

Technology

To successfully manage costs and productivity, employers need access to current data on all workers' compensation, disability, absence, liability and property claims, accommodations, updates on employees who are away from work, claims that are exceeding thresholds and more.

Many employers have discovered that while the data is available, without the right partner, it can be difficult to get to the actionable information needed to drive improvements and confirm successful claims management efforts. That leads to the second thing employer's need – a truly integrated claims system that uses leading-edge technology to provide a complete picture of their program.

With 1,500 information technology professionals, our capabilities and expertise are rivaled by few in the industry. Far too many businesses have learned the hard way that while many vendors profess to have the ability to create customized programs around each client's needs, few can actually deliver. We can. Sedgwick offers a fully integrated, multiline system and effective interfaces for virtually any kind of claims program. And we have been delivering superior technology solutions to some of the nation's premier employers for more than 50 years.

What's more, as an independent third party administrator (TPA), we can ensure that profits and resources are re-invested to continuously improve and upgrade our systems to meet our customers' needs.

We strive to ensure our technology works to support our clients' policies and procedures.

Comprehensive technology solutions

We help our clients create optimal programs using a full suite of proprietary claims technology. Our system:

- Fully integrates with employers' existing human resources (HR), payroll and claim intake systems
- Offers configurable options
- Is flexible to ensure it can meet employers' needs
- Boasts online applications that are simple to learn and easy to use

Plus, Sedgwick's technology offers employers the option of operating in a truly paperless environment for workers' compensation, disability and liability claims. All elements of a claim file – including correspondence, images and recorded statements – are available electronically 24 hours a day. And there is no need to switch from one system to another; everything is at your fingertips in one central location.

Our team of technology experts will work with you throughout the implementation phase to understand your business needs, develop solutions to those exact specifications and conduct full integration testing before your program goes live. You will even have your own technology manager – in addition to your dedicated implementation and account managers – to oversee every aspect of the development process.

System features

Sedgwick's goal is to ensure that your employees have the tools and resources they need to accomplish their goals efficiently and effectively. Each of our modules provides different views and capabilities to give every member of the team the necessary information to do their jobs.

Our user-driven, state-of-the-art claims platform serves as the foundation for our risk and absence management programs. The system is designed to support and enhance the workflow of examiners and it includes the most flexible, efficient and user-friendly claims management technology in the industry today. Plus, it offers outbound interfaces for virtually any risk management information system and payroll system on the market as well as custom intake solutions. With our system, users are assured of optimal efficiencies and minimal redundancies.

Key features for examiners include:

- Smart panel functionality – This feature makes information about jurisdictional requirements, benefits and other client-specific data readily available to our examiners and generates automated outbound correspondence for the client, state or carrier relevant to each claim.
- Real-time connectivity to our managed care software application – This allows claims examiners and nurse case managers to exchange key information supporting integrated claims and healthcare management.
- Time tracking screen – This tracks all of the different work status episodes, including off work due to injury, return to modified duty, or return to full duty. The system also provides validations to complement the traditional approach of managing time through payments by allowing users to capture episodes of restrictions and waiting periods that may not be associated with a payment.
- Embedded duration guidelines – Official Disability Guidelines, driven by mandatory ICD codes, give users a breakout of lost day expectations in order to establish a more realistic return to work outlook with the employer and injured employee based on the medical provider's recommendations. All ICD codes include effective dates and our system can track up to five comorbidities simultaneously.
- Interactive claims exception report – This is a fully automated enhancement that runs a predetermined set of criteria and best practices nightly to help drive efficiency and results. For example, if a client wants to flag claims before they reach a certain threshold, the examiner is immediately alerted. These flags are proactive and notify examiners of approaching thresholds.

