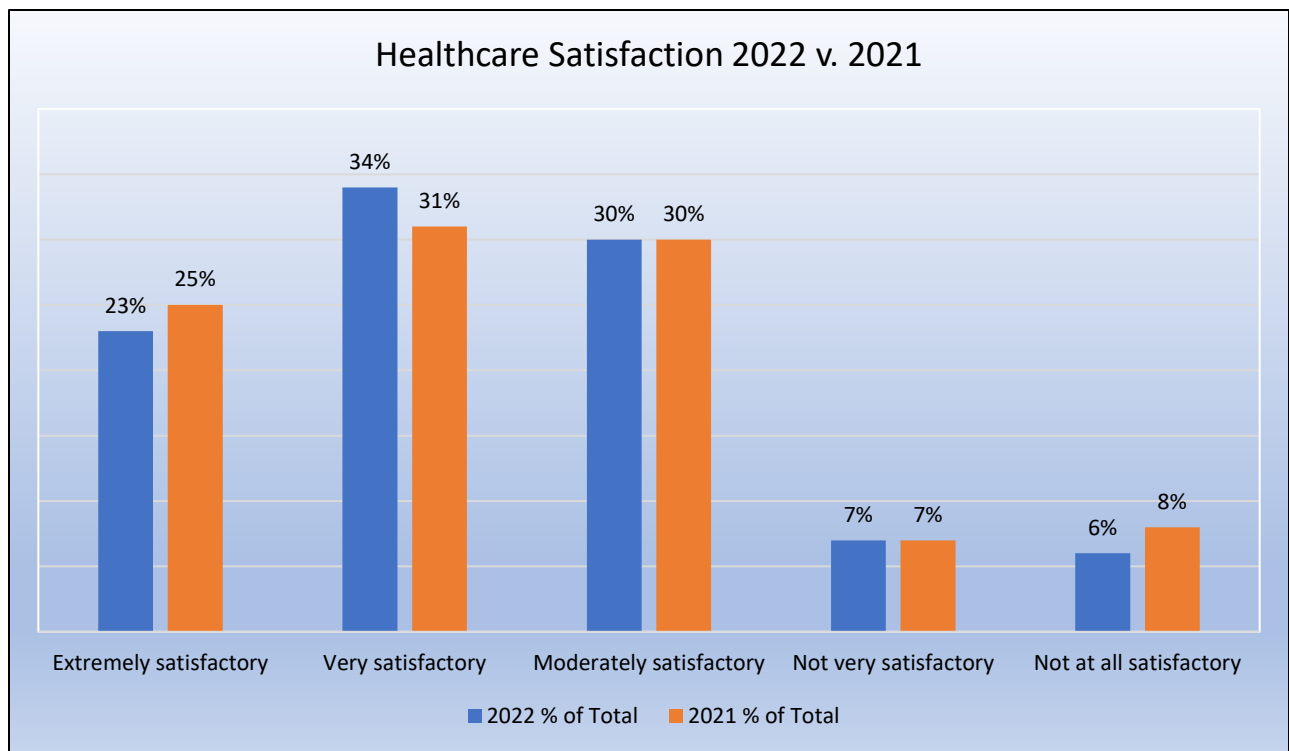
For tracking purposes, in 2021, 27 percent did not miss any work at all; 33 percent of respondents missed a month or less of work.

All but those who indicated they did not miss any work due to their injury were asked about their experience returning to work. Of the 1,143 injured workers asked this question, 559, or 49 percent, returned to work when they felt they were ready. Twenty-three percent of those who spent time off work due to an injury felt they went back to work too soon. Twenty-three percent still have not returned to work – within one percentage point of the number in 2020 and 2021.

