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## PRESIDENT'S MESSAGE



As fall arrives and we look to the holiday season, I hope that you and yours are staying safe and healthy. I know we are all dealing with what sometimes feels like overwhelming challenges in our businesses and at home. This is not easy stuff, but we continue to persevere, and it's encouraging to see how your companies are rising to meet these challenges. Together, we've worked to keep our teams safe and productive and serve your missions, despite all the difficulties dropped into our laps this year.

I've also seen how you've adapted to support each other, virtually. Our new AASCIF Connection series of virtual learning has been a great success. AASCIF has hosted more than 35 sessions so far, with more than 350 attending. Many of you took advantage of

multiple sessions, for more than 900 registrations! Check out archives of the Connection Series [here](#), and don't forget to use this community to engage with your peers across our membership and seek guidance and support.

I think many of us will note 2020 as among the wildest and most challenging experiences in our lifetimes, and I am glad we have this community of dedicated professionals on which to lean. Onward.

Stay well,

Phil Kalin, AASCIF President; President and CEO, Pinnacol Assurance

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# FEATURES From AASCIF

## BUSINESS ACUMEN AND THE LOSS CONTROL PROFESSIONAL

*By Randy Klatt, MS, CSP, WCP®, The MEMIC Group, and Timothy B. Wilson, CSP, Missouri Employers Mutual*

It's very rare to hear a business owner say that safety isn't important. Stating, "they knew the job was dangerous when they took it" is just not something we hear as loss control professionals. We also know that safety is a noble endeavor, it is the right thing to do for people. The view is always better from the moral high ground, right? This should be a compelling argument for all policyholders. Safety is clearly important, the right thing to do, and it will prevent pain and suffering. What more do we need to say?

Well, the reality is that often this point of view isn't persuasive enough. Business owners often don't understand that safety can, and should, be managed much like every other aspect of their operation. They don't see how safety can create a solid return on investment. They might even use the most dreaded words ever uttered to a loss control consultant: "Safety is common sense," or "I told them to be careful." This is when the loss control role has to include a solid element of business acumen as well as safety knowledge. Loss Control or Safety Service consultants are truly selling safety, and it is a complex task.

The dictionary defines "acumen" as "the ability to make good judgments and quick decisions, typically in a particular domain." The particular domain we find ourselves working in is the business world, which fluctuates from day to day. Construction, healthcare, manufacturing, hospitality, and transportation are all industries where loss control is expected to make good judgments and quick decisions. Despite the clear differences between these industries, a consultant may be expected to impress business leaders in each of them.

We have to face facts—visiting a policyholder a few times per year gives us very little opportunity to make an impact. In part, a consultant can be defined as someone who has limited influence and no control, so time and strategy are of the essence. We have to make the best of those opportunities because the door won't remain open for long. Business owners don't have the time or the patience to meet with an "insurance rep" unless they can see immediate value. So, it is incumbent upon the consultant to demonstrate their value quickly, to understand

the business in order to find safety improvement opportunities, and to build a solid relationship with the policyholder. Therein lies the challenges for the loss control professional, and a good bit of business acumen can greatly improve the odds of success.

Solid business acumen can start with a solid understanding of workers' compensation insurance—premium and experience modification factor. A minimum premium is what all business owners are interested in. If that is what motivates them, then that's where the discussion will likely go anyway, despite our efforts to keep them focused on exposures and controls. Often, they really don't understand what drives costs higher; they simply want to pay less. Admittedly, this can be a slippery slope, as we are not underwriters, claim handlers, or insurance agents. There are many factors that go into the premium calculation separate from the actual claim details. These include payroll, governing class codes, and individual state rates, to name just a few. Additionally, there may be credits or debits applied, dividend programs, or deductible details that the loss control representative is only tangentially aware of. Keeping those caveats in, we can still provide good information to the policyholder that can help them understand the primary cost drivers that are within their control—safe work practices and good claims management.

Providing a comprehensive loss history or trend analysis can open eyes quickly and point out the areas of opportunity. A lesson using Modmaster could explain how a premium increased, what claims had the most impact, or what could have happened if certain claims never occurred. It's one thing to say that injuries have direct and indirect costs, but it's another to point out specific incidents that caused certain cost increases. That knowledge often opens up discussions about injuries and what controls should be in place. If it is simply the cost of injuries that the business owner is interested in, then the consultant must be proficient in identifying the root cause and highlighting the direct as well as indirect costs, which in turn helps to foster implementation of corrective actions.

Naturally, these workers' compensation insurance costs are just a part of the overall cost of workplace injuries. Sometimes, focusing on business processes can lead to safety improvements if presented in the right way. If the loss control consultant really understands how a policyholder's production line works, they can calculate projected time savings from ergonomic improvements. If they have detailed knowledge of how a garage's auto

lifts operate, they can offer advice on maintenance, replacement costs, training, and inspection criteria that will reduce equipment down-time. These are both examples of productivity gains that could mean real financial rewards to a policyholder, but will also result in a safer operation.

A loss prevention consultant often pursues safety-related certifications, such as the Certified Safety Professional, the Occupational Safety and Health Technician, or the Certified Professional Ergonomist. But a broader approach to business consulting could also include certifications such as Certified Property Casualty Underwriter, Associate in Risk Management, or Workers' Compensation Professional. These are insurance industry staples and would help any consultant better understand their role and how they can help the policyholder meet their needs. In other words, it could increase their business acumen. Additionally, there are endless industry-specific certifications or licenses that would bring instant credibility to the consultant when working with policyholders in those industries. For example, a consultant with a Class A CDL could have a better understanding of a trucking operation, or an EMT license would help a consultant work with an ambulance or fire service entity.

The "art of safety consulting" has been defined in many ways and certainly has many facets. The job is part sales, part compliance, and part relationship building, and can be very technical. But it can also be a very emotional experience. Flexibility, understanding, and patience are all foundational elements, but so are persistence and determination. Another significant skill has to be the ability to "talk the talk" when it comes to gaining credibility with business owners, senior managers, and safety personnel. Credibility is such an important element to the job. Understanding the policyholders' business is one way to gain that much needed credibility.

One of the common pitfalls for the consultant involves clear and concise communication. No surprise here, as communication failures are common and can cause tremendous confusion, loss of respect, and even serious injuries. Effective communication begins with scheduling loss control visits, continues throughout the consulting process (be that in-person, virtual conferences, or through phone or email), and ties everything into a nice bow with the follow-up letter, recommendations, corrective actions taken by the policyholder, and any loss control information provided to the underwriting team.

The consultant has to communicate clear expectations to the policyholder surrounding visits and any service that might be provided. Often, businesses don't understand that they can benefit from the loss control visit. Yes, observations will result in recommendations to correct the issues discovered, but cor-

rective actions will also benefit the policyholder. Communicating this to the policyholder as a value-added service is critical to success. Naturally, observations of a positive nature are also very important. When a business truly is doing the right thing then that needs to be recognized with factual statements.

