

Injury on Duty

Life of a Claim
Tulsa Maintenance Base

April 24-25, 2012



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The Cost of Workers' Compensation at AA



AA's Workers' Comp Expense is expected to be \$118M

The \$118M represents the amount AA will spend on injuries occurring in 2012

- AA's WC Insurance has a deductible of \$2.5M per incident
- AA pays every dollar on each claim up to the deductible
- The average cost per claim (nationwide) is \$20,563
- The average cost per claim in Oklahoma is \$24,413
- AA is required to keep \$441M in a cash account as collateral for its WC liability



Estimated Annual WC Cost by Workgroup



Work Group	Total Cost	Average Cost/Claim
Fleet Service Clerks	\$48,599,380	\$21,222
Flight Attendants	\$20,492,282	\$21,083
M&E	\$26,337,792	\$20,936
Cargo	\$3,184,367	\$22,745
Airport Agents	\$5,280,340	\$15,857
Pilots	\$3,290,697	\$17,319
Other	\$2,949,142	\$17,047

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Other Workers' Compensation Costs



- Salary Continuance AA pays an employee's full base pay for up to 80 hours of compensable lost time
- Sick Supplement with TTD
 - Ground employees may, at their option, draw upon available sick pay, up to ½ of daily regular pay, provided the sum does not exceed regular base pay
 - Once sick time is exhausted, if the employee chooses not to use sick or no sick time is available, the employee is placed on Unpaid Injury-On-Duty Leave of Absence and is eligible for 12 months company provided health and life benefits



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What Drives the High WC Costs?



Components of a Workers' Compensation Claim

- Medical Costs
- Temporary Total Disability (TTD)
 - The amounts paid to an employee to compensate for lost salary while away from work up to defined benefit levels specified by state WC law
 - > TTD payments are not taxable or reportable income
- Miscellaneous Expense All other costs related to a claim (lawyer fees, etc.)



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Injury Management – First Things First



- Obtain medical attention immediately, if necessary
- Manager completes accident report timely via the Automated Accident Report (AAR) on JetNet Employee will be provided:
 - → Copy of the accident report
 - → Employee IOD Information Packet
 - ✓ All contact information
 - ✓ Process for obtaining prescriptions at no cost
 - ✓ How to avoid receiving medical bills



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Reporting a Claim



- The AAR feeds into First Report and notifies the Injury Manager of the injury
- The Injury Manager reviews the claim and queues the claim to Sedgwick CMS if medical treatment and/or lost time is expected
- The system electronically transmits to Sedgwick CMS according to schedule (every 2 hours on the hour from 6:00am-6:00pm, M-F, central standard time)
- Sedgwick CMS Team Leader reviews report and assigns to a claim handler
 - → Medical Only
 - → Lost Time



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Injury Management – Stay in Touch



- The supervisor should stay in touch with injured employees on a regular basis to assist the employee back to work as soon as medically able
- If the employee loses time as a result of the injury, the supervisor shall ensure AutoTA is updated with the appropriate coding
- Transitional duty (TD) assignments should be offered whenever possible
 - → TD is available to all employees based upon work restrictions and operational availability
 - → All employees with a compensable workers' compensation injury could be eligible for up to 30 days of TD for non-surgical cases and up to 60 days if surgery is performed
- Escalate all claim delays/issues to the Injury Manager



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About Sedgwick CMS



- Sedgwick CMS is a privately held company
- We specialize in claims administration in the areas of:
 - → Workers' Compensation
 - → Short Disability, Long Term Disability, FMLA
 - General, Automobile and Professional Liability
- Approximately 9,400 colleagues in more than 190 offices in the U.S. and Canada
- Sedgwick CMS handles over 1.4 Million claims annually with over \$7.5 Billion in claim payments



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Sedgwick CMS Mission



- To be the premier provider of customized claims and productivity management solutions through:
 - → Customer focused programs
 - → Efficient, quality-driven process design
 - → Stakeholder return on investment
 - → Support and empowerment of our colleagues to do the right thing at the right time



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American Airlines – Dedicated Leadership Team