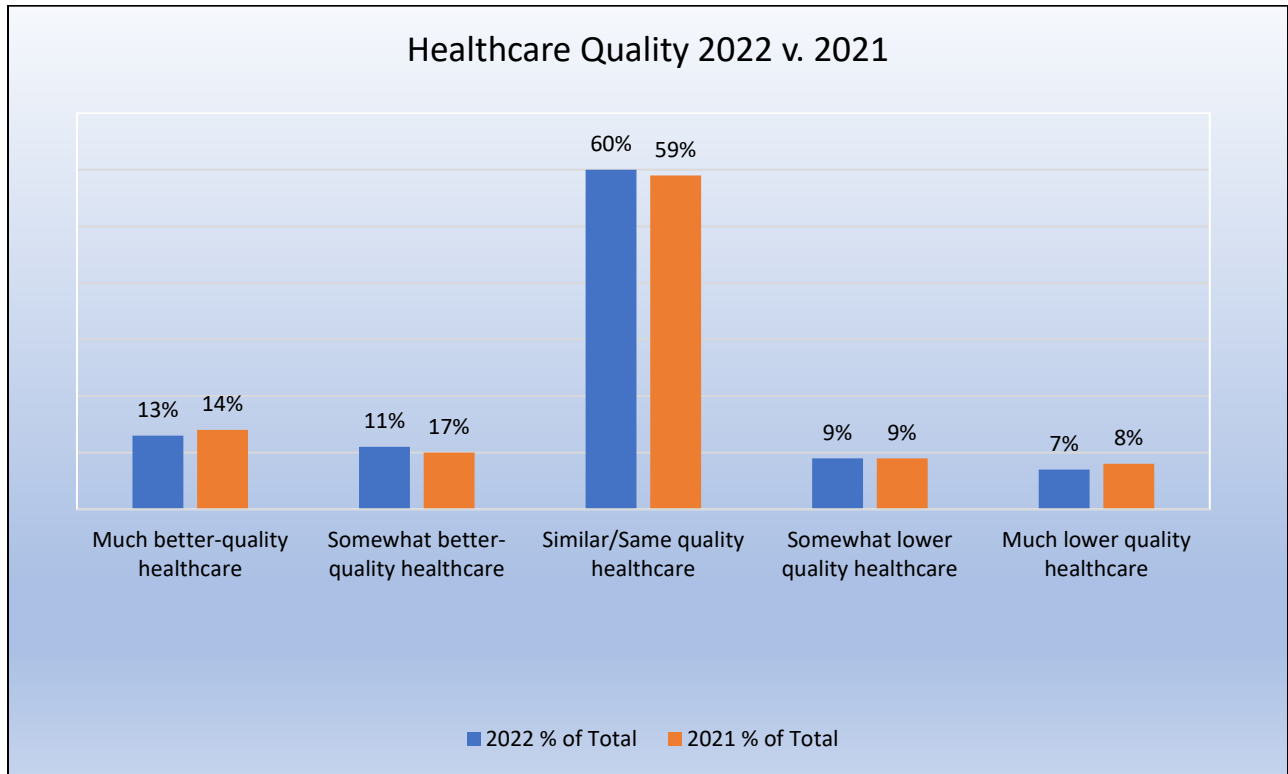
Eighty-nine percent of injured workers in 2022 did not experience a second, work-related injury. Only 11 percent overall were re-injured, and, of those who were re-injured, 72 percent were re-injured within the first six months after their initial injury.

Healthcare Satisfaction and Quality of Care

Fifty-seven percent of injured workers were very or extremely satisfied with the care they received from their treating physician or healthcare provider; this number was up slightly from 2021. Another 30 percent were moderately satisfied, while 13 percent felt their care was less than satisfactory. There was not a significant difference in these results compared to 2021.



Sixty percent of the respondents stated the quality of the healthcare they received through workers’ compensation was similar to that of their routine healthcare. Twenty-four percent (386 injured workers) felt they received somewhat or much better-quality healthcare through workers’ compensation - and 16 percent felt it was somewhat or much lower quality.



To ensure injured workers received quality care for their work-related injuries in 2022, all injured workers were asked a series of questions about their experience with the doctor who first treated them; multiple selections were permitted. Sixty-nine percent of injured workers stated their doctor explained their injury to them using understandable language (up four percentage points from 65 percent in 2021), and more than half said they were given a diagnosis (57 percent) and discussed treatments for their injuries (61 percent). All three of these categories showed a positive uptake from the 2021 data.

Timely Access to Treatment

Seventy-two percent of injured workers received treatment within the first day of injury (a total of 1,160 injured workers); 10 percent were treated after two days, eight percent after three days to one week, and slightly less than eight percent more than a week after their injury (a total of 414 injured workers).