Ernest Hemingway once said, "All you have to do is write one true sentence. Write the truest sentence that you know." That sounds like great advice for the loss control consultant. It is critical to avoid the appearance of bias, making flowery statements that are subjective, or promising a better loss ratio or fewer claims if the policyholder completes the recommendations. Observations must be factual, and recommendations backed up by industry best practices, OSHA requirements, or appropriate science. Loss Control, Loss Prevention, or Safety Services are not only providing advice to policyholders but are the eyes and ears of the underwriters. Clear communication as to the workplace conditions, medical management, company culture, and human resource practices is vital to the underwriters' understanding of the risk. Professional business letters that contain action and service plans developed using SMART goals can be much more successful than an informal email or text. Today's LOLs, emojis, and Tweets are not going to be the source of accurate information all parties need, nor will they motivate employers to act. Informal conversation is an important part of the relationship-building aspect of the job, but documentation must be clear and concise.

AASCIF members provide tremendous safety services to policyholders in all industries throughout the country. These services include onsite industrial hygiene consultation, onsite surveys, and training. Live or online leadership workshops, OSHA outreach courses, ergonomic assessments, and incident investigations are often offered at little or no additional cost. Our websites are full of free resources, blogs, webinars, templates, and other great information. But all of this can be overlooked or forgotten if the loss control professional isn't well rounded and acutely aware of business processes, needs, and priorities. It's easy to identify safety concerns but far more complex to actually see results from those efforts.

To better understand the business of loss control the consultant needs to better understand the business they are working with. This understanding will lead to better relationships and therefore, better safety performance. We aren't in the field to tell businesses how to run their operations, but we sure can provide excellent information on how to better avoid workplace injuries. With a consistent approach and clear communication, outstanding results can be had. That's a win-win for policyholders and insurance carriers.

# EVALUATION AND TREATMENT OF FIRST RESPONDERS POSTTRAUMATIC STRESS DISORDER (PTSD) IN WORKERS' COMPENSATION

By Michael Coupland, RPsych, IMCS

## The evolution of PTSD

There is a record of PTSD type symptoms throughout history. *The Iliad* and *The Odyssey* both describe soldiers traumatized by war, and Shakespeare references the symptoms in *King Henry IV*. The U.S. Civil War refers to PTSD type symptoms as soldier heart, neurasthenia, or railroad shock. It was thought by Civil War era physicians to be a functional nervous event. World War I era records refer to PTSD type symptoms as shell shock, combat fatigue, traumatic neuroses, and illness gain. We first see benefits denied for illness gain and traumatic neuroses. In World War II, we see descriptions of the shell shock effect due to concussion versus PTSD started to be delineated. During and post-Vietnam era, accident neurosis/secondary gain rebuttal of PTSD continues. The women's movement in the 1970s leads to acknowledgment of rape trauma. In 1980, the American Psychiatric Association's *Diagnostic and Statistical Manual for Mental Disorders (DSM-III)* acknowledges PTSD as a separate diagnosis for the first time. The traumatic event that caused PTSD is expected to be "outside the range of usual human experience," and examples of trauma list both civilian and military combat trauma. A separate Dissociative Disorders section is also created. In 1992 the ICD-10 includes three posttraumatic conditions: Acute Stress Reaction (lasting under a month after the trauma); Posttraumatic Stress Disorder (occurring for at least a month after the trauma); and EPCACE (Enduring Personality Change After Catastrophic Experiences, a more complex, long-lasting disorder now known as Complex PTSD, classed as an adult personality disorder). The 1994 *DSM-IV* added Acute Stress Disorder, and in the 2013 *DSM-5*, Posttraumatic Stress Disorder and Acute Stress Disorder moved from the Anxiety Disorders section to a newly created Trauma and Stressor-related Disorders section. A dissociative subtype of PTSD was introduced in the latest edition.

## Workers' compensation mental-only and presumption laws and defining\narrowing of scope of PTSD diagnosis

Workers' compensation state regulations have historically considered a mental claim to arise out of a physical injury claim, known as a physical-mental claim. An example is if a police officer was shot, then a PTSD claim could arise secondary to the physical claim. However, state regulations vary in their acceptance of and definitions of mental-only claims when there was no physical injury. Commonly, states that did allow mental-only claims required any act to be "sudden and unexpected," and therefore, first responder PTSD claims had been denied with a position that the exposure was not sudden and unexpected in their job. Additionally, in states that had no mental-only claims, there was no ability to put in a first responder PTSD claim in the absence of a physical injury.

With mass casualty—horrific events such as night club and school shootings—there was an effort by legislators and regulators to start adding some form of presumption law for first responders starting in Florida in 2017. Many states have followed with their own definitions of a presumption law and what occupations it covers. Additionally, some states have added other forms of first responder PTSD prevention, early intervention, and treatment assistance alongside or outside of workers' compensation. The benefit of any presumption law is to ease the burden and stigma of seeking help and keep our first responders psychologically healthy.

## PTSD in first responders: incidence\prevalence\mitigating factors

First responders have been covered for PTSD under workers' compensation in many Canadian provinces for decades now, and hence, there is more research arising from Canada than in the United States. A study<sup>1</sup> of police officers in Canada documents that police officers are more apt to be exposed to traumatic events than the general public. *However, the incidence of PTSD among police officers who have been exposed to traumatic events is actually less than that of the general public.*

Between 3 and 9 percent of the police officers included in the study had suffered from either clinical PTSD or partial PTSD, involving some, though not all, symptoms. This is much lower than the lifetime prevalence rate of PTSD for non-police

<sup>1</sup>Predictors of Posttraumatic Stress Disorders in Police Officers Prospective Study IRSS, 2013

officers exposed to traumatic events, which is estimated to be between 30 and 45 percent.

Why do these officers have a lower rate of PTSD after being exposed to a traumatic event? It may be twofold:

- (i) Officers are resilient, despite confronting traumatic events.
- (ii) There is a benefit to the education, prevention, early intervention, and treatment efforts that we in the police psychology profession put into place in collaboration with the employer agencies and unions.

### **PTSD in “mental-only” claimants not covered under a first responder presumption**

Mental-only PTSD exposures exist in many non-first-responder claims, such as retail robberies, education and healthcare threats, and large rig driving occupational road accident traumas and deaths, where, due to the size and safety of the truck, there is no physical injury to the driver. When there is no physical injury, then the sudden and unexpected weighting of the occupational PTSD exposure needs to be considered by the evaluating mental health provider. If the diagnosis is an acute stress disorder or a posttraumatic stress disorder, then the diagnostic criteria that it had to be a life threatening event or sexual assault often satisfies the sudden and unexpected weighting.

### **Brief overview of the psychophysiology of PTSD to understand the diagnosis of this disorder**

PTSD arises from the flight-fight-freeze autonomic arousal response to a trauma exposure. The arousal response gets turned on suddenly and dramatically, flooding the body with neurotransmitters that prepare the body for flight-fight-freeze: the blood goes to the extremities to enable large muscle action (e.g., running, fighting) and consequently, the blood flow is constricted to the extremities, which can also avoid blood loss due to trauma in the extremities. The memory of the event is coded into the hypothalamus by the amygdala neurotransmitters, and this is an area of special concern for treatment, because the memory can get encoded with extraneous triggers, such as going to the grocery store, if there had been a grocery list on the individual’s mind at the time of the exposure. The memory coding is so strong that this trauma event supersedes all other memory recall events and predominates. The fight-flight-freeze response continues, keeping the individual on high alert. Prolonged fight-flight-freeze response wears down the psychoneuroimmune response, leading to a paradoxical effect. Immune responses are initially protective and anti-inflammatory. Immune responses in distress are pro-inflammatory.