Push technology option

We offer push technology for our clients' employees with workers' compensation and disability claims and leave of absence cases. Employees can choose to receive emails or text messages with claim status updates, payment notifications and proactive reminders. Sedgwick is the first TPA in the industry to provide this level of automated communications. With our push technology system, our clients' employees know exactly when claim payments are made and when benefit checks are issued – and it offers a convenient way to keep them updated during the process.

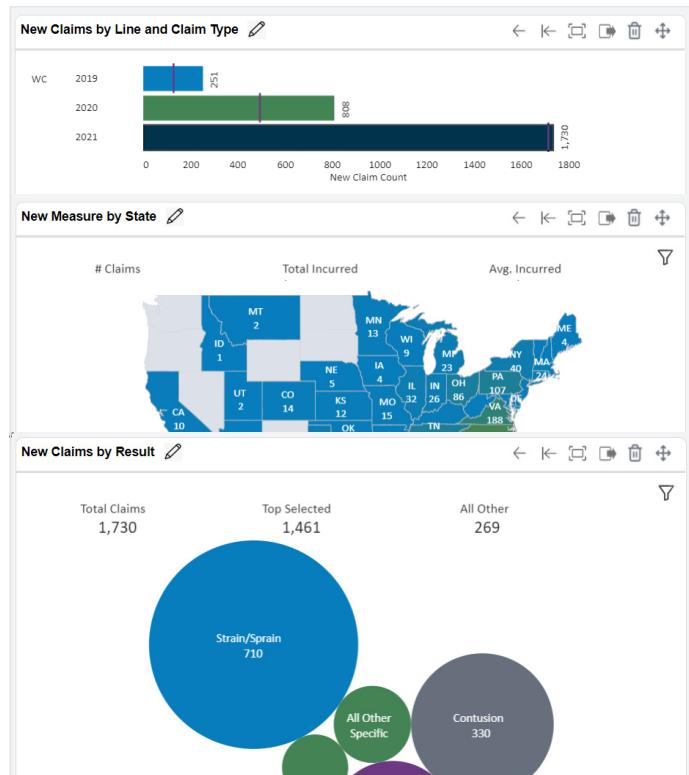
viaOne

Sedgwick's viaOne suite of tools provides customers and their employees with access to real-time information in our claims management system. Through a secure website, clients can track and analyze their claims and absence information, create home pages with graphical dashboards and key metrics, easily look up and view claims, run standard and ad hoc reports, set their own system alerts and much more.

Dashboards

In viaOne, clients can select from a catalog of tables, charts and graphs to build meaningful dashboards and enhance the experience with their data. They have quick access to key metrics, interactive data discovery visualization and more. Users determine the path and depth of data they see, and they can toggle from the aggregate, graphical view down to the individual claim level.

Examples:

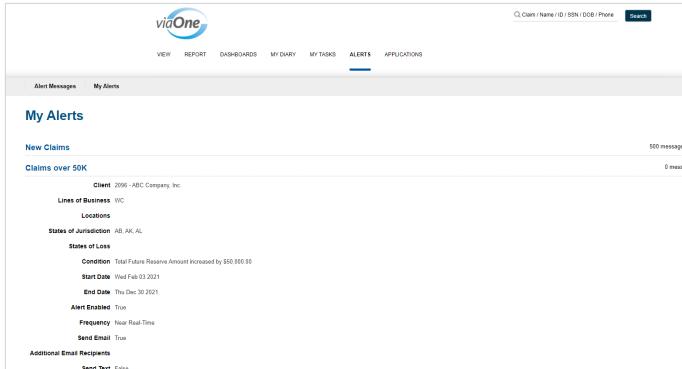


Alerts module

This module allows users to select notification conditions so events meeting certain criteria can be easily and consistently communicated with near real-time alerts and aggregated daily notifications. Key benefits:

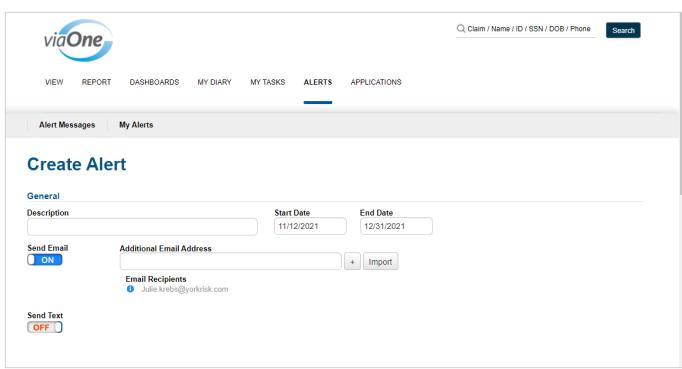
- Alerts can be set by type of claim, for a specified period of time away from work, by activity such as a reserve change or claim status update, and by a dollar threshold
- Security-based alerts restrict the claims returned in the alert results to only those granted through the user's viaOne security profile
- Users can quickly create notifications across multiple lines of business within a single alert
- Alert notification emails with various claim attributes such as before and after values provide recipients with actionable information
- A disable feature gives users the ability to suspend an alert for a period of time without needing to delete it
- Support is offered for critical claim alert conditions, including cause codes, nature/result codes, part/target codes and examiner changes

Examples:



This screenshot shows the 'My Alerts' section of the viaOne interface. It displays a list of 'New Claims' with 500 messages. Below the list are several alert configuration fields:

- Claims over 50K:** Client: 2096 - ABC Company, Inc. Lines of Business: WC Locations: State of Jurisdiction: AB, AK, AL States of Loss: Condition: Total Future Reserve Amount Increased by \$50,000.00 Start Date: Wed Feb 03 2021 End Date: Thu Dec 30 2021
- Alert Enabled:** True
- Frequency:** New Real-Time
- Send Email:** True
- Additional Email Recipients:** Julie.Krebs@yorkrisk.com
- Send Text:** False

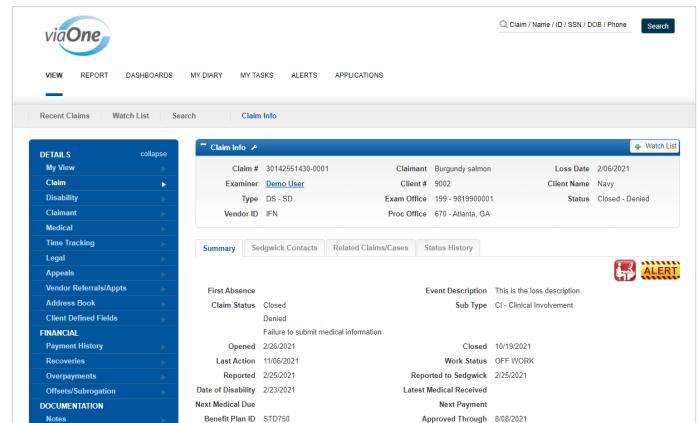


This screenshot shows the 'Create Alert' form. The 'General' tab is selected, displaying fields for:

- Description:** [Input field]
- Start Date:** 11/12/2021
- End Date:** 12/31/2021
- Send Email:**
- Additional Email Address:** [Input field] + Import
- Email Recipients:** Julie.Krebs@yorkrisk.com
- Send Text:**

View module

Users can view all claim correspondence in an electronic format (i.e. document imaging), and conveniently add claims of interest to a user-defined Watch List, view specific claims for detailed, real-time information including notes, payments, reserves and absence/work status data via easy-to-use tabs and screens. Users have full visibility into every aspect of managed care – from triage and intake to clinical services and bill review – and they can even add notes and diaries to the permanent claim file. A summary screen with icons gives a visual overview of claims. Example below:



This screenshot shows a detailed view of a claim. The 'Claim Info' tab is active, displaying the following information:

Claim #	30142551430-0001	Claimant	Burgundy salmon	Loss Date	2/06/2021
Examiner	Demo User	Client #	9002	Client Name	Navy
Type	DS - SD	Exam Office	199 - 9819900001	Status	Closed - Denied
Vendor ID	IFN	Proc Office	670 - Atlanta, GA		

 Below the main table are four tabs: Summary, Sedgwick Contacts, Related Claims/Cases, and Status History. The 'Summary' tab is selected, showing a brief description of the claim: 'This is the loss description' and 'Sub Type: CI - Clinical involvement'. There is also an 'ALERT' icon with a warning sign.