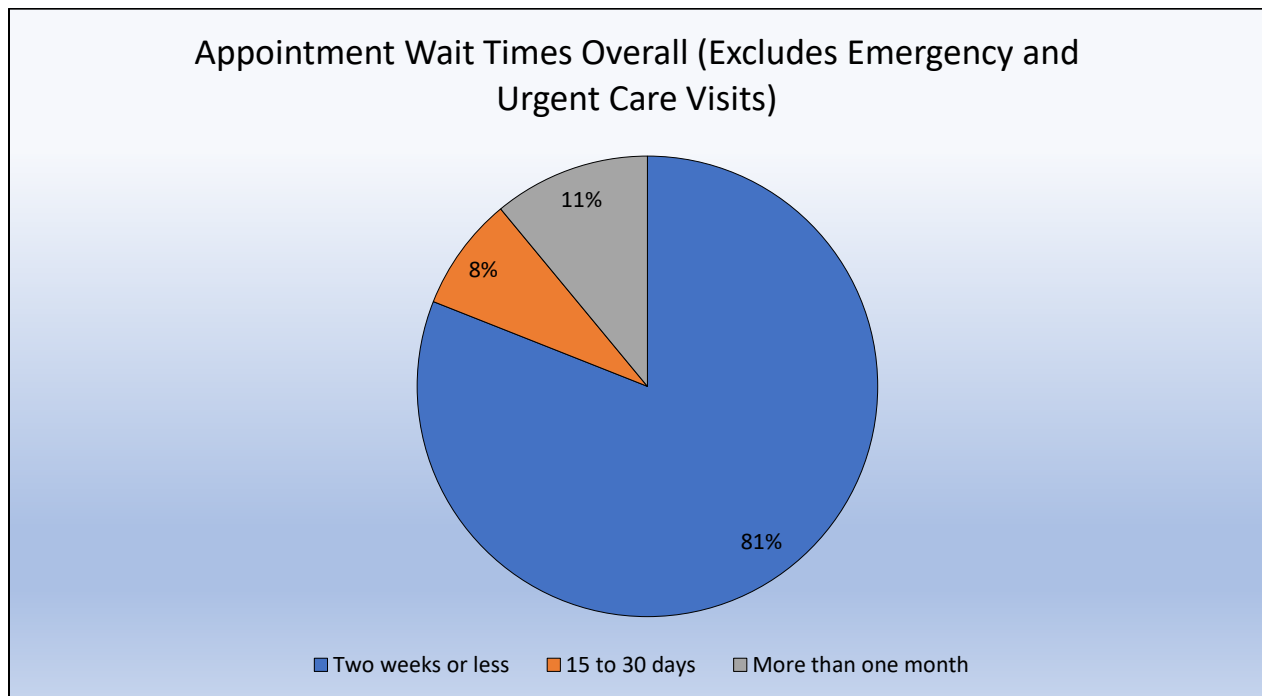
Those who were not treated by a healthcare provider within the first two days (258 injured workers, excluding those who indicated “don’t know”) were asked a follow-up question to determine why they did not seek treatment within that time; multiple selections were permitted. The plurality of respondents (52 percent - slightly less than the 53 percent from 2021) thought the injury would get better without professional medical treatment. Thirteen percent of the 258, or 33 injured workers, said the injury occurred before a weekend or holiday. Another 13 percent said they did not know which doctor or facility to contact. This number was significantly higher than in 2021 (up by 12 percent). Four percent of the 258, or 11, stated they did not know how to report their injury – this number was lower than in 2021 (down by 8.5 percent), and a small

number of injured workers reported they could not find transportation to a healthcare facility (5).