The psychophysiology of PTSD gives us some clues about the most effective treatment. Treatment that can focus on normalizing the stress response, promoting sleep, and improving “normalization” of activities is used to overcome the trauma response.

There are still many unknowns about why certain people exposed to a traumatic event will develop symptoms that meet the PTSD diagnostic criteria while others do not. Certainly, most people have the initial psychophysiological response to a trauma event, and some go on to develop acute stress disorder symptoms, but those symptoms resolve in days; therefore, they do not go on to develop PTSD.

### **Best practice evaluation and treatment of a PTSD exposed injured worker**

On the initial clinical encounter, the evaluating mental health provider will be balancing the need for education and reassurance with the need to gather sufficient information to make an initial impression for workers’ compensation coverage requirements. Therefore, for a first responder in acute distress, the focus may be on symptom management at the initial encounter, and a follow-up visit would be set to continue the initial interview.

#### *The typical initial encounter has these components:*

- Clinical interview
- Psychosocial history
- Mechanism of injury and history of previous trauma exposures
- Patient and family medical and psychiatric history
- Mental status

#### *Typically, the following domain are evaluated via formal testing:*

- PTSD checklist
- Depression and anxiety
- Perceived injustice inventory
- Social support and stress
- Locus of control
- Drug and alcohol and prescription drug questionnaires
- Review of records

**Diagnosis:**

Acute stress disorder diagnostic criteria

PTSD diagnostic criteria

Differential diagnoses

- Other anxiety disorders, such as panic disorder
- Depressive disorders
- Obsessive-compulsive disorder
- Substance abuse disorders: Although substance abuse is a frequent complication of PTSD, substance abuse may be the primary problem instead. Alcoholics and heavy drug abusers may overemphasize the role of a distant trauma as the cause of their problems and use it to justify their habits.
- Personality disorders can also resemble PTSD, with borderline personality disorder having the closest resemblance to PTSD.

**PTSD DSM -5 diagnosis**

Most regulations require a PTSD diagnosis to be consistent with the most recent DSM. The DSM 5 is the most recent edition.

Criterion A: stressor

The person was exposed to death, threatened death, actual or threatened serious injury, or actual or threatened sexual violence.

Criterion B: intrusion symptoms

The traumatic event is persistently re-experienced

- Unwanted upsetting memories
- Nightmares
- Flashbacks
- Emotional distress after exposure to traumatic reminders
- Physical reactivity after exposure to traumatic reminders

Criterion C: avoidance

Persistent effortful avoidance of distressing trauma-related stimuli after the event

- Trauma-related thoughts or feelings
- Trauma-related external reminders

Criterion D: negative alterations in cognitions and mood

Negative thoughts or feelings that began or worsened after the trauma, in the following way(s):

- Inability to recall key features of the trauma
- Overly negative thoughts and assumptions about oneself or the world
- Exaggerated blame of self or others for causing the trauma
- Negative affect
- Decreased interest in activities
- Feeling isolated
- Difficulty experiencing positive affect

Criterion E: alterations in arousal and reactivity

- Irritability or aggression
- Risky or destructive behavior
- Hypervigilance
- Heightened startle reaction
- Difficulty concentrating
- Difficulty sleeping

Criterion F: duration

Persistence of symptoms (in Criteria B, C, D, and E) for more than one month.

Criterion G: functional significance

Significant symptom-related distress or functional impairment (e.g., social, occupational).

**Acute stress disorder and differential diagnoses within the DSM-5**

Acute stress disorder is the similar diagnostic criteria with the exception that the duration is the first 30 days.

## Detecting symptom magnification/exaggeration/malingering in PTSD

The possibility of symptom exaggeration exists within a compensation system. Durations of treatment exceeding normal recovery times are an indicator of possible symptom exaggeration, and tests of symptom validity can be given, which may include the M-FAST and MMPI to detect exaggeration of symptoms.

### Treatment

#### *Cognitive Behavioral Therapy (CBT)*

CBT is a wide range of therapeutic modalities under an umbrella of techniques that target cognitions (thoughts) around a trauma and also target the behaviors (physiological arousal). CBT starts with an evaluation of the patient's symptoms and the ways they think and behave in response to the trauma in order to target the treatment. The main techniques utilized for trauma are to reframe the negative thoughts, teach relaxation strategies, and begin normalization of activities.

#### *Systematic Desensitization*

Systematic desensitization is a method of creating a hierarchy of steps, the least anxiety-producing to most anxiety-producing "triggers," and having the patient utilize their relaxation strategies learned in CBT to imagine successfully handling the situation. Once a patient can imagine handling the easiest trigger in the hierarchy, they can move on to the *in vivo* exposure therapy.

#### *Exposure Therapy*

Exposure therapy is similar to systematic desensitization, except that the exposure is to actual triggers instead of imaginal triggers. In some cases, the treating psychologist may need to attend on location as well. Exposure therapy to the work location may require special permissions when an employee is off work, and these need to be discussed in treatment conferences in order to obtain approval from the workplace.

#### *Eye Movement Desensitization Reprocessing (EMDR)*

EMDR uses eye movements, or other forms of bilateral stimulation, to assist trauma victims in processing distressing memories and beliefs. It is commonly used for the treatment of PTSD. The theory behind the treatment assumes that when a traumatic or distressing experience occurs, it may overwhelm normal coping mechanisms, with the memory and associated stimuli being inadequately processed and stored in an isolated memory network.

### *Medication Management*

Two antidepressant medications are FDA approved for PTSD: sertraline (Zoloft) and paroxetine (Paxil). These are in the selective serotonin reuptake inhibitor (SSRI) class of medications. SSRIs address all common symptom clusters of PTSD. Benzodiazepines (Xanax, Klonopin) are contraindicated but unfortunately are prescribed by physicians who do not typically treat PTSD and stay up to date on evidence-based treatment. Benzodiazepines cannot be stopped without withdrawal effects, and therefore, a treating psychiatrist will have to taper these medications if they had been prescribed by previous physicians. Prazosin is a blood pressure medication that is helpful in treating the nightmares. Sleep disturbance due to factors not related to nightmares might be treated with other sleep medications.

The typical treatment triage for increasing treatment response to a patient for unresolving PTSD is to start with outpatient CBT weekly and then move to outpatient therapy—multiple visits per week—and if the patient continues to be highly symptomatic, then graduate to outpatient CBT plus medication management. Medications may be ordered during the acute phase, but the goal is for the patient to learn nonpharmaceutical means of addressing the PTSD symptoms, and the treatment plan will continually monitor treatment progress and taper and discontinue medications as soon as feasible. If, after a period of medication management, the symptoms continue, then intensive outpatient treatment or inpatient treatment should be considered.

The return to work decision-making is an important conclusion of PTSD treatment. Most first responders return to full duty after brief treatment. Some first responders choose to change careers as they make a work-life balance decision, rather than facing a career change as an impairment. However, a few first responders have had permanent impairments requiring permanent restrictions away from exposure to traumatic events that are a part of the first responder occupation.

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## Maximum Medical Improvement (MMI), Permanent impairment rating, and apportionment for PTSD

Depending on the state regulations, MMI will be addressed by the treating mental health provider. MMI will be clinically determined when all evidence-based treatment modalities have been offered and the patient has no prognosis for further functional recovery.

