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PRESIDENT'S MESSAGE

I just returned from the 2025 AASCIF Annual Conference in New Orleans. What an exciting learning experience for me and the other almost 400 members, associates, and vendor partners! Laissez les bon temps! (You can ask Claude, Copilot, Google, or your GEN AI tool of choice what that means!) If you weren't there, I am sure your colleagues will give you a great big case of FOMO when they tell you about the interesting speakers, panels, and presentations—let alone the fun tours and great food we enjoyed.



A slight glimpse into the program and the benefits members get from AASCIF can be provided by my highlighting the three keynote addresses:

- Sanjay Gulati's opening presentation highlighted How to Be Bold! We were encouraged to have courage in our everyday and work lives. Being bold and showing courage is not about being the lone hero but instead Gulati explained how our jobs as leaders are to make our teams and companies more courageous overall when it comes to bringing about and adopting change.
- Remembering to be bold and courageous is very important when we consider Jonathan Chen's message of how powerful AI is and how it is smarter, faster, and more empathetic than the average physician. That's right, there are peer reviewed studies and data that support that statement. Chen reminded us that we need to find ways to use AI in our work life or we will be left far behind.
- Julie Laperouse and Seth Irby took those learnings and told us how to put them into our lives and how to bring back all our ideas (well maybe just one or two!) to get our organizations ready to face the challenges ahead.

Thinking about these things, I remember some of the first conferences I attended in the 1980s and how technology was changing our lives and work. While there was definitely concern that jobs were going to be eliminated, there was excitement about all of the mundane and repetitive transactional tasks that were going to be eliminated as well.

We can do the same thing with current technology. Our AASCIF membership and connections to our colleagues and vendor partners assist us in keeping our AASCIF firms at the forefront of the changes we need to make to keep delivering on our shared mission of keeping employees safe and helping the injured heal.

As we move into 2026, consider attending the annual conference in Albuquerque, New Mexico, July 26–29. I promise: You won't regret it!



FEATURES From AASCIF

A WORKERS' RECOVERY MINDSET DRIVES OUTCOMES

By Mark Pew

Submitted by the AASCIF Claims Committee

Workers' Compensation is a unique ecosystem. It began in the United States with the Grand Bargain in 1911 as a simple tradeoff between workers' rights to sue employers and guaranteed, but limited, compensation for work-related injuries. It became more complicated as states adopted their own versions that uniquely addressed their legal, statutory and cultural nuances. Over time, work comp became even more complicated with case law, expanded benefits (like presumptions), and an ever-increasing number of stakeholders with their own part to play in the claims process.

All these complexities hardened into a process driven system. While work comp's primary focus is to return an injured worker to work, as claim counts grew, so did the need to be efficient. This created an environment where the process was more important than the person as the industry depersonalized the process to keep up. The more years a claims professional was involved in the system, the more they developed a natural cynicism from having seen the process fail and bad actors emerge.

The over-prescribing of opioids that created a societal crisis in the early 2000s was an indicator that work comp did not pay enough attention to the details of a human being's journey through a statutory maze. The easy way out—prescribing a cocktail of medications—became the status quo. Two individuals could have similar injuries and competent care but one would return to work and the other never did. It became obvious that what happens between their ears and at home impacts their willingness and ability to recover as much as their injury or disease.

This underscored that the bio-medical treatment model was sometimes insufficient to deliver a positive functional outcome. During the 2010s, the industry became more familiar with a bio-psycho-social treatment model that incorporated the whole-person. Beyond procedures and prescriptions, the industry gradually began to embrace tools like cognitive behavioral therapy. This new perspective was reinforced by

COVID-19 when the industry better understood what it's like for tomorrow to be dramatically different than today... just like an injured worker. In addition to the now more widely accepted bio-psycho-social treatment model, terms like emotional intelligence, empathy and advocacy became more accepted.

All of this has led to a movement for the industry adopting a workers' recovery mindset which can be defined as being able to see the person, not just the claim. This is used to design care, communication, and decisions around that whole person. Everything should be focused on their recovery and addressing obstacles along the way.