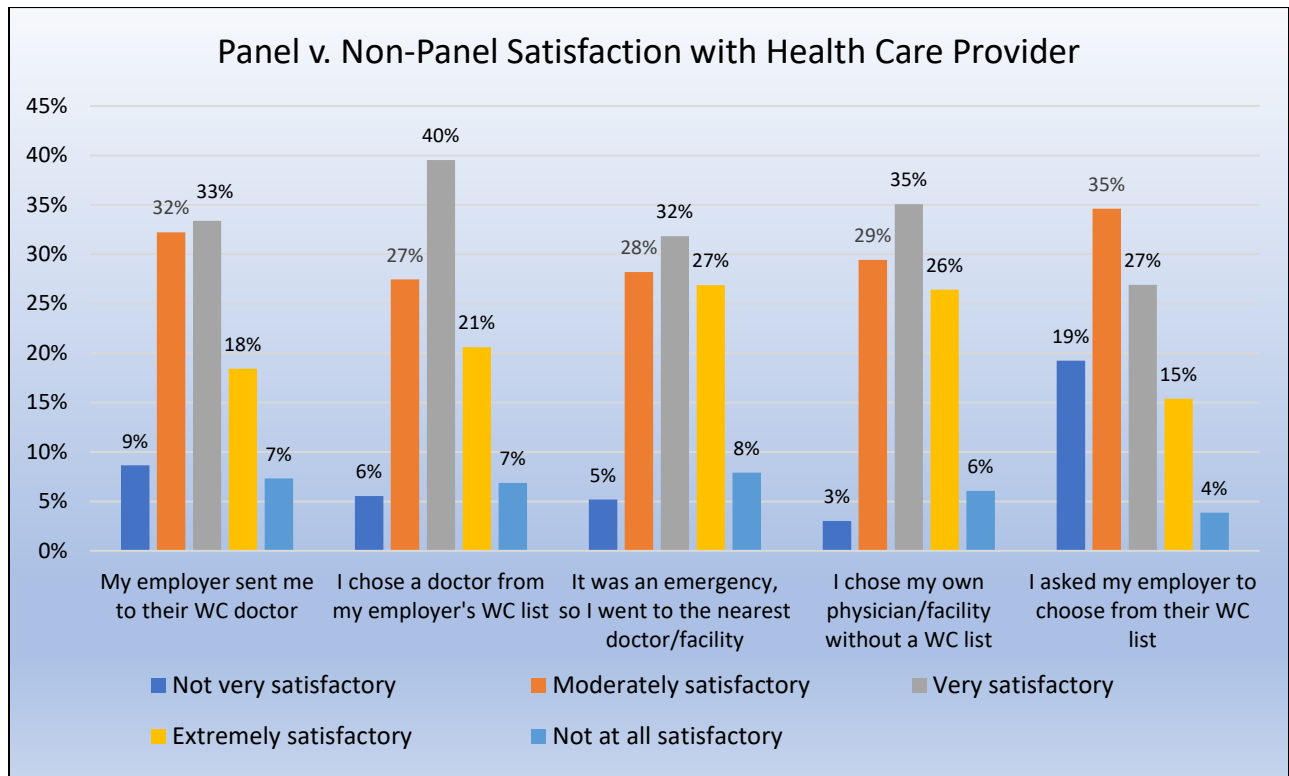
Twenty-two percent (56) of those who were not treated within the first 48 hours also indicated a reason being “something else” other than the responses listed. Most who responded “something else” indicated: had to wait for an appointment (20); employer did not inform them of their rights (9); did not realize they were injured at first (7); wanted to finish shift (2).

Injured workers were asked to recall approximately how long they waited for each type of healthcare provider they visited. For 85 percent of overall appointments, injured workers waited two weeks or less before seeing a doctor. This was up from just 71 percent in 2021 and in line with the 84 percent recorded in 2020.

By specialty, 50 percent of injured workers who visited a Neurologist or Neurosurgeon (N=73), 45 percent who visited a Pain Management Specialist (N=78), 28 percent who visited a Physical Therapist (N=111), and 28 percent who visited a Chiropractor (N=52) waited more than two weeks for an appointment. The largest number of respondents who were able to access an appointment within two weeks (other than those who visited the Emergency Room or an Urgent Care facility) visited a Family Doctor (N=136 of 143, or 95 percent, were seen within two weeks); Workers’ Compensation/Occupational Medicine Doctor (N=359 of 392, or 92percent, were seen within two weeks); Acupuncturist (N=25 of 28, or 89 percent, were seen within two weeks); and Infectious Disease Specialist (N=4 of 4, or 100 percent, were seen within two weeks – although the count is very low). Eighty-five percent of injured workers who visited a General Surgeon were also seen within two weeks.



Panel V. Non-Panel Healthcare Satisfaction



When looking at the top three box satisfaction levels, those injured workers surveyed who used a panel of physicians experienced a lower satisfaction level than those who chose a physician on their own. An impressive average of 83 percent of panel members said they were moderately, very, or extremely satisfied with the care they received, while 90 percent of injured workers who chose their own provider felt the same. The highest level of extreme satisfaction was among the non-panel patients, while the highest level of extreme satisfaction in the panel patients was among those who chose a doctor from a list of several doctors their employer uses for workers' compensation-related injuries.