If a patient declines a modality, or is noncompliant with treatment, then they should be considered at MMI.

Symptoms of PTSD may never resolve from the perspective that they can be triggered by exposure to a new trauma event, but the patient has the tolerance to manage full-time, full-duty work. Some symptoms may persist that do not allow full-time, full-duty work, and permanent restrictions may have to apply.

Every impairment rating system (AMA versions up to #6) and state impairment systems have a chapter on Mental-Nervous Impairments that needs to be followed. However, many mental health providers are not familiar with impairment rating, and there is a risk of overestimating the rating. Guidance for the rating provider should be offered if the mental health provider is inexperienced with the impairment rating system.

## Summary

The benefit of PTSD presumption laws is to ease the burden and stigma of seeking help and to keep our first responders psychologically healthy. Presumption laws that included some prevention and early intervention actions are to be commended. Prevention and early intervention programs have been demonstrated to be very effective. Evolution of crisis response and peer support for first responders has become an integrated service in first responder agencies and union services. Prevention and early intervention programs lead to decreased incidence of PTSD. Experience from the Canadian history of workers' compensation for first responders should give reassurance that the access to evidenced based PTSD care is a positive step. Our experience in the American workers' compensation system is still early but showing similar experience that most first responders recover after a few sessions with a mental health provider experienced in treating first responders. Most first responders stay at work or return to work. The risk of some claimants having extended disability durations and secondary gain can be well managed using the evidenced-based treatment and/or utilization review guidelines and workers' compensation delayed recovery claims management tools.

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## PREDICTIVE ANALYTICS AND WORKERS' COMPENSATION CLAIMS LITIGATION WHAT IS GOING ON?

By Michael D. Lynch, Esq., The Beacon Mutual Insurance Company

As workers' compensation insurance professionals, we are constantly made aware of the growth and value of predictive analytics in almost every aspect of our businesses. One excep-

tion to this growth has been in the area of claims litigation. The following will hopefully broaden your understanding of this still-growing technology and give you hope that we should be able to and will integrate some level of predictive analytics into claims litigation in the not-too-distant future.

From a legal perspective, technological advances are shaping the attorney's duty of competence. The comment to Rule 1.1 of the Model Rules of Professional Responsibility of the American Bar Association sets forth that "[t]o maintain the requisite knowledge and skill, a lawyer should keep abreast of changes in the law and its practice, including the benefits and risks associated with relevant technology."<sup>1</sup> Thus, from one perspective,

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<sup>1</sup>[https://www.americanbar.org/groups/professional\\_responsibility/publications/model\\_rules\\_of\\_professional\\_conduct/rule\\_1\\_1\\_competence/comment\\_on\\_rule\\_1\\_1/](https://www.americanbar.org/groups/professional_responsibility/publications/model_rules_of_professional_conduct/rule_1_1_competence/comment_on_rule_1_1/)



research and implementation of predictive analytics is the next step for your legal department and, I would submit, part of the fundamental research and case work that is at the core of an attorney's job. From another perspective, attorney involvement on a workers' compensation claim increases costs exponentially, and outcome predictability would go a long way to reducing claim costs. Litigation predictive analytics is something that will and should be part of your future.

Notwithstanding its potential benefits, there are a number of reasons why predictive analytics have not taken hold in claims litigation. One is that every state, province, and federal agency has a unique system of claims adjudication. Predictive analytic systems work by applying consistent data to predesigned algorithms, and in litigation, this would include a jurisdiction's laws, rules, and regulations. All of us workers' compensation professionals know that workers' comp rules and laws are different in every jurisdiction. This makes countrywide design and marketability of a claims litigation predictive analytics system very difficult. Add to this the dilemma of defining "when a win is a win" as another element, and you can see the difficulty in developing the universal and consistent data points necessary to show trends.

Artificial intelligence (or AI) is the foundation for predictive analytics. The AI algorithm is engaged in "continuous learning" where it takes relevant electronic information within a large data set and presents the insurance professional with its conclusions. In claims litigation, it ideally would make predictions on what attorney to use in a particular scenario or what way a particular issue would be decided by a trier of fact. There are very few products presently available, but one pledges to provide

insights into reducing the number of injured workers who seek attorneys in the first place as well as to improve outcomes if attorneys become involved. It uses outcomes-based attorney scoring to identify the best attorneys for the case when litigation is unavoidable, and claims to provide insight on optimized settlements for specific cases. All of these scenarios sound meritorious, but how do we accomplish this?

Are you developing or saving the right information to implement such a program through your own design or from a software package you purchase? To do so, a carrier should improve its applications to include well-designed claims administration software, a software program with jurisdiction-specific analytics algorithms and specifically designed portals. With the right algorithm, data and the means to pull data, AI systems may be your next step in dramatically reducing claim costs.

To effectively use such software, a carrier should consider whether it is currently capturing the appropriate claims litigation data and whether it is easily available from its present systems. Are you doing any litigation analysis to assist in litigation mitigation? Are you benchmarking attorneys for costs, compliance with litigation, and billing guidelines? Are you using it in defense attorney selection or in helping with settlement strategies? Is there data available from your courts or adjudicators through Freedom of Information Act requests? All of this data grows daily from a multitude of sources. Whether you plan to begin exploring the use of predictive analytics in litigation management now or in the future, you should begin capturing all of this data now.

Don't forget the potential ethical and regulatory issues. Of course, sharing of personally identifiable data with third parties must comply with any applicable legal restrictions. Ethical rules prohibit third-party legal bill analysis (in order to preserve attorney-client privilege protections), so the same considerations should be given with regard to use of a third-party predictive analytics vendor. Lawyers are representing clients whose best interests are primary and in some states, the client is the employer and not the carrier. In the event that the employer refuses to authorize a settlement, despite the analysis, and the case does settle, does the settlement create a conflict...and if not settled despite the recommendation, does this become part of your data set? Finally, to maintain the integrity of your overall claims litigation program, proper oversight is required to ensure compliance with governance, policy and other rules.

In summary, if claims litigation predictive analytics is not part of your future plans, then it should be. The first place to start is identifying the data you will eventually need to create the best source for your AI tools.

Evaluate the few packages available and see if they are right for your book of business. At the same time, identify the ethical and regulatory parameters and governance needs so that when you do start, it will be done right. As with any large corporate project, the success of your program is driven by the groundwork you do even before you begin.



# AROUND AASCIF



## CALIFORNIA

### COVID-19 Policyholder Support Funds Distribute More Than \$40 Million

To support California businesses during the pandemic and through California’s return to work process, State Fund established [two separate funds](#) to help policyholders defray the costs of protecting workers from COVID-19.

The Essential Business Support Fund targeted businesses with essential workers, as defined by Governor Gavin Newsom. In addition, the Returning California to Work COVID-19 Safety Protocol Fund is for policyholders who are reopening their businesses.

More than 9,500 applications were submitted for the two funds and \$40 million distributed.

### State Fund Declares 10% 2020 Mid-Year Dividend

State Fund will distribute an approximate \$75 million dividend to its qualifying policyholders with policies that took effect between January 1 and August 26, 2020. This dividend equals approximately 10% of the estimated annual premium reported during that period. Through July 2020, State Fund reported approximately \$700 million in estimated annual premium and \$60 million in realized capital gains.

