Disclaimer:

The material contained in this resource guide is for information and reference purposes only. Federal, state and/or local laws, or individual circumstances, may require the addition of policies, amendment of individual policies, and/or the entire Manual to meet specific situations. These materials are intended to be used only as a guide and should not be used, adopted, or modified without the advice of legal counsel.

Transitional Work Program Manual

04/19/2011
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I. INTRODUCTION

A. Mission statement

The mission of Kent State University’s transitional work program is to make every reasonable effort to provide suitable alternative work options or reasonable accommodations for a worker unable to perform his or her regular job duties as a result of a work related injury or illness.

B. What is transitional work?

The Ohio Bureau of Workers’ compensation (BWC) defines transitional work as: “A progressive and individualized program. It’s an interim step in the physical conditioning and recovery of an injured worker with restrictions. The goal is to return the injured worker to his/her original job. Transitional Work helps the employer protect the employability of the worker with restrictions, while reducing the employer’s and employee’s financial liability associated with time lost from work.”

Transitional work allows employees recovering from a work related injury or illness to resume normal work and lifestyle activities sooner within an environment that supports a gradual return to full duty.

C. Incentives for participation

1. Injured workers receive 100% of regular wages for the hours worked while assigned to suitable alternative duties. This prevents a loss of regular income to the injured worker’s family while he/she is recovering from a work related injury or illness.

2. Participating workers may also be eligible to receive services at the work-site from an experienced physical or occupational therapist during scheduled work hours. These services may include progressive conditioning, education in safe work practices, and facilitation of job modifications.

D. Worker expectations following a work-related injury

1. Injured workers must notify their supervisor immediately; unless extenuating circumstances exist. Employees are expected to immediately report work-related injuries during the work shift that the injury occurred.

2. Complete and deliver all requested paper work from the Injury Packet to the supervisor within 24 hours of the injury.

3. Cooperate fully during assignment to suitable, transitional work, based on the work restrictions specified by the attending physician or transitional work therapist.

4. Injured workers are responsible for providing written updates related to their health condition, return to work status, prescribed work restrictions, and progress within no more than 72 hours of follow-up medical provider visit.

5. Cooperate fully during all requested therapeutic activities.

6. Adhere to activity restrictions prescribed by the attending physician or transitional work therapist during all work, home and leisure activities.

7. The injured worker should notify his/her supervisor or the transitional work program coordinator immediately in the event the injured worker experiences any worsening symptoms, medical complications or difficulties while performing his/her transitional work duties.
II. PARTICIPANTS’ ROLES & FUNCTIONS

A. TWP Manager (Karen Watson, 330-672-4636)

Is accountable for the overall transitional work program and will be responsible for the areas listed below.

Communication:
1. Assist with communication of the transitional work program’s goals, benefits and objectives to employees.
2. Inform workers of their rights and responsibilities associated with program participation.
3. Inform workers of potential adverse consequences for not participating in the program.
4. Notify the Human Resources’ Director of any unresolved issues or problems associated with workers’ concerns or workers’ resistance to program participation. Actively support the development and implementation of individual accommodations and ergonomic interventions that promote safe worker performance and productivity.

Program Implementation:
1. The employer receives notice from the Physician that the employee can return to work with restrictions, so appropriate and timely referrals to the Transitional Work Program are made.
2. Meet with the injured worker and the supervisor to explain the Transitional Work Program and complete TWP Offer/Acknowledgment Letter if temporary work is available within the worker’s medically-prescribed work restrictions.
3. Meet with injured employee’s supervisor, TWP Coordinator and Transitional Work Therapist to identify suitable transitional work duties based on medically-prescribed work restrictions.
5. Serve as the liaison with the physician, supervisor, employee representatives, transitional work therapist, KSU Occupational Health and Safety Representative, MCO, BWC, and all other persons directly, or indirectly, involved in the administration of the transitional work program.
7. Initiate a WE CARE contact with the worker if the worker is given work restrictions or does not return to work following the medical visit.
8. Request a referral for transitional work therapy evaluation (if necessary) to help resolve worker reports of difficulty with assigned duties or when worker does not progress back to FULL DUTY within expected time frames (based on allowed conditions).
9. Make regular positive contacts with the injured worker and document all communications using the WE CARE Communications Log.
10. Monitor on-site services performed by the transitional work therapist or the KSU Occupational Health and Safety Representative.
11. Schedule bi-monthly case staffing with the worker and all other appropriate persons.
12. Coordinate quarterly meetings and program evaluation activities to improve the Transitional Work Program, providing outcome reports to the TWP Manager and any others associated with the program.
13. Provide recommendations regarding program extensions, modifications, or discontinuation of the program to the HR Director.
14. Meet monthly with the TWP Coordinator and KSU Occupational Health and Safety Representative to discuss program evaluation activities to improve the Transitional Work Program, and TWP Coordinator will provide outcome reports.

