

Managed care solutions

When a workplace injury occurs, there are multiple requirements and steps for employers to complete. It can be overwhelming. That's why we believe in the power of one – one technology platform, one team and one goal – to help streamline the process and improve outcomes for injured employees.

Connected care

Clinical consultation/nurse triage

Our clinical consultation/nurse triage solution helps employees receive safe, appropriate care at the time of injury. Our registered nurses make a personal connection, answering questions, offering reassurance, and providing injury evaluation and care instructions. Our nurses use industry-proven guidelines to recommend first aid/self-care, telemedicine or in-person care with a local provider associated with the highest quality treatment outcomes

Case management

Our telephonic case management program ensures treatments are medically appropriate, necessary and successful at moving injured employees down the path of recovery. Our experienced nurse case managers are highly skilled in monitoring and consulting to guide occupational injury care and they access guidelines to manage treatment utilization. We also offer field case management services for more severe or complex injuries.

Surgery nurse services

Our surgery nurse solution helps injured employees facing surgery to be better prepared physically and mentally, and to confidently steer themselves toward a faster recovery. A specialized surgery nurse engages the employee with a pre-habilitation/rehabilitation model designed to prepare their mind and body before surgery to improve the outcome and recovery.

Crisis care

Our crisis care program provides 24/7 resources to assist employers and claims professionals with violent workplace events, catastrophic injuries and complex clinical situations. One call to our crisis care hotline provides access to a crisis care nurse, who will deploy the appropriate resources including mental health experts, field case managers, physician advisors and medical equipment experts.

Utilization review

Our utilization review nurses examine treatment requests, where allowable by law, and can validate or negotiate the necessity, setting frequency, intensity and duration of care. Treatment requests are reviewed before the onset of care, which helps lower medical expenses. If the treatment falls outside of the medical guidelines, the nurse will engage a physician advisor who will consult with the treating provider on alternative strategies.

29%

lower average incurred costs for claims that include our clinical consultation/nurse triage services

14%

lower average medical incurred costs with our telephonic case management services

38%

of prescriptions requiring UR were negotiated, denied or withdrawn through our pharmacy program

14%

lower average physical therapy costs for claims that include our surgery nurse program

62%

average gross savings on bills processed through our medical bill review services

53%

average reduction in lost time when injured employees are treated by top-performing providers in our provider benchmarking program

Physician advisor/peer review

Our physician advisors are called in to support key decisions that can significantly impact a claim. They enhance the utilization review process and provide medical and pharmaceutical expertise to ensure clients and their injured employees stay on the right path to achieve the best possible outcomes. Integrating in-house advisors and trusted network partners, we offer the advantages of a streamlined workflow, consistent procedures and built-in system options for easy referrals.

Return to work management

We create customized return to work programs to meet each client's needs. Working together with treating providers, our return to work specialists help employers understand restrictions, durations and modified or light duty jobs. For employers that are unable to offer modified duty positions, we also have a transitional work placement program that provides injured employees with temporary work at a not-for-profit organization in their community. The program helps them stay active during their recovery and employers see a reduction in lost time and medical costs.

Behavioral health services

Our behavioral health specialists serve as patient advocates and provide the expert assistance needed to identify and address psychosocial barriers to ease the return to work process. They can also help identify additional problems within a claim that need to be addressed. Behavioral health can make an impact on claims involving trauma, mass casualty and catastrophic incidents, assaults and robberies, or when psychosocial flags are noted such as drug abuse, stress or fear of returning to work.

Prescription drug management

Our pharmacy benefit management network combines an automated claim-specific formulary, utilization edits and aggressive workers' compensation discounts. Our team of nurses, pharmacists and physicians also provides prescription drug management at the point of sale with pharmacy utilization review, and our complex pharmacy management service helps control the use of opioids and other prescriptions in long-term claims.

Medical bill review and network solutions

Our expert bill review and provider network management teams, backed by customized technology, allow us to achieve the highest possible savings for clients. Our program includes access to high quality medical, pharmacy and specialty networks, and ensures

the best care and cost reductions. Our large ancillary care network also helps employers save on durable medical equipment, home health, diagnostic imaging, translation and language services, and transportation and travel support.

Provider benchmarking

Sedgwick's five-star provider benchmarking program helps us build superior networks to ensure quality care for injured employees and drive positive results for clients. When possible, employees are matched with local providers with the highest scores.

Advanced technology

Our proprietary claims management system is the foundation for our approach to better care and outcomes. The system's connectivity allows our examiners and nurses to quickly exchange information.

Our viaOne suite of tools provides clients with access to real-time information in our claims system. Through a secure website, they can track and analyze claims information, create home pages with graphical dashboards, run standard and ad hoc reports, and set system alerts. With mySedgwick, our self-service tool, clients can see which employees are off work at any time. Employees can view claim details, confirm return to work dates, securely interact with their claims examiner, request a call from their assigned nurse case manager, report new claims, sign up for direct deposit, search for a medical provider specializing in occupational injuries in select states, securely upload claim or medical documents, complete medical authorization forms and more.

Caring counts

Our integrated managed care solutions streamline the process and help injured employees return to work and life as quickly and safely as possible. Supportive, collaborative care focused on the individual is good for employees' well-being and has proven to be effective in improving outcomes. We've seen the results of our integrated approach and we believe you will, too.

To learn more about our managed care solutions, contact:

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*To learn more about our integrated and customized solutions, visit **SEDGWICK.COM***