“We’re working hard to support our policyholders in every way we can during this difficult time,” said State Fund President and CEO Vern Steiner. “Due to our strong, stable financial position and the claims outcomes over the past several years, we’re able to return money to policyholders as early as possible.”

State Fund’s Board will consider dividends later this year for the remainder of the 2020 policy year.

### New One-of-a Kind Online Tool Helps Employers Create a Comprehensive, Compliant Safety Plan

[State Fund’s Injury and Illness Protection Plan \(IIPP\) Builder<sup>SM</sup>](#) is an innovative, free online tool available to all California employers. The Builder guides users through each of the eight parts of an IIPP, asking questions about their current safety plans along the way. Employers answer these questions to build a safety program tailored specifically to their businesses.

“It’s easy to use and makes a complicated task simple for business owners; they don’t have to be an expert on safety regulations to create their own safety program and be compliant,” said Lauren Mayfield, senior vice president of safety & health and loss prevention.

### State Fund CEO Vern Steiner Wins the American Cancer Society Fit2Be CEO Challenge

Over the 24 hours of July 16, State Fund CEO Vern Steiner endured sore feet and 90+ degree heat to take first place in the national American Cancer Society (ACS) Fit2Be CEO Challenge by racking up 167,245 steps. That’s 80.52 miles!

Throughout the day, Vern received hundreds of text messages, not only from Team State Fund, but from others within the workers’ comp community.

In addition to the CEO challenge, ACS sponsored a three-week employee step challenge. Nearly 1,400 employees participated and accumulated a total of 80,772 miles—the equivalent of a little more than three times around the world—coming in third place against many nationwide companies. State Fund also took first place in raising the most money toward the fight against cancer—\$82,332!





## COLORADO

### Community Relations Bring COVID-19 Relief

Now more than ever, Pinnacol is committed to supporting initiatives that are foundational to its mission and that improve safety and overall wellness of all of Colorado's workers. To amplify this commitment, and in addition to its regular grantmaking cycles, Pinnacol has made \$2.425 million in COVID-19-related grants.

Recipient organizations focus their support on small businesses and individuals affected by COVID-19. And, it's especially gratifying to see this support in action, benefiting small businesses such as those shared with us by Downtown Colorado Springs in [this video](#).

"Our grant program is a powerful expression of our commitment to caring for the Colorado communities in which we live and work," said Edie Sonn, Pinnacol's vice president of communications and public affairs.

### Pinnacol Named to Ward's 50 List of Top Insurance Providers for Third Consecutive Year

For the third consecutive year, Pinnacol was named on the [Ward's 50 list of best-performing property and casualty insurance companies in the United States](#), selected by benchmarking analysts at Aon.

"It's an honor for Pinnacol to be recognized nationally as one of the 50 P&C insurers for the third year in a row," said Pinnacol CEO Phil Kalin. "This validates the company's continuous focus on reducing customer cost and improving customer experience. Every single person at Pinnacol has contributed to our excellent performance."

### Pinnacol Extends Plans for Remote Work Environment Through June 2021

With winter approaching and many states beginning to see a spike in COVID-19 cases, Pinnacol has decided to continue a primarily remote work environment through at least the end of June 2021. The decision takes into consideration the risk of reentry, vaccine thresholds and efficacy, and testing availability.

A pilot is tentatively scheduled for early 2021 to support employees who want to have focused time in the office. The pilot will allow a limited number of employees in the building with personal protective equipment requirements (including masks) and will require temperature screens and social distancing. A dedicated co-working space will limit building exposure and provide focused areas for sanitation. Employees will have the option to register for up to two days per week, with no requirement to be in the office unless they choose. Pinnacol guidelines will strictly forbid In-person meetings, collaborations, and huddles.

### Pinnacol PPE Assistance Program Extended Through 2020

Many of Pinnacol's customers in the restaurant industry have been hit hard by the pandemic, including closures, reduced capacity, and strict requirements for PPE. To help make things a little easier, Pinnacol launched a PPE assistance program in July for restaurant industry customers. That program has now been extended through the end of 2020 to allow customers who haven't yet participated an opportunity to do so.



## HAWAII

### HEMIC Board Declares \$2.5 Million Dividend

The board of directors of Hawai'i Employers' Mutual Insurance Company, Inc. (HEMIC) has declared a \$2.5 million dividend payable to qualifying policyholders. Since 2007, HEMIC's Board has declared dividends every year, and with this declaration will have returned over \$40 million to Hawai'i policyholders over the last 14 years.

"Like many other businesses, our income statement has also been negatively impacted by Hawaii's weakened economy, due to the impacts of COVID-19," said HEMIC CEO Martin Welch. "Regardless, now more than ever, we believe it is incumbent upon us to share our profits with our policyholders—when they need it most."

HEMIC's mutual structure forms the basis of their commitment to share their success with their policyholders in the form of dividends.

Said Jason Yoshimi, HEMIC president and CFO, “Because of our uniqueness as a mutual insurance company and our commitment to keeping a strong financial position, our balance sheet remains as strong as ever, ensuring our ability to keep our financial promises for many years to come.”

Combined with a previous \$2 million premium COVID relief program that HEMIC instituted earlier this year, this \$2.5 million dividend represents a very significant return to its policyholders.

To qualify for a dividend, policyholders must be insured with HEMIC for more than one consecutive policy term and demonstrate a commitment to safety. Dividends are usually distributed in November; however, HEMIC has expedited its usual process in order to reach policyholders sooner in light of these unprecedented times.

HEMIC is the carrier of choice for over 95% of its policyholders, and also serves Hawai`i as the residual market for employers unable to obtain workers’ compensation coverage elsewhere. HEMIC’s policy premiums are carefully tailored to each employer’s individual loss history. While the law does not allow any insurance company to guarantee future dividends, HEMIC’s board of directors holds dividends as an important goal for the company. As a mutual insurance company, HEMIC is owned and governed by its policyholders, and its mutual company structure is unique in Hawai`i.



## KENTUCKY

### Tim Feld Receives Outstanding Ethics Officer Award

The Kentucky Executive Branch Ethics Commission announced Tim Feld, KEMI vice president and general counsel, as the 2020 Annual Outstanding Ethics Officer Award recipient. The Ethics Commission will issue the award to Mr. Feld at its next meeting on November 16, 2020.

According to a press release issued by the Ethics Commission, “Mr. Feld was selected to receive this award for his efforts to enforce the Executive Branch Code of Ethics while serving as an Ethics Officer for KEMI and implement policies and procedures for the effective enforcement of the Ethics Code.”

“Tim Feld has done an exceptional job leading KEMI’s efforts to provide education to our employees and ensure compliance with the state’s ethics requirements, and I appreciate Tim’s honesty, integrity, and dedication,” said Jon Stewart, KEMI president and CEO. “As a mutual insurance company owned by our policyholders, KEMI is deeply committed to operating in a responsible and ethical manner, and the Ethics Commission has been a valuable resource in providing us with guidance and oversight as we serve businesses throughout the Commonwealth.”

The Ethics Commission established this annual award program in 2015 to recognize an individual serving as a designated Ethics Officer for an executive branch agency for his or her outstanding achievement and contributions in promoting the ethical conduct of executive branch employees.