Insurance Carrier Survey

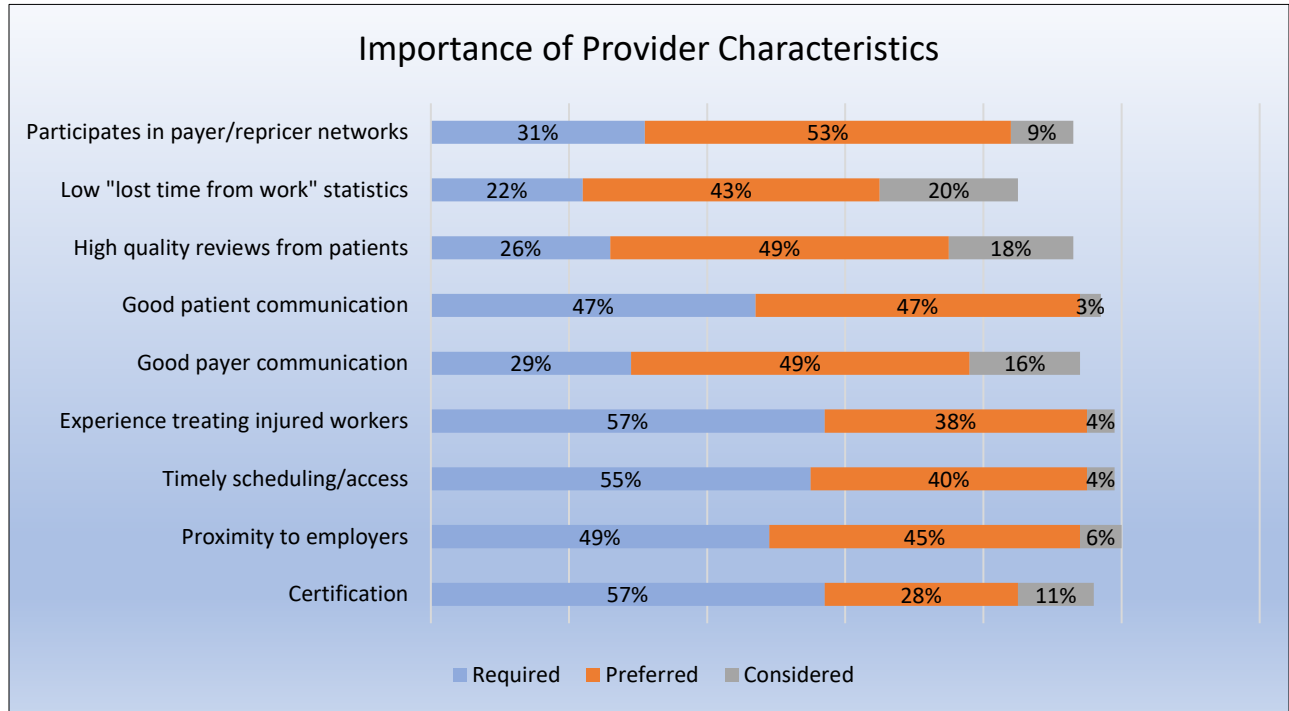
Eighty-nine percent of the respondents offered healthcare provider panels to their claimants. The top provider types targeted for panel recruitment were Orthopedic Surgeons (82 percent), Urgent Care (80 percent), and Physical, Occupational, and/or Speech Therapists (66 percent), and Chiropractors (61 percent).

Eighty-one percent of insurance carriers expressed no difficulty in securing healthcare providers for their panels, while another 19 percent shared, they do have challenges. Healthcare providers presenting the greatest challenges in recruitment and retention were Orthopedic Surgeons and Urgent Care Providers. Oral Surgeons, Neurosurgeons and Neurologists, General Surgeons, and Psychologists/Psychiatrists were also among the top few providing challenges.

