



OVERVIEW

Injured Worker: Male, 22 years old

Date of Injury: 11/12/2013

Injury Description: Compensable motorcycle accident

Co-morbidities: Obesity

Diagnosis at time of injury:

- Blunt abdominal trauma
- Superior mesenteric artery (trunk) injury
- Multiple liver laceration, up to grade 3
- Splenic laceration, grade 4
- Kidney laceration, right
- Spigelian hernia
- Fracture of nasal sinus
- Zygomatic arch fracture
- Fracture of sphenoid bone
- Orbital floor fracture
- Ribs, multiple fractures

TIMELINE

02/03/14 Field Case Manager (FCM) assigned to file Summary of initial FCM Report:

- Injured Worker (IW) in constant pain, secondary to his multiple wound dehiscence
- IW did not appear as a normal young man. Because of this fact, IW did not attempt to wear normal clothing. He had an altered body image along with loss of self.
- IW was confined to his home.
- Treatment center overseeing care was only open one day per week for a couple of hours. As a result, IW was ending up in the emergency department approximately 3 times per week in addition to weekly visits to the treatment center.
- No treatment plan was in place and treatment center did not know how to treat IW complex condition once he stabilized.
- IW had not yet been transitioned to Total Parenteral Nutrition (TPN) 24/7.
- IW was receiving home health services along with physical therapy in the home.
- IW's mother was utilizing her family medical leave to provide much of the necessary care at home.
- IW was unable to drive due to medical condition, his severe pain, 24/7 TPN, along with jejunostomy tube in place with a Foley. IW parents were attempting to provide transportation to his appointments.
- **02/07/14** FCM arranged for transportation to follow up appointment, relieving family of the responsibility, avoiding time off from work for them.
- **02/25/14** FCM called in a favor and arranged for an evaluation with a new physician, Dr. E. Doctor was in agreement that a transition of care was required and was able to facilitate an evaluation by Dr. R (general surgeon) and Dr. A (family practice/internal medicine).

TIMELINE SUMMARY

- Multiple hospital visits
- Multiple surgeries
- Successful transition from **TPN** 24/7 to 5 days a week with further reductions planned
- Management of nutrition
- Participation in physical therapy
- Development of an exercise regiment

ACCOMPLISHMENTS

- According to IW physicians and family members, without interventions and transitioning IW
 away from initial treatment center, he most likely would not have survived.
- TPN has not only been decreased, 2 days of need have been eliminated thus far.
- All of IW's multiple areas of dehiscence have healed.
- Surgical intervention by Dr. R has allowed IW to gradually return to a normal quality of life.
- IW is currently **attending community college** for vocational retraining with a goal to obtain his Associates Degree and Bachelors Degree.
- Anticipated in early 2016, FCM to work with the school to obtain an internship program for IW.
 Once completed, the school will help IW with placement of position.
- IW attends physical therapy 4-5 times/week.
- IW current weight is 200 pounds. Next weight goal is 180 pounds. **IW is no longer classified as obese**, is more fit and is working hard at improving overall health.

ACCOMPLISHMENTS (continued)

- FCM is working with IW concerning **nutrition**, vitamins, minerals, iron, etc. through foods, along with working on the order of eating and proper fluid intake.
- IW's medical condition has improved and is anticipated to continue doing so.
- IW's mother can now work full time without providing nursing care and is no longer on medical leave.
- IW can now **drive himself** to his medical appointments, vocational rehabilitation program, etc. IW is **independent** in his medical treatment needs, freeing up his parents completely.
- IW has reported **gratitude** for the care he has been provided and for the opportunity for vocational training.

NEXT STEPS

- Medical team (FCM with physicians) is working on a **proactive plan** to decrease the incidents of sepsis.
- **Goals include:** within the next year to be off the TPN completely and within the next 9 months to decrease the use of Gattex to a vial a day, eventually decreasing to a vial every other day.

IMPACT OF COST PROJECTION SERVICES

- Provided client with the immediate ability to set appropriate reserves on the claim.
- Provided a **surgical road-map** for both the FCM and treating physicians in terms of the specialty-physician review completed on the claim.
- Served as an immediate resource for pricing out various treatment scenarios.
- Obtained **accurate assessments** of the claimant's life expectancy based on industrial injuries and co-morbid health conditions.

COST PROJECTION

	ORIGINAL Cost Projection	REVISED Cost Projection
TOTAL Medical/Treatment Services	\$3,473,216	\$462,574
TOTAL Medications	\$74,026	\$1,180,741
TOTAL Future Medical Allocation	\$3,547,242	\$1,643,315

Savings based on revised treatment plan:

\$1,903,927

BILL REVIEW RESULTS

Date Range: 1/1/14 – 12/3/15

	Bill Review Results	
Bill Count	627	
Total Billed	\$3,455,520	
Total Savings	\$1,953,595	
Fee Schedule Savings	\$473,278	
PPO Savings	\$1,480,317	
Total Paid	\$1,501,925	
Total Fees	\$296,393	
Gross Savings %	57%	
Net Savings %	48%	
PPO Penetration	49%	

TOTAL CASE IMPACT

- Collaborative approach proves successful outcome
- Appropriate physicians identified and successful transfer of care facilitated
- Appropriate treatment plan established for proactive management of complex care
- Improved quality of care for injured worker
- Optimistic future for medical care paving way for savings impact through long-term medical cost projections
- Real dollars saved in creative, aggressive cost containment measures in bill review