Reports module

With this feature, users can run standard reports, create custom data extracts, set up recurring reports and send completed reports to designated recipients via email. They can customize standard reports by selecting items to include or exclude such as claims status, claim type (indemnity or medical), ICD code or the state where the loss occurred. Other reports are available that provide a dashboard view of managed care outcomes and access to supporting details.

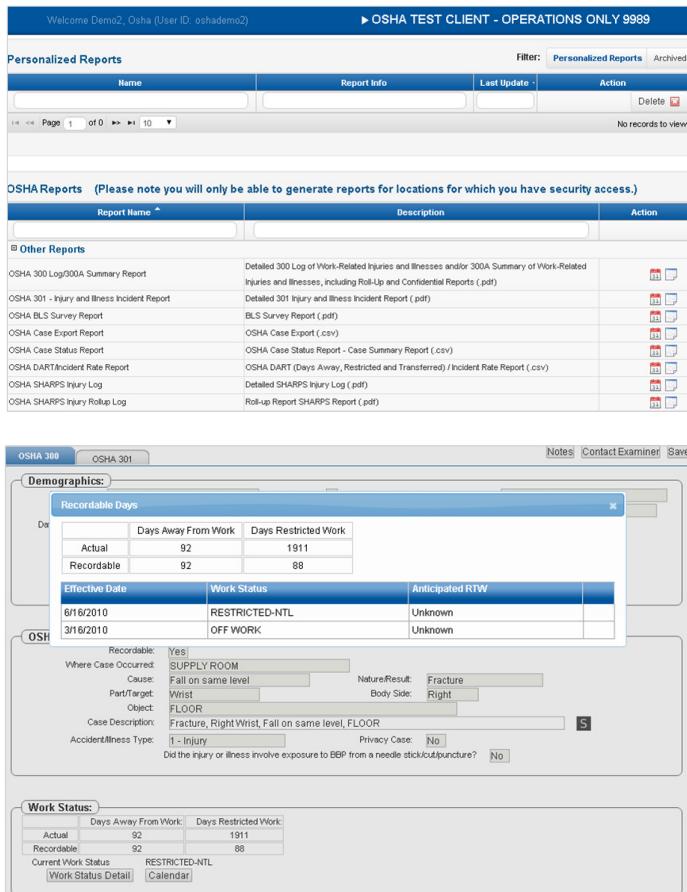
With viaOne, users also have access to an analytical platform to easily identify and visualize claims and managed care performance trends and outcomes. Reports created can show data at multiple levels from summary trending to fine data elements. viaOne advanced analytics allows users to create dynamic loss triangle reports with the ability to filter and drill down into more granular views such as specific states or divisions. The loss triangle reports also offer development factors to help clients better understand claim and loss trends. They show calculated factors by measurement and development periods. Our innovative, user-friendly reporting tool provides access to claims and managed care reports all in one place. No other third party administrator offers this level of reporting.

We work to ensure our viaOne system is safe, secure, and accessible whenever and wherever it is needed, including on mobile devices and tablets.

OSHA module

This module helps employers meet workers' compensation requirements under the Occupational Safety and Health Administration (OSHA). The current administration is emphasizing strict compliance and heavy fines to ensure organizations do all they can to maintain safe working environments. Sedgwick provides the only OSHA solution in the market that is fully integrated with a claims system. It documents days away from work and restricted duty days that feed into the viaOne OSHA tool nightly. With viaOne OSHA, we take the burden of recordkeeping off of our customers and their employees. Our solution promotes accuracy and efficiency, while making the OSHA recordkeeping process easier and quicker.