- Program Manager Robert Cunningham
 - Primary client contact responsible for overall program performance and improvement
- Operations Manager Justin Goodrich
 - Establishes policy and procedures to assure consistent delivery of company standards, industry best practices, client requirements
- Client Performance Manager Russell Smith
 - Responsible for quality compliance & colleague training
- Data Analyst Rosalynd Billiter
 - Develops comprehensive reports to identify program achievements and areas of opportunity



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American Airlines – Dedicated Service Team



- Sedgwick CMS has a dedicated team of 44 colleagues to service American Airlines and American Eagle
- Sedgwick CMS service team:
 - → Latasha Branch Claims Team Lead
 - → Julie Carrico Lost Time Claims Examiner
 - → Carolyn Davis Lost Time Claims Examiner
 - → Yolanda Hawkins Backup/Overflow
 - → Jomara Tiburcio Medical Only Examiner



Claims Examiner Role



Initial 3 point contacts

- → Injured employee
- → Medical provider
- → Injury manager

Completes a thorough investigation

- → Compensability
- → Subrogation
- → Fraud
- Reserves



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Claims Examiner Role



Medical Benefits

- → Prompt direction to an authorized treating physician
- Providing timely authorization for reasonable and necessary medical care
- → Coordinating with medical providers and injured employees

Indemnity Benefits

- → TTD Temporary Total Disability
- → TPD Temporary Partial Disability
- → PPI Permanent Partial Impairment



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Supervisory Role



- Sedgwick CMS Supervisor receives, reviews and assigns new losses
 - > Injuries assigned based on details of loss and examiner experience
 - → Provides specific direction to the examiner
- Supervisor completes appropriate follow-up to ensure that medical and indemnity benefits are provided timely
- Supervisor serves as back-up customer service contact



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Sedgwick CMS – Managed Care



- Medical Bill Review
- Network Management
- Telephonic Case Management
- Utilization Review
- Ancillary Medical Services Management
 - → Pharmacy program (PMSI)
 - → Physical Therapy (MedRisk and Concentra)
 - → Diagnostic network (OneCall Medical)
 - → Durable Medical Equipment (MSC)



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Oklahoma State Specific Rules



- The waiting period is seven (7) days. Indemnity benefits begin on the 8th day of disability.
- The State determines the maximum rate and these benefits are not taxable or reportable income
 - → Maximum weekly benefits rate effective 11/1/2011 is \$735
 - → The rate is 70% of the Average Weekly Wage (AWW)
 - → AWW is based upon the 52 weeks of wages prior to the date of injury
 - → Wages are provided by AA
 - → The maximum weekly benefit rate that is in effect at the time of the injury stays the same for the life of the claim



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Oklahoma State Specific Rules



- Soft tissue injuries: Temporary Total Disability (TTD) benefits shall not exceed 8 weeks
- Surgical cases: The injured employee may receive TTD benefits up to a maximum of 156 weeks from the date on which income benefits begin to accrue if justified by medical evidence

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Oklahoma Medical Treatment



- Direction of Care: Oklahoma law allows an employer to direct an employee to a specific physician
- Change of Physician
 - Oklahoma law allows the injured employee one change of physician for any affected body part
 - → The injured employee shall provide 3 physician names to the adjuster
 - → The adjuster can either select one of the physicians or will provide a list of 3 other physicians to the employee
 - → If no agreement can be reached between the adjuster and the injured employee, the court will make the decision



Oklahoma Medical Treatment



- Effective 3/1/2012 all treatment related to the cervical, thoracic, and lumbar spine must be in accordance with the Oklahoma Treatment Guidelines (OTG)
- All other treatment must be in accordance with the Official Disability Guidelines (ODG)
- Physicians may choose to participate in a voluntary preauthorization process

MMI, Impairment, and Settlements



- Permanent Partial Impairment (PPI) Ratings
 - > Determination made once the injured employee reaches MMI
 - → Rates are determined by the State
- Form 26: Agreed Order
- **Joint Petition:** Full and final settlement of all medical and indemnity benefits