“KEMI is a quasi-state agency; however, its members must follow the Executive Branch Code of Ethics pursuant to KRS 342.837. Since Mr. Feld became an Ethics Officer, he has demonstrated a remarkable concern for ensuring that his agency, its board members, and its employees not only follow the Ethics Code, but operate beyond the dictates of the Code,” stated the Commission’s release. “He has demonstrated a personal concern for the integrity of his agency that exceeds his contemporaries. He is a vigorous seeker of advice from the Commission staff, often on a weekly to monthly basis. He has diligently assisted the Commission staff with gathering information and researching issues necessary to the enforcement of the Ethics Code.”

“I am grateful to the Executive Branch Ethics Commission for this honor, and I believe it highlights KEMI’s desire to always do the right thing,” said Tim Feld. “Insurance companies are built on trust, and the KEMI team has worked diligently to earn the trust and meet the needs of the policyholders, insurance agents, and injured workers we serve.”



## LOUISIANA

### The LWCC Foundation Launches \$1.1 Million COVID-19 Response Package

At the onset of the pandemic, LWCC recognized the need for immediate action to support Louisiana and shifted the focus of the newly formed LWCC Foundation to distributing grants and gifts to help fight COVID-19.

“Our vision is to make Louisiana home to the healthiest and safest workforce in America,” said John Hawie, LWCC Foundation board chair. “Right now, a sector of our workforce is being challenged in unprecedented ways while trying to make Louisiana citizens safe and healthy, and we’re honored to help them continue to fight this important battle.”

The LWCC Foundation launched a three-phase, \$1.1 million gifts and grants package—Louisiana Well Again: COVID-19 Response Package. Their goal is to directly support Louisiana as it responds to and recovers from the impact of COVID-19, and to build future resiliency for all Louisiana workers.

- **Phase 1** provided for Louisiana’s hardest hit citizens. The foundation donated \$100,000 to Feeding Louisiana, an organization that supports five regional food banks. It is estimated that the gift provided up to 400,000 meals state-wide.
- **Phase 2** was a \$500,000 grants program that benefited 24 hospitals across the state by supporting the work of COVID-19 frontline healthcare workers.
- **Phase 3** is a \$500,000 grants program to fund initiatives focused on improving the health, wellness, and safety of Louisiana workers in the wake of the COVID-19 peak. These initiatives will implement long-term solutions targeting long-existing vulnerabilities in Louisiana workers.

This was a big but important first step for the LWCC Foundation. More information on LWCC’s vision for elevating Louisiana, the LWCC Foundation, and Louisiana Well Again can be found at [louisianaloyal.com](http://louisianaloyal.com).

### LWCC Awards Safest 70

In July, LWCC announced the winners of the 2019 Safest 70 Awards. The company established this award in 2008 to honor policyholders who share a commitment to workplace safety. These award recipients went above and beyond safety expectations to exemplify leadership in employee health and wellness.

Winners are selected from four premium groups starting at \$20,000. They must be in good standing with LWCC for five consecutive years and work successfully with the LWCC Safety Services Team.

A complete list of winners can be found [here](#).

### LWCC Demonstrates Louisiana Loyal for Those Affected by Hurricane Laura

Louisiana Loyal means being there for their state, always, but especially in times of need. [LWCC recognized the community needs](#) of those affected by Hurricane Laura and were able to support the Lake Charles community in a variety of ways.

The LWCC Safety Services team was able to bring its safety trailer to the area and provide Wi-Fi access to agents without service. Additionally, the LWCC IT team developed a hotspot assistance video tutorial that was distributed to agents in the area to remind them of this smartphone feature.

The Safety Services team also responded by developing a shareable resource on generator safety. Generators are critical in the weeks following a storm while recovery efforts are underway, but power outages remain. However, they can also be dangerous if not used properly.

LWCC team members also spent time in the area preparing meals for anyone in the area. A shared meal is a simple comfort that creates community. The team cooked jambalaya at one agent partner’s office and was able to provide a moment of relief to those beginning their recovery efforts.

The impacts of Hurricane Laura are still being felt in Southwest Louisiana. LWCC continues to evaluate how we can support those impacted.





## MAINE

### The MEMIC Group Authorized Early Dividend Distribution

In recognition of the economic stress being experienced by many of its 18,000 Maine workers' compensation insurance policyholders, in June, the board of directors of MEMIC authorized the immediate distribution of a \$17-million dividend to eligible employers.

### MEMIC Announces Recipients of 2020 MEMIC Award for Safety Excellence

Only eight employers along the Eastern seaboard have been honored in 2020 with The MEMIC Award for Safety Excellence. Employers are recognized for their measurable and continuous improvement in workforce safety and injury prevention as a policyholder of The MEMIC Group.

Recipients are Bellhaven Center for Rehabilitation and Nursing Care of Brookhaven, New York; Billings Diesel & Marine Service, Inc. of Stonington, Maine; Brewer South Freeport Marine and Strouts Point Wharf Company of South Freeport, Maine; Hercules Fluid Power Group of Clearwater, Florida; Hissong Ready-Mix & Aggregates, LLC of Kennebunk, Maine; LiveWell of Plantsville, Connecticut; Moore Painting Inc. of Brunswick, Maine; and Morningstar Residential Care Center of Oswego, New York.

### MEMIC Hires Clayton Clayton Cartwright and Sealy Nash

Clayton Cartwright and Sealy Nash have been hired as safety management consultant and senior production underwriter, respectively.



## MINNESOTA

### SFM Leaders Receive Promotions, New Responsibilities

SFM Mutual Insurance Co. has announced new job titles and responsibilities for several of the organization's senior leaders. The following changes were recommended by Terry Miller, SFM's president and CEO, and approved by the board of directors on August 31.



SFM has promoted Jody Rogers to senior vice president and chief human resources officer. Rogers had previously held the title of SVP, Human Resources. Adding the CHRO designation to her title is designed to reflect her role in corporate management and decision-making.

**Jody Rogers** "Jody's guidance on all things people, benefits, compensation, and equity for all employees has been invaluable to our management team as we move forward through a challenging job economy," Miller said. "Her deep understanding of compensation, benefits, flexibility, and community involvement fundamentally supports our ability to hire, train, and retain our workforce."

Another change comes in the form of a new job title for Steve Sandilla, now senior vice president and chief business officer. Prior to this promotion, Sandilla's title was SVP, Strategic Business Operations.



Steve Sandilla

"Steve has more than earned the C-suite designation," Miller said. "Steve's expertise and dedication to SFM's success come through in our positive results and make it clear that he deserves the chief business officer title."

SFM has also promoted Kathy Bray to the role of senior vice president and chief legal officer (previously serving as VP, general counsel, and secretary). Bray continues to function as SFM Mutual Insurance Company's board secretary, also overseeing corporate and board governance, regulatory and risk compliance, and workers' compensation defense through SFM's in-house law firm (Lynn, Scharfenberg & Hollick).



Kathy Bray

"Kathy has clearly moved SFM forward, contributing not only legal wisdom but a keen business mind to our meetings, conversations, and projects," Miller said.



SFM has also created a chief accounting officer (CAO) position for financial and regulatory reporting. The responsibilities are similar to the chief financial officer (CFO) position that Chris Anderson has held since 2018, and Anderson will be SFM's new VP and CAO.