Examples:



The screenshots illustrate the OSHA module's functionality:

- Personalized Reports:** A grid view showing report names, descriptions, and actions. It includes a filter for "Personalized Reports" and a link to "Archived". A note at the bottom states: "OSHA Reports (Please note you will only be able to generate reports for locations for which you have security access.)"
- OSHA Reports:** A detailed list of OSHA reports with download icons. Examples include "OSHA 300 Log/300A Summary Report", "OSHA 301 - Injury and Illness Incident Report", and "OSHA BLS Survey Report".
- OSHA 300:** An example of a claim entry screen. It shows demographic information, recordable days (Actual: 92, Recordable: 92), and a detailed incident report. The incident report includes fields like Effective Date (6/16/2010), Work Status (RESTRICTED-NTL), and Anticipated RTW (Unknown). It also details the injury (Fracture, Right Wrist, Fall on same level, FLOOR) and accident/illness type (1 - Injury).
- Work Status:** A summary section showing current work status (RESTRICTED-NTL) and days away from work (Actual: 92, Recordable: 92).

Add-ons

mySedgwick – our self-service option

With mySedgwick, consumers can view details about their claims, easily update information and keep the process moving forward. Intake capabilities are available for workers' compensation, disability leave, property, and general and auto liability claims.

Users can report new losses, claims or intermittent absences, view data and payment status, update pertinent details, search for providers and other resources, securely upload documents, communicate with a Sedgwick professional, adjust payment preferences and much more. The features available are based on line of business.

mySedgwick includes a user-friendly graphical interface, a dashboard with claim notifications and a chronological activity stream, several configurable features, and a learning center with helpful information and workers' compensation explainer videos to guide users through the process; they are available in English, Spanish and English with subtitles. The tool offers responsive design, which adapts to any device, offering full functionality on computers, tablets or smartphones.

Core capabilities:

- Mobile intake – This feature offers users a fast claim reporting option. It helps minimize the inconvenience of an unexpected incident, particularly after business hours.
- Payment detail – Whether we are cutting a check for workers' compensation or sending an advice to pay on short-term disability, employees can see when the payment is due to them and the authorized amount.
- Reporting of data – Employees and supervisors can report items like confirmation of a return to work date, intermittent absence days or general claim-related updates, which will automatically feed into our claims system and set a diary for the examiner.
- Time tracking – The system tracks all of the different work status episodes of an employee, regardless of the reason for their time away from work.

- Accessing data – Supervisors, managers and corporate colleagues can access consolidated data, and it is searchable by employee, absence type, date range and other details. Claims information is available to all direct reports as defined in client HR hierarchies. Managers and corporate colleagues who are not specifically identified in a client's hierarchy can also access consolidated data. These OMNI users can view claims information for all direct reports of the managers they support.
- Managed care – Designated users can access to case management and medical bill review information, and request a call from an assigned nurse.
- Leave balances – Users can view all plans and policies that apply to an employee and the associated balances.
- Absence calendar – Employers can see all of an employee's absences in a calendar view, along with the reason for each absence and the status.

Additional benefits:

- A seamless view for employees and the ability for clients to incorporate their own brand and messaging into the system to make it their own
- A single sign-on enables customers to provide quick, secure connections for employees
- A document upload feature allows users to upload photos taken with their smartphones or upload files from computers and send them to our claims system, simplifying the submission process
- Immediate notification of intermittent absences
- 24/7/365 call center access offers the ability to phone in a claim at any time

Nurse case management

Claims that meet predetermined client criteria can be directed to our internal nurse case management program or any authorized outside vendor, including health/wellness programs and employee assistance programs. The intake system sends notifications to recipients per employer, federal, state or municipal guidelines. The notifications can be customized to meet each client's needs and can be based on line of business or organizational hierarchy.