	Offer Panels		Difficulty Securing	
	Number	Percent	Number	Percent
Yes	141	89%	30	19%
No	17	11%	128	81%
Total	158	100%	158	100%

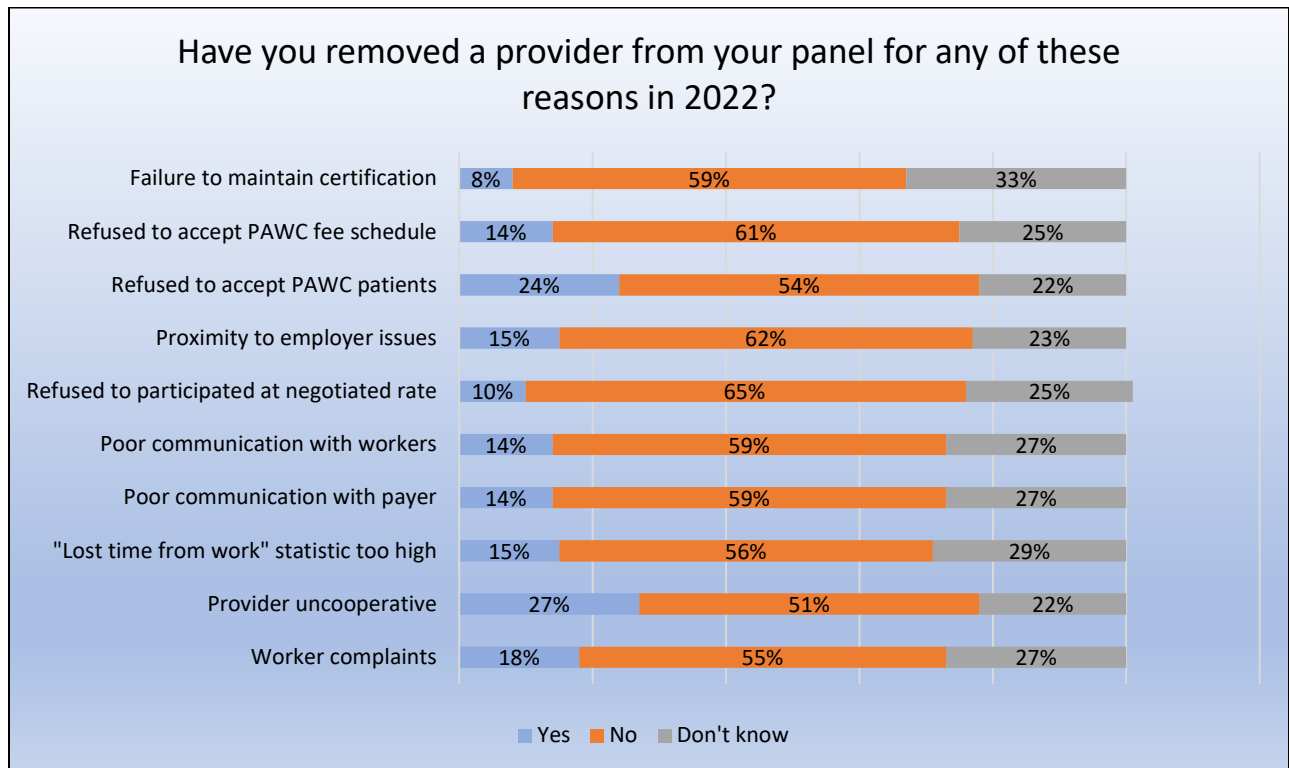
Recruitment

Insurance carriers were asked which characteristics they consider when determining whether to include a healthcare provider on their panel and whether those characteristics were *required* or *preferred*. The most frequently *required* characteristics were certification, experience treating injured workers, timely scheduling/access, and proximity to employers. The least required attributes were low “lost time from work” statistics and high-quality reviews from patients.