*Chris Anderson* “This change allows SFM to benefit from Chris’s outstanding strengths in accounting, financial reporting, regulatory, premium tax, and income tax compliance,” Miller said. “In addition, he will be able to address the requirements introduced by SFM’s expanding territory of coverage and the increasing demand for information we see from regulators.”



The final change is a promotion for Amanda Aponte, now senior vice president and chief financial officer. As CFO, Aponte will continue to perform the key components from the VP, chief risk officer role that she previously held, plus the added responsibility of overseeing the Finance team.

*Amanda Aponte* “As CRO, Amanda had been responsible for investments and reserves, and adding full oversight of the financial reporting is a logical step for Amanda and for SFM,” Miller said. “This move reflects the changing role we’re seeing in the finance leadership positions today, toward a greater focus on forecasting and managing enterprise risk.”

According to Miller, these changes are designed to position SFM for continued success, both in the near term and for many years to come.

## SFM Foundation awards 2020-2021 scholarships

The SFM Foundation awarded 14 post-secondary scholarships for the 2020–2021 academic school year. The 2020 recipients will receive scholarship dollars over the course of the next four to five years, collectively totaling \$250,000.

The SFM Foundation makes college more affordable for families affected by workplace injuries by offering post-secondary education scholarships to children of parents fatally or seriously injured on the job while working for a Minnesota or Iowa employer.

Scholarships are awarded based on injury severity and impact on the student and his or her family, among other factors.

“We are very excited and proud to be able to offer this many scholarships to such deserving students, especially with the added financial stress families may be currently experiencing due to COVID-19,” said SFM Foundation President Linda Williams.

Three outstanding students were selected for special scholarships: Lillijuana Schneider received the [Pat Johnson Honorary Scholarship](#), Bradley Rohloff was chosen for the [Dick Ahmann Memorial Scholarship](#), and Lariah Boone was awarded the [SFM Employee-Sponsored Scholarship](#).

To see the list of 2020 scholarship recipients, visit [sfmfoundation.com/recipients/](https://sfmfoundation.com/recipients/).

## About the SFM Foundation

The SFM Foundation was created in 2008 by SFM Companies, a regional workers’ compensation insurance group headquartered in Bloomington, Minnesota. SFM Foundation is dedicated to easing the burdens on families affected by workplace accidents. Since its inception, the Foundation has awarded 187 scholarships totaling \$2.4 million. For more information, visit [sfmfoundation.com](https://sfmfoundation.com).

SFM Foundation is an affiliate of [Kids’ Chance of America](#) in Iowa and Minnesota.



## MONTANA

### Safety Pays for Montana State Fund Policyholders

Montana State Fund’s board of directors recently declared a \$20 million dividend. Since 1999, MSF has returned \$306 million to policyholders.

“Montana State Fund is proud to be able declare a dividend for the 22nd consecutive year. While dividends are not guaranteed, we have been able to consistently declare dividends thanks in part to our partnership with employers and workers who are committed to operating a safe and healthy work environment,” said MSF President and CEO Laurence Hubbard.

This dividend will be paid to more than 22,000 Montana employers. The average dividend is \$900, which is a 15% return of premium—on average.

### Bringing Safety to the Classroom

Montana State Fund’s safety team busily mailed personal protective equipment (PPE) to 37 construction trades and industry high school classrooms across the state. This was made possible through MSF’s high school PPE grant program. (The majority of Montana school districts have some form of in-person education).

The selected classrooms were awarded up to \$850 for the purchase of the PPE. This included the choice of safety eye protection, fall protection gear, gloves, and ear protection, suitable for the area of study. New this year, teachers could use a part of their grant money to order safety equipment such as machine guards, welding curtains, or specialized PPE for their classrooms.

### You’re Not Alone

Isolation, stress, and frustration are some of the negative emotions associated with remote work. To remedy these emotions and encourage MSF employee engagement, staff and the executive team have held two parking lot drive-throughs. These COVID-19 friendly events have been a way for employees to safely reconnect with one another, be gifted some little items, and pick up any needed office equipment or supplies. The first to greet the masked employees was President/CEO Laurence Hubbard who snapped selfies with each of them.

To further encourage engagement, individual teams have held social distancing lunches in parks, Zoom calls, and team focused contests and newsletters. The communications team has assembled a series of employee videos with such themes as “let’s see your COVID hair,” “don your favorite mask,” and “show off your pets.” MSF staff will continue to pursue other avenues for employee engagement throughout the coming months.

### The Unexpected

In response to COVID-19, MSF paused the “Signs of Safety” statewide media campaign in mid-March to retool the marketing message. What quickly transpired was “The Unexpected” campaign. The new message is yes, things look a little different right now at work, but no matter how it looks, MSF has and will continue to be your partner in workplace safety. Media strategy includes television and radio ads, podcasts, connected TV, online banner and social ads, and print. View the TV ad at <https://www.youtube.com/user/MTStateFund>.







## NEW MEXICO

### New Mexico Mutual CEO Norm Becker to Retire

After leading New Mexico Mutual through the Great Recession and numerous technological innovations, company president and CEO Norm Becker will be retiring at the end of March 2021.

Becker, a 24-year veteran of the New Mexico insurance industry, joined New Mexico Mutual after serving as CEO at Blue Cross and Blue Shield of New Mexico. His accomplishments also include a lifetime of leadership service with numerous New Mexico charitable and civic organizations.

The search for a new CEO has begun under the leadership of Jay Czar, chair of New Mexico Mutual’s board of directors.

“We have our work cut out for us,” said Czar. “Norm steered his team through challenging economic times and built upon the company’s strengths. We’re thriving today and able to compete against national insurers because of advancements made under his leadership.”

New Mexico Mutual achieved and grew its position as the New Mexico workers’ compensation leader during Becker’s tenure. The company had a 32% share of the New Mexico market in 2019, up from 27% in 2010. New Mexico Mutual also deepened its commitment to New Mexicans, strengthening its service capabilities and accelerating its philanthropic contributions to local service organizations.

### New Mexico Mutual Launches 5-Minute Quotes for Independent Agents

Independent insurance agents can now get workers’ compensation insurance quotes in five minutes or less with **Roadrunner Quick and Easy**, a new quoting solution from New Mexico Mutual.

Named after New Mexico’s beloved (and fast) state bird, the proprietary system has been up and running since launching in July. Roadrunner generates quotes for businesses of all sizes and allows agents to complete the sale for businesses with annual premiums under \$10,000. It was created for the exclusive use of our agent partners.

“Our new, streamlined process gives agents more time to focus on the real work of selling,” says Norm Becker, New Mexico Mutual’s president and CEO.

Agents need only provide basic payroll and business information to obtain quotes identical to those generated in Policy-Center, the company’s standard rating system.



Roadrunner incorporates advanced technologies that make it simple to use. Powered by Salesforce, it provides class codes for agents to choose from and uses Google technology to look up client addresses and fill them in automatically. Roadrunner works on computers, laptops, tablets, and phones.

### Users’ Needs Guide Transformation of newmexicomutual.com

Finding information on newmexicomutual.com became easier and more enjoyable in July, when we launched a brand-new version of our website. Built from scratch, the reimagined site offers updated content; an intuitive user interface; and an attractive, contemporary look.



With help from a leading local website developer, the company worked through the onset of the pandemic and beyond to complete the project. We used advanced technologies to create a secure, highly navigable site that performs as well on mobile devices as it does on desktops.