Some adopted this mindset years ago and are focused on continuing to refine their processes. Others may be currently changing processes to adapt to this new approach to claims. Still others may have recently discovered this concept and are trying to understand how it impacts them. Wherever on the continuum you may find yourself, the reality is that this claims "mindset" is no longer a nice-to-have. The younger generations taking over workplaces want value-driven purpose in their day-to-day tasks and will leave to find it elsewhere. So, what is it and how can it be implemented?

Bio-Medical vs. Bio-Psycho-Social

The Bio-Medical model:

- Focuses almost exclusively on physical injury or illness
- Emphasizes diagnosis, medical tests, and procedures as the primary path to recovery
- Measures recovery by physical healing and symptom reduction
- Tends to overlook emotional, social, or environmental factors affecting outcomes

The Bio-Psycho-Social model:

- Recognizes recovery is influenced by the interaction of biological, psychological, and social factors
- Emphasizes whole-person care, including pain, stress, family, work environment, and financial concerns
- Measures recovery by return to function, quality of life, and overall well-being

 Encourages a collaborative, inter- / multi-disciplinary approach involving providers, employers, adjusters, and the worker

The bio-psycho-social treatment model thinks in terms of function-first care, active and empathetic listening, and early screening for barriers to recovery so they can be addressed. Instead of being process-driven, this treatment approach is outcomes-driven and open to identifying and addressing issues beyond the compensable injury that are impacting forward progress.

These external issues can include physical comorbidities like chronological age, obesity, diabetes, cardiovascular disease, auto-immune diseases, substance abuse, and others. These issues can have an impact on the healing process and need to be accommodated as part of the whole-person approach. However, issues not easily codified into an ICD10 can have an outsized impact on recovery.

The pre-2010s "psych as a compensable diagnosis" fear and argument that "what happened to them as a child has no bearing on their meniscal tear" are no longer viable. Limited formal education or medical literacy, lack of respect for authorities, financial distress, Adverse Childhood Experiences (www.cdc. gov/aces/about/index.html), a poor relationship with their manager, and others can retard the return to, and stay at, work process. As an example, their physical abuse as a child could negatively impact their level of trust and resilience as an adult. The good news is that bad circumstances, past or present or perceived future, do not guarantee bad outcomes. There are as many examples of people overcoming challenging circumstances as there are that succumb to them. However, ignoring their potential impact on a person's journey through a system and lexicon they do not understand while worrying about their future functional, financial and relationship prognosis is no longer reasonable.

Empathetic, enlightening, and consistent communication is the ultimate solution to understanding the whole person to help them achieve their recovery. Return to work is the goal, but a return to function is the measuring plumbline to get there. But how can these non-ICD10 factors be identified?

Identifying and Managing Risk – Psychosocial Flags

According to Physiopedia (www.physio-pedia.com/The Flag System), there are a series of flags that will indicate potential psychosocial issues. Setting aside the "red flags" that indicate serious pathology like a broken ankle and "orange flags" that indicate psychiatric symptoms, the following flags are more

pertinent to work comp claims. Identifying these flags early via conversation and observation can reduce their influence on delayed recovery.

Yellow flags are individual beliefs, emotions, and pain-coping strategies. Symptoms include fear of pain or re-injury, catastrophic thinking ("I'll never get better"), low recovery expectations, poor coping skills, and high stress. A very simple way to uncover this is to ask, "when do you anticipate going back to work" and wait for their answer. This should be asked at the onset of their claim and throughout the process. Anything other than a positive, definitive response could mean they have doubts about their recovery that will impact their recovery. These Yellow flags can be addressed by:

- Normalizing their fears ("You've never been through this before so I can understand why you're not sure of the future")
 - o This is where empathy is key in connecting with them on a more than superficial level
- Encourage active self-management ("I'm the coach of a team that's ready to help but you are the quarterback of your recovery")
 - o Do not let them be passive passengers but activate and empower them to be in the driver's seat
- Connect to supportive resources
 - o This might include a referral to EAP to help them manage their finances

Blue flags are perceptions about the relationship between work and health. This can be evidenced by:

- A belief that work will make the condition worse
- A lack of supervisor or coworker support
- A perceived job insecurity
- No modified duty options

To overcome this, their therapist can explain to them the difference between good pain (promotes healing) and bad pain (exacerbates injury). Often an employer is their worst enemy by treating the injured worker as persona non gratis that creates (un)intended animosity. Or the employer has no plans for modified or transitional duties that brings the person back into the workplace to reaffirm their value to the organization (hint: that does not mean counting paperclips). In those cases, the injured worker's perception is reality and can be addressed by rapprochement.