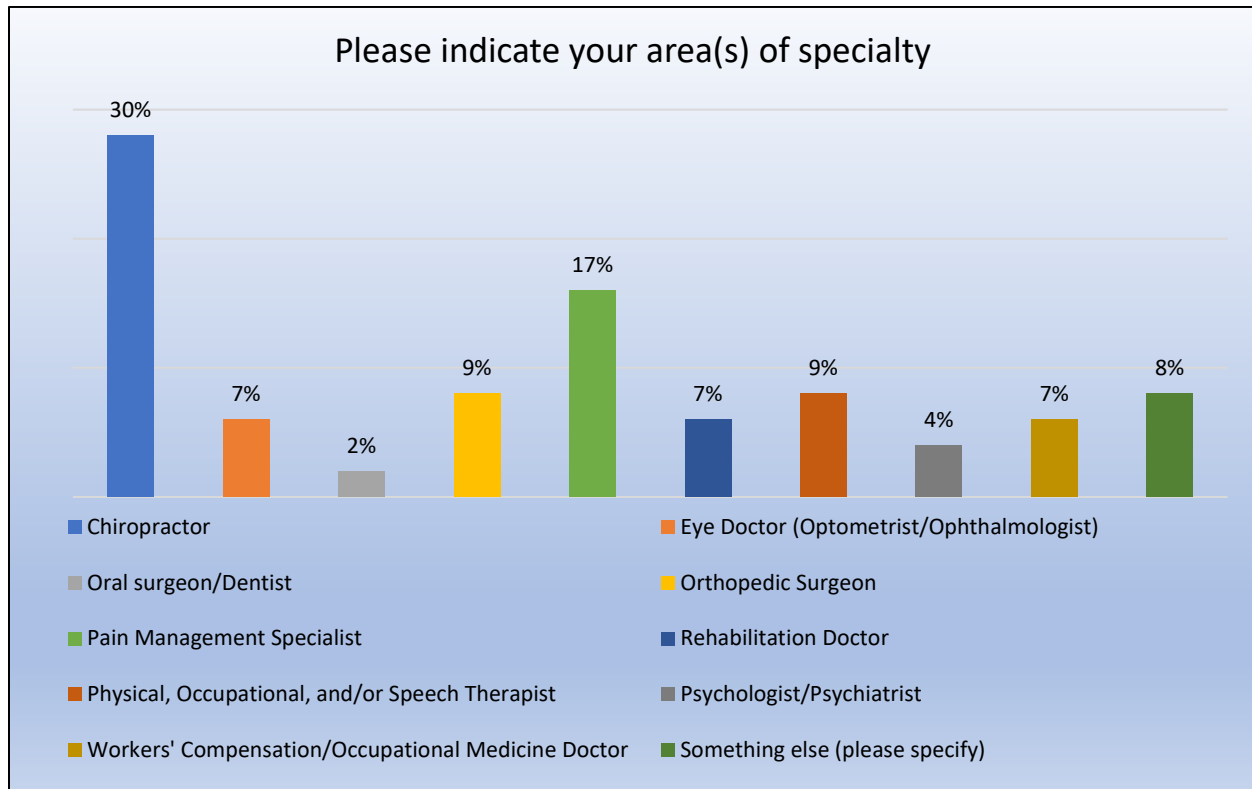
Dismissal

The most common reasons insurance carriers removed healthcare providers from a panel in 2022 included the healthcare provider was “uncooperative or provided a negative experience” (27 percent), “Refused to accept PAWC patients” (24 percent), and “injured worker complaints” (18 percent).



Healthcare Provider Survey

All healthcare providers included in the 2022 survey provided treatment or products for an injured worker within the past three years. Forty-one percent of those also served on a panel of providers in the past three years. A number of specialty areas were represented in the 2022 survey, including Chiropractors (30 percent), Pain Management specialists (17 percent), and more.