B. KSU Occupational Health and Safety Representative (Dennis Baden or Don Head, 330-672-2345)

The KSU Occupational Health and Safety Representative (or designee) is accountable for establishing claim flow, assisting supervisor with paperwork, investigating the accident and assisting the transitional work program coordinator with the following:

1. Assist supervisor in issuing worker a “Injury Kit” and assisting worker with filling out the requested paperwork.
2. If non-emergency medical care is required, assist supervisor in directing worker to “preferred provider” as listed in “Injury Kit”.
3. Assist supervisor in forwarding all injury documentation to the TWP Coordinator within 24-hours of incident.
4. Visit the location of injury to review Supervisor Accident Investigation Report and have supervisor, witness or employee demonstrate the mechanism of injury.
5. Maintain OSHA 300 log.
6. Monitor employees’ performance during transitional work assignments in terms of appropriateness of such assignments, need for additional training or job safety procedures, and changes in productivity.

C. TWP Coordinator (Marianne Pickering, 330-672-3107)

The TWP Coordinator (or designee) is accountable for the overall administration of the transitional work program and will be responsible for the following:

1. Process all injury documentation from the supervisor and/or Occupational Health and Safety Representative within 48 -hours of incident.
2. Receive notification from the supervisor and Occupational Health and Safety Representative immediately if the employee is unable to work or does not return to work when expected.
3. Contact health care provider through MCO when necessary to request documentation of objective exam findings, treatment rendered, services requested (on C-9) and work restrictions.
4. Confer with the TWP Manager, employee’s supervisor and KSU Occupational Health and Safety Representative or Transitional Work Therapist to identify suitable transitional work duties based on medically-prescribed work restrictions.
5. Notify BWC and MCO if the worker misses any time from work for a work-related injury.
6. Notify MCO immediately of any changes to the injured employee’s work status and request assistance from the MCO on any medical management issues that interfere with worker participation in transitional work program, using the “Request for MCO Assistance” Form.
D. Worker

The worker participating in the transitional work program will be responsible for the following:

1. Notify supervisor immediately following a work-related injury.
2. Deliver the completed First Report of Injury and Physician’s Report of Workability and any other paperwork concerning the injury to the supervisor within 24-hours from the healthcare provider.
3. A meeting will be scheduled with the employee, employee’s supervisor and the TWP Coordinator. The physician’s documentation will be utilized to determine what the employee’s limitations are and what duties are available for the employee to perform.
4. Attend all scheduled medical and therapy appointments.
5. Maintain regular program attendance.
6. Notify the TWP Coordinator or supervisor immediately about worsening symptoms, medical issues or concerns related to transitional work activities - so that appropriate modifications or accommodations can be made.
7. Provide input and actively participate in the design of his or her individualized Transitional Work Program, assisting with identification of temporary work assignments, accommodations and job modifications.
8. Provide TWP Coordinator, Transitional Work Therapist and Vocational Rehab Field Case Manager with copies of information received from attending physician related to medical progress and physical work restrictions. Which includes the Physician’s Report of Workability.
9. Perform only suitable work activities as recommended by the TWP Coordinator, physician, and/or therapist during work, home and leisure activities - while observing safe work practices.

