

Sedgwick

best practices

Sedgwick uses industry standards to set our claims management best practices. We're committed to understanding our clients' challenges and to delivering claims excellence and provide quality, sound decision making and consistency in everything we do.

Best practices

- New claim intake email to employer should be made within two business days with notice of work restrictions.
- Examiner new claim investigation should be completed within five business days. Determine if the mechanism of injury supports allowance, if claim is valid, if return to work has happened, what the treatment plan is and the examiner's plan for claim closure.
- Your team will reach out to the treating physician for additional supporting information or to clarify any "red flag" concerns.
- Verify if validity concerns exist and send notice of the question to validity to Washington Department of Labor & Industries (L&I).
- Discuss salary continuation, light duty and initial action plan with the employer within five days of receipt of claim and document communication.
- Plan for resolution must be completed within five business days.
- Request missing and prior medical records that are not on file.
- Communication with employer should take place every 30 to 60 days until claim closure.
- Compensable claims should be reviewed every 14 days and medical-only claims every 30 days.