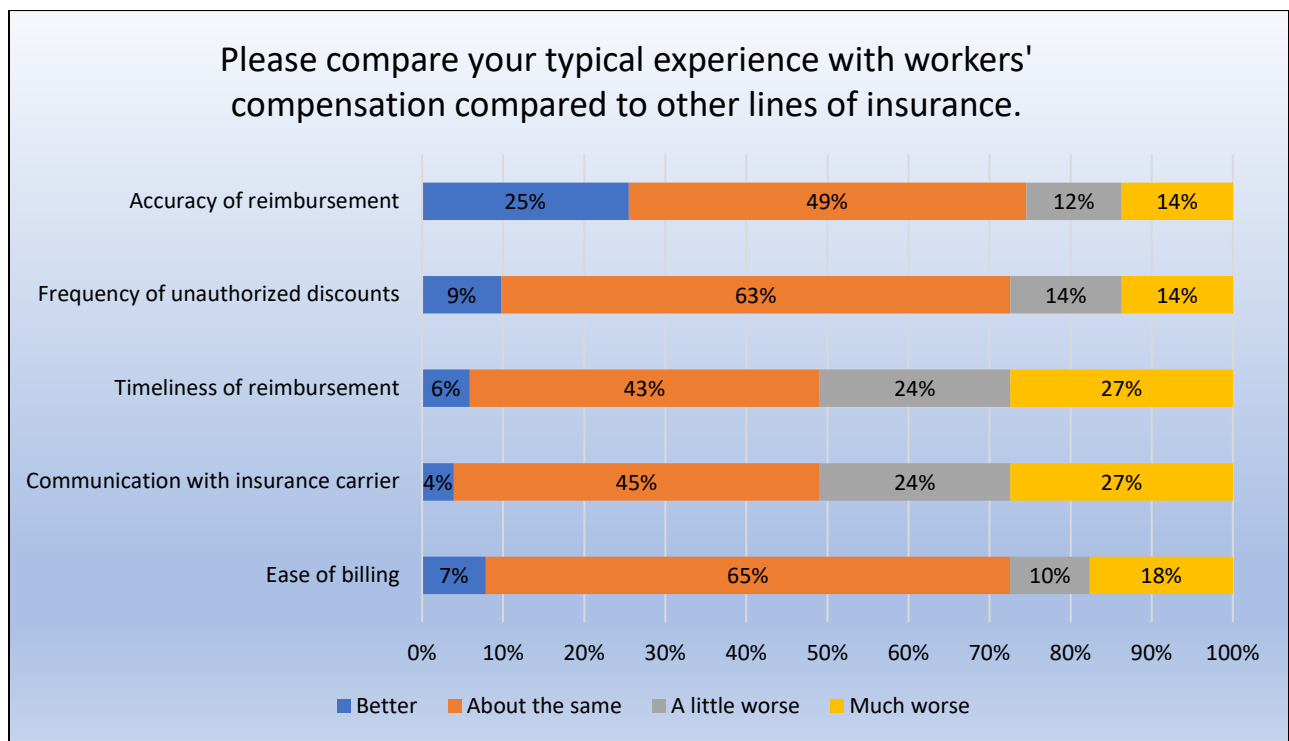


Fifty-seven percent of panel members stated the reimbursement received is “always” or “usually” the same as the Pennsylvania Workers’ Compensation fee schedule, while 14 percent expressed variations in the average reimbursement schedule, and 19 percent said reimbursement is “usually discounted by about 20 percent”. Other responses included “reimbursement is almost half” (1) and “office visits and trauma surgeries vary” (1).

Only 27 percent of the healthcare providers surveyed were invited to join a panel in the past twelve months. All fourteen providers/provider groups accepted. Thirty-seven healthcare providers indicated they had not received invitations to join a panel of providers. Seven providers/groups withdrew from a panel of providers for injured workers.

Only two percent of providers surveyed in 2022 indicated they limited the number of workers' compensation patients treated in their practice because of reduced rates associated with PPO agreements.

Most healthcare providers surveyed indicated their experience with workers' compensation insurance was better or about the same in "accuracy of reimbursement," "frequency of unauthorized discounts," and "ease of billing" compared to other lines of insurance. Categories where most healthcare providers indicated their experience was less satisfactory than other lines of insurance were "communication with insurance carrier" (51 percent) and "timeliness of reimbursement" (51 percent).



Utilization Review

The Act provides for the process of medical treatment review under Section 306(f.1) (6) of the Act. This utilization review (UR) process provides for the impartial examination of the reasonableness or necessity of medical treatment rendered to or proposed for work-related injuries and illnesses. A UR request is made by either the insurance carrier, the employer, or the injured worker to determine if the medical treatment being given by a particular healthcare provider is reasonable and necessary. Healthcare providers were asked a set of questions regarding the relationship between utilization reviews and the treatment they provide their injured worker patients.

This question only provides insight into whether a provider has ever had a UR request that caused treatment or payment delays or referrals and does not necessarily indicate that the healthcare provider's management of treatment that is the subject of a pending UR request is always the same.

Question	Yes	No
Utilization Review in Past 12 Months	78%	22%
In the past 12 months, did you have to delay treatment, a prescription or product to an injured worker while you waited for utilization review determination?	43%	57%
In the past 12 months, did you treat an injured worker, provide a prescription or product without receiving payment, because you were waiting for a utilization review determination?	51%	49%
In the past 12 months, did you have to refer an injured worker to another provider, pharmacy, or product provider because a utilization review found the treatment you were providing was unreasonable/unnecessary?	22%	78%