E. Physician

The physician participating in the transitional work program will be responsible for the following:

1. Review injury circumstances with the worker and complete the Injury/Disease/Death and Treatment Info. Sections of the First Report of Injury and the Physician’s Report of Workability, providing a copy to the worker for return to the employer.
2. Approve injured worker’s participation in the transitional work program in accordance with policies governing workers who are returning to work following illnesses or accidents.
3. Assess the injured worker’s condition to provide appropriate initial treatment and indicate whether the employee can realistically return to his/her original job within 90 days of initiating transitional work.
4. Consult with the worker on medical management issues and recommend appropriate follow-up care, using University’s Preferred Community HealthCare Providers whenever possible.
5. Consult with the TWP Coordinator, work supervisor and/or therapist regarding assignment of appropriate accommodated work tasks;
6. Identify reasonable worker restrictions/limitations with input from the transitional work therapist following objective testing of functional abilities.
7. Fax all medical documentation concerning the injury to the TWP Coordinator as soon as it is available.
8. Follow any other guidelines as specified under “HealthCare Provider Guidelines”.

F. Supervisor/Manager (Department of Injured Worker)

The supervisor/manager participating in the transitional work program will be responsible for the following:

1. Issuing worker a “Injury Kit” and assisting worker with filling out the requested paperwork.
2. If non-emergency medical care is required, directing worker to “preferred provider” as listed in “Injury Kit”.
4. Forward all injury documentation to the TW Coordinator and/or Occupational Health and Safety Representative within 24-hours of incident.
5. Notify TWP Coordinator and/or Occupational Health and Safety Representative immediately if the employee is unable to work or does not return to work when expected.
6. Notify TWP Coordinator and/or Occupational Health and Safety Representative immediately when the employee returns to work with restrictions, so that appropriate and timely referrals to the Transitional Work Program are made.
7. Meet with the injured worker and the TWP Coordinator to explain the Transitional Work Program and complete TWP Offer/Acknowledgment Letter if temporary work is available within the worker’s medically-prescribed work restrictions.
8. Taking an active role in identifying transitional job tasks and modified duty options.
9. Review worker restrictions specified by Health Care Provider.
10. Assign injured worker to a suitable, temporary assignment if the worker reports back for duty with restrictions. May use one of the pre-established transitional work assignments or other suitable duties.
11. Assist the Transitional Work Therapist or Ergonomist in performing ergonomic safety assessments of jobs and in identifying reasonable accommodations and meaningful transitional work assignments for workers with restrictions.
12. Monitor employee’s progress/work status on a regular basis and cooperate with transitional work therapist to implement job modifications or changes in duties.
13. Ensuring the injured worker is utilizing safe work practices and is performing only those tasks allowed in the program.
14. Meet with the TWP Coordinator or transitional work therapist on a regular basis to identify potential obstacles to the program’s successful operation.

G. Managed Care Organization (MCO)

The MCO participating in the transitional work program is responsible for the following:

1. Designate an employer key contact person for transitional work.
2. Help to identify and determine the need for Remain at Work services.
3. Manage the medical portion of the claim, including vocational rehabilitation case management, services, medical costs and time frames.
4. Assist with obtaining prescriptions and restrictions from the physician.
5. Authorize or denying services ordered by the physician.
6. Develop case-management plan for workers participating in Remain-At-Work Program.
7. Document and implement a case-management plan that addresses return-to-work planning on all lost-time claims where the worker has not returned to work;
8. Determine the injured workers’ initial eligibility for vocational rehabilitation services;
9. Notify BWC to assist the bureau in verifying eligibility;
10. Determine the injured workers’ feasibility to benefit from vocational rehab services.
11. Submitting a First Report of Injury (FROI) to BWC if a worker is injured while participating in a rehabilitation program.
12. Identify safety/injury concerns based on the types and frequency of injuries and communicate these concerns to the employer.
13. Notify BWC’s Division of Safety & Hygiene when the employer needs safety and injury prevention services.
14. Encourage utilization of the university’s preferred providers for medical, therapy and vocational rehab case management.

H. BWC

BWC Staff members who are participating in a transitional work program will be responsible for the following:

1. Notify the MCO of rehabilitation referrals.
2. Review recommendation for rehabilitation (not a referral from an external source) with the MCO prior to making an actual referral.
3. Verify the MCO’s initial identification of an injured worker’s eligibility for vocational rehabilitation services and send eligibility letters with appeal language.
4. The Disability Management Coordinator (DMC) will review concerns about the injured worker’s feasibility for rehabilitation with the MCO from referral through case closure.
5. Determine and issue compensation payments, such as living maintenance and living maintenance wage loss.
6. The DMC will monitor and regulate surplus fund use and review the appropriateness and timeliness of rehabilitation interventions/plans and make recommendations including recommendations for case closure, to the MCO as needed.
7. The DMC will authorize (sign-off on) the following plan types: plans coordinated with the Rehabilitation Services Commission, plans developed by vocational rehabilitation case managers and employers about vocational rehabilitation.
8. Assist the MCOs in educating their internal staff, vocational rehabilitation case managers and employers about vocational rehabilitation.
9. Maintain the Alternative Dispute Resolution unit and the BWC Rehabilitation Appeals Unit to hear disputed issues and issue administrative orders.
10. Maintain the cash transfer agreement between the Ohio Rehabilitation Services Commission and BWC.
11. Maintain the Rehabilitation Regulatory Unit to perform audits on MCO files concerning vocational rehabilitation issues.
12. Partner with MCOs on 30-Day Assessments for assurance of positive claim resolution.
13. Determine the allowance of the initial claim including injuries sustained, if an injured worker is injured while in an approved vocational rehabilitation plan.

I. Transitional Work Therapist

The transitional work therapist providing on-site services to support the transitional work program will be responsible for the following:

1. Perform clinic-based Functional Capacity Evaluations or on-site Workability Injury Assessments as requested by the physician to assess the injured worker’s functional
work restrictions, readiness to participate in a transitional work program or other rehabilitation needs. Report includes a Summary Report of Workability that indicates the relationship between the worker’s job demands and his/her functional capacity to perform the job’s essential work duties.

2. Perform on-site Ergonomic Studies to assess fitness-for-duty and recommend job accommodations, modifications or transitional work assignments.

3. Develop and progress written transitional work plan in collaboration with all parties. TWP Plan should outline appropriate progression of tasks, conditioning activities, safe work practices education for the worker, program objectives, and timeframes for the injured worker to make the transition to full employment.

4. Establish a schedule of on-site sessions to provide therapeutic conditioning, worker education, and ongoing evaluation sessions for the injured worker participating in the transitional work program.

5. Serve as an advocate for the injured worker, facilitating understanding by employer representatives of injured worker’s functional work restrictions and implementation of safe work practices that are consistent with the workers’ functional capacities.

6. Periodically assess injured worker’s progress in advance of physician appointments or biweekly review meetings and communicate findings and recommendations to support medical management to the injured worker, TWP Coordinator, physician of record and any other person directly involved with the administration of the transitional work program.

7. Develop a home program appropriate for the injured worker to use that expedites recovery and symptom management.

III. POLICIES & PROCEDURES

A. Program eligibility

1. Transitional work program participation is voluntary; however, refusal to participate may impact the injured worker’s eligibility for disability benefits.

2. Benefits of active participation in a program are available to any employee who sustains an injury or illness that results in lost time or medically-documented restrictions that limit performance of essential job functions.

3. Injuries/illnesses that are eligible for a transitional work program will be classified as medical-only or lost-time claims.

4. The worker must be able to participate in the program 40 hours weekly.

B. Referral process

1. The employer or the worker’s physician may initiate referrals into the transitional work program, provided there is reasonable expectation the worker will return to his/her original job or another job identified by the employer.

2. Any worker who is released to return to work by their physician with restrictions/limitations may be directly referred into the transitional work program.

3. The TWP Coordinator will review the physician’s restrictions/limitations to determine if temporary work is available that is compatible with the worker’s prescribed work restrictions and discuss with the TWP Manager.

4. The injured worker will meet with the TWP Manager, TWP Coordinator and other involved parties to complete the TWP Offer/Acknowledgment Letter.

5. Workers that miss more than seven days of work may be referred to their physician for development of a formal rehabilitation plan.
C. Entrance requirements

1. Workers referred to a transitional work program will be evaluated to determine their readiness to safely and productively participate in the program.
2. All program participants must have the consent and approval of their physician(s). The physician must provide a Report of Workability (BWC MEDCO-14 or similar form) that releases the injured worker to return to work with restrictions.
3. When appropriate, the injured worker may be referred by the physician for an initial transitional work therapy evaluation by a licensed physical or occupational therapist to determine physical work restrictions, therapy needs and readiness to enter the program.