Intake

The claim intake process is fully automated to ensure prompt and accurate submission to our examiners. We work with clients to customize the intake script, which automatically enables or disables questions based on previous answers. Claims can be reported 24 hours a day, seven days a week, 365 days a year.

Client feedback

At Sedgwick, we have always believed that technology must first meet the needs of our customers. Using the Site Survey link in viaOne, they can easily let us know how we can do that better. Client recommendations have resulted in key enhancements, including a new report module, expandable and collapsible menu features, and greater system control through expanded preference options.

Automated, streamlined process

Sedgwick is the industry leader in building and customizing technology that fully and securely integrates with virtually any HR, risk management or payroll system. We do this to ensure that your claim and absence data is fully in sync with your internal HR system. Thanks to technology, gone are the days of the HR department manually keying in the claim and absence data that we provide. We supply fully automated plan and policy assignments, benefit and payment calculations, and eligibility and entitlement checks based on your data files.

The application can even provide employees with automated answers to questions about leave policies, their current leave status and other claim-related matters. The viaOne suite of tools is one of our most valuable and widely used technology solutions. Thanks to the simplicity and efficiency of mySedgwick, some clients use it to report as much as 98% of their intermittent employee absences.

Technology for benchmarking and stewardship

Hidden within the claims data are true gems of information, including the kinds of insights that highlight which programs are working and which are not. At Sedgwick, we believe that technology plays a key role in accessing, understanding and using claim data. This approach can be seen in our benchmarking and stewardship programs.

Stewardship is our strategic and comprehensive effort to ensure that every action we take improves the claims process and helps to better manage our clients' costs. It represents our overall approach to ensuring that each client's program is always moving toward achieving optimal results. Benchmarking is the measurement tool that helps to refine and target our focus and ensure we are on a path to continuous quality improvement.

Making life easier

In conjunction with its aggressive time and attendance policies, one large automobile manufacturer uses data provided by Sedgwick four times each day to efficiently run their production lines. They load our data into their highly customized human resources information system, which ultimately feeds their scheduling program. Systematic adjustments to their employees' schedules occur automatically to ensure no stoppage in production processes, thus creating greater efficiencies and saving the busy manufacturer both time and money.

Predictive analytics

What differentiates Sedgwick's approach to predictive modeling is our focus on comprehensive solutions that include intervention. Our innovative combination of data, technology and industry expertise helps our clients uncover the trends that lead to successful claim resolution. Most current predictive modeling techniques try to identify patterns that, if not acted upon, will repeat. We customize that basic approach further by using the client's own data to provide a richer and more meaningful analysis.

We have found that when our intervention process is deployed, the results include earlier closure rates, less attorney involvement and faster return to work.

Data protection

Sedgwick is committed to protecting client and employee information and ensuring secure, authenticated access to data. Sedgwick's investment in security technology is unmatched in the industry. Our world-class infrastructure and secure-by-design software architectures are part of our unwavering commitment to protecting our clients' data.

Software as a service

Sedgwick's customizable claims system gives clients the ability to administer claims for workers' compensation, auto, general and professional liability, property, disability and leave. Clients can choose to mix and match our software modules and services to meet their unique needs. For example, if a client would like to administer their own workers' compensation and disability claims, but needs managed care capabilities, such as bill review or case management, we can integrate these services into their program.

Providing comprehensive solutions

Our technology provides us and our clients with the ability to manage a full spectrum of claims and productivity management programs, and it makes the administration process more efficient and effective. We are also able to enhance outcomes by integrating key services such as managed care, Medicare set asides and OSHA recordkeeping. Our goal is to make your job easier through technology.

To learn more about our technology solutions, contact:

P. 800.625.6588 E. sedgwick@sedgwick.com

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