

# S@W/R2W Stay-at-Work/Return-to-Work POLICY COLLABORATIVE POLICY COLLABORATIVE

## **Job Loss After Injury or Illness: Making Stakeholders More Accountable**

When a person's ability to work is threatened by a medical condition, three main stakeholders in addition to the worker can affect the outcome: his or her physician, employer, and benefits administrator.

Every year, millions of workers across the nation lose their jobs or leave the workforce entirely after a medical condition compromises their ability to work. In many cases, these unfortunate outcomes might have been prevented. Keeping individuals in the workforce protects their health and well-being, their quality of life, and their standard of living. It extends the time in which they make a productive contribution to society, and helps them avoid dependence on Social Security Disability Insurance; Medicare; and other federal, state, and local programs.

When a person's ability to work is threatened by a medical condition, three main stakeholders in addition to the worker can affect the outcome: his or her physician, employer, and benefits administrator. But professionals in the health care, employment, and insurance sectors are not doing all that they could to help workers keep their jobs; nor are they held accountable for doing so. They share neither a definition of a good outcome to work toward; nor an understanding of each other's roles, capabilities, and responsibilities; nor a tradition of collaboration and coordination.

The three broad recommendations below and the concrete steps that the federal government can take to implement them are intended to keep more people at work after injury or illness. Jennifer Christian of Webility Corporation developed the recommendations with input from numerous experts in occupational health, disability benefits and workers' compensation programs, and health insurance.

#### RECOMMENDATIONS

- **1.** Make the preservation or restoration of work and full participation in life priority outcomes, as they are important indicators of the value of medical care and other health-related services.
- 2. Develop formal mechanisms for tracking accountability for these outcomes among the professionals who respond when a worker's life is disrupted by a medical condition.
- **3.** Design and implement strategies that give teeth to policies or regulations that would establish accountability, disrupt the status quo, and deliver transformational social change.

### CONCRETE ACTIONS FOR THE FEDERAL GOVERNMENT

- 1. To capture and consolidate the data needed to create credible metrics and make accountability real, the federal government should consider:
  - Designating an agency to expedite the creation and adoption of metrics that will make it possible for stakeholders to both define and allocate accountability for preventable impairment, loss of function, and job loss; these metrics will also make it easier for stakeholders to understand each other and to collaborate with respect to their responsibilities and contributions.

- Requiring that outcome measures in federally funded research include, when applicable, the test subjects' ability to participate fully in life and stay at work or return to work (SAW/RTW).
- Requiring job losses caused by medical problems to be tracked and reported to the Department of Labor (DOL), which will then make statistics on these events public.
- **2.** To provide the leadership in public health, health care, and social policy that will be required to disrupt the status quo and deliver transformational social change, the federal government should consider:
  - Modifying the nation's health agenda by redefining "healthy" such that it includes full participation in work and society.
  - Convening a multi-stakeholder panel of experts to develop a strategic plan that clearly specifies how to effectively disrupt the status quo and deliver transformational social change.
  - Developing and widely disseminating a set of key documents that will serve as a persuasive and evidence-informed foundation for effective action.
  - Launching a strategic campaign that informs, and shifts the beliefs of, stakeholders who are in a position to influence SAW/RTW outcomes.
  - Revising federal research and funding priorities in order to bridge the critical gaps in our understanding of how to consistently achieve better functional and work outcomes.
- **3**. To encourage key stakeholders to work toward positive SAW/RTW outcomes, the federal government should consider the following incentives and models for change:

- · Pay or otherwise reward physicians and other health care providers for specific efforts they make to restore their patients' ability to function in everyday life, and for the time and expertise they devote to forwarding the SAW/RTW process.
- Explore the possibility of funding SAW/ RTW services for workers who lack access to them by fining employers who do not attempt to retain employees with medical challenges or to assist them in finding new jobs.
- Create a certification program—analogous to OSHA's Voluntary Protection Programthat recognizes employers whose SAW/ RTW programs are exemplary.
- Design a model for a health plan that includes SAW/RTW services.
- Create model curricula for physicians in training, along with incentives for educators to use the curricula.
- Create an interagency collaborative whose mission is to improve outcomes for federal workers.

To successfully implement the three main recommendations, a lead federal agency should kick off, coordinate, and continue to drive an ongoing, action-oriented, multi-sector initiative. Engaging private-sector organizations as well as federal and state agencies in an enduring collaboration is essential. Natural candidates for this leadership role include the Office of Disability Employment Policy and the Employment and Training Administration in DOL. But DOL cannot be successful on its own. Active engagement by other federal agencies, in particular several units within the Department of Health & Human Services and the Office of Management and Budget, would be essential for the success of this ambitious effort.

For more information about the Stay-at-Work/Return-to-Work Policy Collaborative please contact R2WPolicy@mathematica-mpr.com.

#### Reference

Christian, Jennifer. "Establishing Accountability to Reduce Job Loss After Injury or Illness." Final report submitted to the U.S. Department of Labor, Office of Disability Employment Policy. Washington, DC: Mathematica Policy Research, October 2015.

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