D. Program time frames

1. The duration of the transitional work program is expected to be 90 calendar days or less.
2. Progress toward return to the original job will be reviewed at bi-weekly (two week) intervals to determine whether the program should be continued based on medical need.
3. The program may be extended to a maximum of 120 calendar days only under extenuating circumstances, and must be certified by a medical professional such as:
   a) The nature and severity of injury warrants a longer recovery time.
   b) Employee's condition becomes aggravated during participation in the Transitional Work Program, resulting in temporarily disruption, limitation or modification of transitional work or therapy activities.
4. Worker demonstrates significant improvement in work capabilities, and attending physician and/or transitional work therapists feel confident that worker will successfully transition back to essential duties with additional participation in transitional work and therapeutic activities.

E. Accommodations/ADA compliance

1. The ADA defines a person with a disability as someone who has a documented physical or mental impairment that substantially limits one or more major life activities.
2. The Transitional Work Program supports compliance with the Americans with Disabilities Act as amended (ADA), because it supports an injured employee’s transition back to essential job functions, through the accommodation of safe, transitional work assignments and encouraging worker involvement in identification or development of accommodations that allow performance of essential job functions.
3. In the event the worker is unable to return to his/her original job (full-duty) after completing 90 days in a transitional work program, (or 120 days if a 30-day extension is deemed appropriate) the worker will be referred to the Equity & Diversity office for ADA consultation pursuant to university policies and procedures.
4. If the worker reaches maximum medical improvement prior to return to safe and productive job performance, a Functional Capacities Evaluation may be requested to determine eligibility for further employment consideration under ADA.
F. Compensation/Benefits use

1. All workers who participate in a transitional work program will be compensated at 100% of their usual rate of pay for their primary job prior to work related injury and will accrue full benefits to which they are entitled.
2. Participants will be excluded from working overtime, except when necessary to meet temporary operational needs.
3. During a worker’s participation in a transitional work program, vacations and other non-emergency days off must be minimized to facilitate the employee’s transitional work program’s success.

G. Exit requirements

The Transitional Work Program is not a permanent reassignment of job duties. An employee will no longer be eligible for transitional work if:

1. The worker no longer has work restrictions/limitations that limit his or her ability to perform full-time job duties.
2. The nature and severity of the worker’s injury indicates the worker will not be able to return to regular duties within 90 days of participating in transitional work.
3. Due to an aggravation of the worker’s condition and related symptoms, program participation is temporarily disrupted or limited.
4. Attending physician withdraws permission for the worker to participate in the transitional work program,
5. Failure by the worker or attending physician to cooperate or comply with the university’s transitional work policies,
6. Failure by the worker to make substantial progress toward resuming regular job duties within expected timeframes,
7. Employer can no longer accommodate restrictions/limitations.

H. Resolving disputes that may impact program participation

If the injured worker has any issues concerning the Transitional Work Program, (s)he may present his or her issues to the TWP Manager who will be available as needed to help mediate disputes. The injured worker is to refer to the TWP Problem Resolution Form. Other areas of disputes will be addressed as follows:

1. Claim Certification Disputes - The University will investigate the injury and determine whether to: a) Certify the claim for medical benefits only, b) Certify the claim for compensation and medical benefits, c) Certify the claim with a request for clarification of the allowed conditions, or d) Appeal the claim. If the University is concerned about any issues related to the claim, an Independent Medical Exam or a File Review may be requested. The injured worker may still be offered the opportunity to participate in the transitional work program during the appeal period within the restrictions specified by the Physician.

2. Worker Refuses to Participate - If an injured worker is deemed eligible and feasible for transitional work and refuses to participate in the program, the coordinator will obtain the worker’s and reason for not wanting to participate in the program. If appropriate, the coordinator will share the injured worker’s concerns with the worker’s physician. If the physician continues to approve the plan, the employee will be advised by registered mail that refusal to return to work may jeopardize the injured worker’s
compensation benefits. The coordinator will then submit the written plan with the physician's approval to the BWC claims services specialist and advise BWC that the injured worker has refused to return to suitable work. The BWC claims specialist will then take any necessary action. The TWP will continue to advise the TWP Manager and KSU Occupational Health and Safety Representative as needed.

3. **Physician Certifies That Employee is Unable to Work** - If the physician of record certifies that the employee is unable to work, the university will send a letter to the Physician about the Transitional Work Program. The university may request assistance from the MCO to obtain a release for return to work with restrictions.