“With almost 60% of online searches performed on phones, this was critical,” says Claudia Sanchez, New Mexico Mutual’s marketing manager. “Now, users can easily get what they need no matter how they access the internet.”

## New Mexico Mutual Wins Statewide Top Workplace Award

New Mexico Mutual has been named a 2020 Top Workplace by The Albuquerque Journal, the state's leading newspaper.

The Journal recognized 55 companies based solely on surveys completed by the firms' employees. The survey period began in December 2019 and ended just days before New Mexico's first confirmed case of COVID-19.

Employees rated their workplace culture on seven performance measures, including engagement, coaching, and leadership, among others. Employers had to reach or surpass set scores to earn recognition.

"We were excited to earn high marks from our employees," said president and CEO Norm Becker. "Now, the challenge is to keep our culture going in the electronically connected 'workplace' of the COVID-19 era."



## NEW YORK

### COVID-19 Response

In response to COVID-19, NYSIF is waiving interest fees on audit balances from September 1, 2020 through August 31, 2021.

Our COVID-19 response went well beyond the industry standard that suppressed cancellations for 60 days. We provided our policyholders with timely assistance during historically difficult business conditions, offering an enhanced relief package that included:

- Suppressing policy nonpayment cancellations from mid-March through August 2020
- Adjusting premiums and payment schedules to reflect current business conditions
- Waiving all interest charges, installment fees, and late fees for the period

We have continued to urge policyholders who experienced any changes in payroll between mid-March and August to let us know so that we can adjust their premiums accordingly. "We hope our COVID-19 Financial Relief Program made a difference at a difficult time," NYSIF executive director and CEO Eric Madoff said.

### NYSIF PPE Credit

More than 3,200 NYSIF policyholders have received our personal protective equipment (PPE) credit to offset the purchase of PPE and other safety items for employees during the COVID-19 pandemic. The credit remains available to through December 31, 2020.

The program offers a one-time credit of up to 5% of a policyholder's annual premium (capped at \$500) for the purchase of COVID-related safety materials. Eligible equipment includes masks, goggles, gloves, gowns, hand sanitizer, and any other COVID-19 safety-related items. To date, we have credited hundreds of thousands of dollars to our workers' compensation policyholders for the purchase of qualified PPE.

### Audits Made Easy

NYSIF is now offering a Virtual Payroll Verification option to complete yearly workers' compensation audits. The process is convenient and easy. When it's time to verify payroll, policyholders receive a request from NYSIF for an invite to a virtual payroll verification. Using Microsoft Teams, NYSIF allows policyholders to complete the entire process via videoconference with a NYSIF representative. They can even have their brokers attend.



## OREGON

### Responding to Wildfires and Smoke

After Oregon was hit by wildfires in late summer, SAIF responded with tips for employers on how to help workers mitigate the dangers of hazardous levels of smoke. This included a [video](#) and [10 tips for employers on what to consider during a wildfire smoke event](#).

At the same time, SAIF pulled together a cross-divisional team to aid the nearly 70 employees forced to evacuate during the wildfire. Thankfully, no SAIF employees lost their homes as a result of the wildfires, and all are safely back at home.

### Talking About Pandemic Stress

Knowing employees are dealing with stressors like limited human interaction, health concerns, financial anxiety, and uncertainty about schools and childcare, SAIF released additional [mental health guidance for policyholders](#). The campaign

included three tips for employers to help workers build resiliency: talk about mental health, offer helpful resources, and reduce workplace stressors. The campaign was part of a series of articles on mental health in the workplace.

### Moving Ag Seminars Online

SAIF is kicking off our annual farm safety seminars in October. The sessions, which SAIF has done for more than two decades, will be online this year—at least for the start of the season. Seminars normally include four hours of content; these webinars will be split into two sessions that are two hours long. Topics include emergency first aid, ag hacks, safety committee meetings, and choosing the right PPE. The 2021 format has yet to be decided, but those sessions will be finalized in early December. More information can be found at [saif.com/agseminars](http://saif.com/agseminars).



## SASKATCHEWAN

### COVID-19 Heightens the Need for Mental Health Resources in Saskatchewan

There's still much we need to know about the novel coronavirus, but this we know for sure: COVID-19 is straining the psychological health of people in general and of workers and employers in particular.

Last spring, [WorkSafe Saskatchewan](#) posted a number of support tools on its website to help workers and employers manage their mental health through the pandemic. WorkSafe is the injury prevention and workplace safety partnership between the [Saskatchewan Workers' Compensation Board](#) (WCB) and Saskatchewan's [Ministry of Labour Relations and Workplace Safety](#).

As the pandemic persists, WorkSafe is dedicating even more of its resources to mental health supports for workers and employers. This year, the WCB partnered with renowned Canadian psychologist Dr. Joti Samra to build and launch a psychological resource center on its website that will include leadership tools and peer learning groups as well as worker-directed podcasts, videos, webinars, and blogs.

“The center will provide workers and employers with the online tools they need to develop and sustain psychologically healthy and safe workplaces,” says Kevin Mooney, the WCB’s vice-president of prevention and employer services.

Dr. Samra’s research contributed to the development of a Canadian standard for psychological health and safety in the workplace. Dr. Samra, who is also CEO and founder of [MyWorkplaceHealth](#), a Canadian workplace consulting firm, will provide hands-on support to employers by offering online office hours for consultation.

### *Mental health claims accepted by the WCB have increased by more than 200 percent*

The idea for the center took root well before COVID-19 hit North America because mental health injuries had been rising in the province. From 2015 to 2019, the number of primary mental health claims accepted by the WCB increased by 213 percent.

“There are many reasons for such a dramatic increase. In 2016, provincial legislation was changed to expand workers’ compensation coverage to workers experiencing psychological injuries. The amendment established a rebuttable presumption for all forms of psychological injuries,” says WCB CEO Phil Germain. “There’s also a greater awareness of mental health issues

in the workplace and a lessening of the stigma associated with mental health challenges.”

Psychological claims accepted by the WCB account for a small percentage of WCB claims, but the rate at which they’re increasing warrants attention. And, as COVID-19 continues to take its physical, financial and emotional toll, the WCB expects the demand for mental health resources will only rise. (As of late September, the WCB had accepted 176 claims related to COVID-19.)

WorkSafe’s psychological resource center is one part of a long-term psychological health and safety strategy for Saskatchewan. Along with the development of the resource center, WorkSafe has also partnered with the Canadian Centre for Occupational Health and Safety to offer six free online courses on psychological health and safety. Those courses cover topics such as mental health awareness, communication strategies, and health and wellness strategies, to name a few. They can be found at [www.worksafesask.ca](http://www.worksafesask.ca).

A promotional banner for the AASCIF 2021 conference in New Orleans, held from October 3-6. The text is overlaid on a dark green background with a faint cityscape. The main title 'AASCIF 2021' is in large yellow and white letters, with a small green bird icon integrated into the '0'. Below it, 'NEW ORLEANS' is in white outline text, and 'OCTOBER 3-6' is in large yellow letters. At the bottom, it says 'HOSTED BY' followed by the logos for 'AASCIF + LWCC' and 'LOUISIANA LOYAL'.

Find out what’s in store for 2021 from our host, Louisiana Workers’ Compensation Corporation.

[CLICK HERE TO PLAY VIDEO ▶](#)