4. **No Transitional Work Available Within Temporary Medical Restrictions** - If no transitional work is available within the work restrictions specified by the physician of record, the university may request assistance from the MCO to obtain an on-site Functional Capacities Evaluation (FCE), Ergonomic Study or Transitional Work On-Site Therapy by a physical or occupational therapist to assess impact of injury on the worker's ability to perform job requirements, and facilitate medical management.

5. **Physician Refusal to Cooperate** - If the Physician refuses to cooperate with provision of a Return to Work with work restrictions, referrals for rehabilitation services, or other medical management recommendations, then the university may refer the injured worker for an Independent Medical Evaluation or a File Review.

6. **No Realistic Employment Options Available Within Permanent Restrictions** - If the employee has no realistic employment options at the university based on permanent restrictions, the injured worker may be referred for Job Search Services or a Vocational Evaluation to assess potential for out-placement or retraining.

I. **Protection and Disclosure of Private Health Information**

Private health information will be kept confidential in accordance with requirements by the Ohio Bureau of Workers’ Compensation and Health Insurance Portability and Accountability Act (HIPAA) Privacy Rule. HIPAA provides patients with access to their medical record and limits the use and disclosure of protected health information for reasons other than treatment, payment or healthcare operations without patient authorization.

1. All confidential case documents will be maintained by human resource representatives in a secure file location.
2. Employees are encouraged to deliver all records containing private health information directly to the TWP Coordinator or another representative from the Benefits Office.
3. Any medical information delivered by the employee to a supervisor or other management representative should be placed in a sealed envelope marked “Confidential” and routed directly to the TWP Coordinator.

J. **TWP Orientation/Training Plan for Employees, Supervisors and Managers**

1. The Transitional Work Manager and Transitional Work Coordinator will be responsible for providing initial and periodic refresher training of all Employees, Supervisors and Managers. Training will be conducted for employees at a mandatory ALL STAFF in-service for each shift. The “Training Sign-in Sheet” and/or “Receipt and
Acknowledgment of Transitional Work Employees Training” will be used to verify attendance.

2. Initial training will be provided to new hires during new employee orientation.

3. The “Transitional Work Program Orientation” handout will be posted on the intranet.

4. The TWP Manual containing detailed policies and procedures is available for review in the benefits office.

5. At the time of referral into the program, TWP Coordinator or designee will contact the worker to explain in more detail about the benefits and services that may be provided through the Transitional Work Program. The “Job Offer/Acknowledgment” form will be completed at that time to verify the injured worker’s understanding of his or her duties, schedule and responsibilities.

IV. HOW THE PROGRAM OPERATES

A. What do we do when an injury occurs?

1. YOU KNOW when a work related injury occurs, often many days before your MCO.

2. Assist the employee with accurately completing the University’s and BWC's First Report of Injury (FROI)

3. Investigate the injury and determine whether to: a) Certify the claim for medical benefits only, b) Certify the claim for compensation and medical benefits, c) Certify the claim with a request for clarification of allowed conditions, or d) Appeal the claim.

NOTE: While a claim is being appealed, some services CANNOT be authorized by the MCO. Judiciously choose which claims to appeal. Slowing down services may interfere with a speedy return to work. It is usually best to accommodate the employee in a transitional work assignment while your appeal is pending. You may waive the appeal period if you certify the claim in full to expedite services.

4. Use the “Work Activity Status Log” to track multiple employees with lost-time or work restrictions.

5. Use the “WE CARE Communications Log” to document activities on individual cases.

B. How do we activate our program for lost-time or restricted duty claims?

1. If the employee is unable to work or the employee would benefit from therapy at the work-site, COMPLETE and FAX the “TWP Letter to Physician” and “Summary Report of Workability” to the Physician. Then CALL the physician’s office to verify receipt.

2. CONTACT the injured worker to inform them about the availability of transitional work assignments and review their benefits and responsibilities related to participation in your university’s transitional work program.

3. MEET with the employee to complete the “TWP Offer/Acknowledgment Letter”.

4. If the employee does not report when expected for a transitional work assignment, COMPLETE and send the “TWP Offer/Acknowledgment Letter” by certified mail to the employee.

C. On which claims should we fax “UNIVERSITY REQUEST FOR MCO ASSISTANCE”?

1. If you sent the “TWP Letter to Physician” and did not receive a response back within 48 hours.

2. If you know that your employee that is not working is NOT confined to a hospital or bed at home, and you desire the MCO to pursue Return to Work (RTW) with restrictions.
3. If you have a WORRISOME or LONG TERM claim. These are injuries and illnesses that WILL move or ALREADY moved to a lost-time status - (definition: off work for over 7 days). Examples include claimants that are slowly recovering from musculoskeletal strains; injuries/illnesses that require surgery; claimants that have a previous history of extended illnesses or multiple injuries/illnesses; FAILURE to improve or progress toward to full duty within a reasonable amount of time. These claims may benefit from therapy or vocational case management.

4. If you are or will have difficulty or concerns assigning work tasks and would like the MCO to obtain a referral from the Physician to for a Functional Capacities Evaluation (FCE), Ergonomic Study or Transitional Work-Site Therapy by a Physical or Occupational Therapist.

5. If it is unlikely that your employee will be able to resume all their original job functions and you would like the MCO to determine eligibility for vocational rehabilitation or job retention services to support ergonomic modification, job search or retraining.

D. Criteria for Assigning Work

This can be accomplished in a number of ways:

1. Return the worker to his/her regular duties with restrictions in accordance with the Physician’s restrictions (the medically-prescribed restrictions don’t limit the worker’s ability to perform his/her job).

2. Return the worker to his/her regular job with instruction to obtain assistance from other employees for any activities that would exceed medically-prescribed restrictions.

3. Modify the work-site in a manner that reduces the job demands in a manner that is consistent with the medically-prescribed restrictions. This may involve purchasing equipment, adjusting the workstation, or administrative controls such as frequent changes in positions or job rotation.

4. Allow for gradual return to work from four hours per day to full-time within 13 weeks. If this is a lost-time claim, a vocational rehab plan may be developed that includes an employer incentive contract.

5. Clearly establish what work tasks are within the worker’s functional capacities and restructure the worker’s job position to incorporate more of those duties. An increase in work tasks may occur as the worker’s restrictions/limitations decrease by doing a task more often, for a longer duration, at a higher level of intensity or by adding more tasks.

6. Transfer worker to another job assignment or temporary duties at another location that the worker is able to perform without any restrictions/limitations.

7. Assign worker as an extra employee to assist another worker or crew. For example, a plumber with work restrictions might be assigned to assist another plumber on a temporary basis with duties that are suitable based on prescribed work restrictions.

8. Trainer assistance for new employees. For example, an injured route salesman might be assigned a trainee who is able to perform any physically-demanding duties.

E. Transitional Work On-Site Therapy

A referral for transitional work therapy may be appropriate if the worker is not working, reports difficulty with assigned duties, or does not progress back to FULL DUTY within expected time frames. If the physician has released the injured worker to return to work with restrictions, then therapy should occur at the work site as much as possible. Workers authorized for transitional work therapy services will be initially evaluated to determine their readiness to safely and productively participate in the program. Workers
participating in the transitional work program may participate in the following rehabilitation services at the work-site:

1. Initial and periodic workability assessments to recommend safe work restrictions.
2. Transitional work on-site therapy activities.
3. An Ergonomic Study to determine the job’s physical demands and accommodation options, in relation to the worker's physical abilities.

If it isn’t realistic to do therapy services on-site, then authorized therapy services may occur at an off-site therapy clinic. Off-site therapy and other healthcare appointments should be scheduled outside scheduled work hours and follow established leave policies.

V. PROGRAM EVALUATION:

A. Workers’ Compensation Savings Analysis

1. Total Modified Losses for the current Claims Experience Period
2. Experience Mod from January Workers’ Compensation Report
3. Total Number of Claims (Medical-Only plus Lost-Time)
4. Number of Lost-Time Claims
5. Number of Lost-Time Claims per 100 FTE Employees
6. Number of Medical Claims
7. Number of Medical Claims per 100 FTE Employees
8. Claim Filing Lag Time in days (Date of FROI minus Date of Injury)

B. Productivity/Safety Measurements

1. Number of OSHA-recordable injuries
2. Number of OSHA-recordable injuries per 100 FTE employees
3. Number of Lost-time Days
4. Number of Lost-time Days per 100 FTE employees,
5. Number of Restricted Duty Days
6. Number of Restricted Duty Days per 100 FTE employees.

C. Worker/University Satisfaction

1. The injured worker will be encouraged to communicate any concerns or recommendations related to his or her transitional work program at any time to the TWP Manager, TWP Coordinator or Labor Representative(s).
2. The “University Satisfaction Survey” in the TWP Tool-Kit may be used at the discretion of the TWP Coordinator to communicate any concerns or recommendations for program improvement to the TWP Manager or Labor Representative(s).

VI. TRANSITIONAL WORK PROGRAM ORIENTATION HANDOUT

A. What is Transitional Work?

The Ohio Bureau of Workers’ compensation (BWC) defines transitional work as: "A progressive and individualized program. It's an interim step in the physical conditioning and recovery of a work- related injured worker with restrictions. The goal is to return the injured worker to his/her original job. Transitional Work helps the employer protect the
employability of the worker with restrictions, while reducing the employer’s and employee’s financial liability associated with time lost from work.”

Your supervisor and TWP Coordinator will work together to accommodate any necessary work restrictions and encourage your safe transition back to regular duties.

B. How will this program benefit you as an employee?
This program is being implemented to support your recovery if you have a work-related injury or illness that requires temporary work restrictions or accommodations. Your participation in this program will ensure that your family has no loss of income while you are recovering and performing a suitable transitional work assignment.

Participants in our Transitional Work Program may receive transitional work therapy services during scheduled work hours with our preferred provider, University Health Services or WORKABILITY NETWORK. A Workability physical or occupational therapist may come to our location to provide:
1. Objective assessments of worker restrictions, job demands, accommodation options.
2. Prescription and progression of suitable therapy and transitional work activities.
3. Instruction in safe work practices (pacing, body mechanics) to reduce re-injury risk.

C. Who is eligible to participate?
1. Transitional work program participation is voluntary. Benefits of active participation in a program are available to any employee who sustains a work-related injury or illness that results in lost time or medically-documented restrictions that limit performance of essential job functions.
2. Injuries/illnesses that are eligible for a transitional work program will be classified as medical-only or lost-time claims. Each classification will require different program entrance criteria and levels of service to ensure a successful return to full duty.

D. What do we expect from injured workers?
1. Notify your supervisor immediately following a work-related injury and promptly complete and return the Accident/Injury Forms.
2. Deliver physician recommendations for work restrictions or follow-up care to the TWP Coordinator in the Benefits Office within 48 hours.
3. Cooperate fully in performing all recommended work and treatment activities.

E. How will my private health information be protected and/or disclosed?
Private health information will be kept confidential in accordance with requirements by the Ohio Bureau of Workers’ Compensation and Health Insurance Portability and Accountability Act (HIPAA) Privacy Rule. HIPAA provides patients with access to their medical record and limits the use and disclosure of protected health information for reasons other than treatment, payment or healthcare operations without patient authorization.
VII. TWP Documents (Forms, Sample Letters & Hand-Outs)

A. Training Documents
   1. TWP Orientation Training Sign-In Sheet
   2. Receipt and Acknowledgment of Transitional Work Employee Training Form
   3. Orientation Handout

B. Administrative Documents
   1. Work Activity Status Log
   2. WE CARE Communications Log
   3. Guidelines for Work-Site Therapy (REDO)
   4. University Request for MCO Assistance
   5. University Satisfaction Survey
   6. Problem Resolution Form
   7. TPA/MCO/BWC Guide (REDO)
   8. TWP Physicians Letter
   9. Employee Agreement for Participation Temporary TWP
   10. Health Care Provider Guide
   11. TWP Flow Charts for Medical-Only & Lost Time Claims

C. Physicians Documents
   1. Healthcare Provider Guidelines
   2. TWP Letter to Attending Physician

D. TWP Injured Worker TWP Participant Packet
   1. BWC Medco-14 Summary Report of Workability
   2. University Satisfaction Survey (Employee)
   3. Participant Agreement Form
   4. Employee Injured Worker Checklist

E. Injury Kit (Obtained from Benefits)
   1. Employee Report of Injury or Occupational Illness (HR Forms Library)
   2. BWC Medco-14 Summary Report of Workability
   3. FROI-1 First Report of Injury