Black flags are system or contextual obstacles. In other words, the workers' compensation process is the actual source of the issues. That includes legal disputes, the financial stress of loss of full income, and bureaucratic delays in treatment or approvals. There is a reason why the public often assumes that insurance is always trying to find ways to deny claims because that has been the experience of many.

The solution is to simplify and democratize the processes as much as possible. In 2025, that could mean apps an injured worker can use to have real-time access to claims information. It could mean text messaging directly from the claims professional to provide periodic status updates or wish them well just prior to their surgery. It could mean more transparent communication that is geared towards their understanding (don't use 75-cent words when they have a 25-cent vocabulary). It could mean better coordination of services among the various stakeholders, so they do not receive contradictory or redundant information. It could mean a quick transition to problem solving mode when an obstacle does arrive. Just because the system is complicated does not mean that it needs to act that way.

Whatever the flags—and there could be multiple—the earlier they are identified and risk management applied, the faster barriers can be removed and forward momentum regained towards recovery.

Identifying and Managing Risk – Social Determinants of Health (SDOH)

Social Determinants of Health, or SDOH, has only recently come to the forefront of discussions within work comp.

According to the CDC (www.cdc.gov/public-health-gateway/php/about/social-determinants-of-health.html), SDOH are "non-medical factors that affect health outcomes and include the conditions in which people are born, grow, work, live, and age." The five indicators are:

- Education Access and Quality
- Health Care Access and Quality
- Neighborhood and Built Environment
- Social and Community Context
- Economic Stability

The list above is common sense. Who people are, who they're surrounded by, and the resources to which they have access are going to impact their ability to fully engage in their own recovery process. For example, if they do not understand the to-do items that a physician gives them, they will not be able to do them. If they have historically not focused on their

own emotional and physical well-being, they bring those deficiencies into the recovery process. If they do not have reliable transportation, they might not be able to attend all their physical therapy visits. If they are surrounded by negative people or an unsafe environment, their mind could be negatively influenced. If they cannot pay for necessities because their indemnity payments are substantially less than their usual income, they will have to worry about financial sacrifices required of their family. Addressing SDOH is firmly within the scope of a workers' recovery mindset.

Evidence for the Skeptics

The "old" way of thinking would be that these issues are not our problem. Our responsibility is to return them to work by restoring function to the compensable body part... Period. We will give them everything that is due to them by statute or regulation or case law... And nothing else. We will manage costs and treatments tightly so we can settle and close the claim... ASAP. You can lead a horse to water, but you can't make them drink... Their issues are their issues, not ours.

There is nothing wrong with determining compensability, staying within the confines of the rules, or ensuring that treatment is reasonable and necessary. Those and other claims best practices for decades are still part of the equation. The adoption of a workers' recovery mindset, however, understands there are other things that can impact the recovery timeline. Pretending they don't exist only increases the duration of disability, amount of indemnity and medical benefits, size of the settlement amount, and possibility of litigation and friction.

All those side effects from ignoring the whole-person—duration, cost, friction—have as many negative implications for employers (and those that work on their behalf) as for the injured worker. While the concept of left-brain/right-brain dominance is apparently an unscientific myth, the comparison does have its benefits. Right-brained (intuitive) people will argue that doing the right thing is motivation enough. Left-brained (logical) people will search for a return on investment (ROI). For those of the latter persuasion, following is some evidence that a workers' recovery mindset provides positive financial benefits:

- Workers Compensation Research Institute (WCRI), "Poorer Recovery Seen among Injured Workers with Psychosocial Risk Factors." Psychosocial risks drive delayed recovery due to fear avoidance, low mood and coping skills. Read more at www.wcrinet.org/news/detail/wcri-poorer-recovery-seen-among-injured-workers-with-psychosocial-risk-factors
- Institute for Work & Health, "Seven 'Principles' for Successful Return to Work." Among the principles is

- "The employer makes early and considerate contact with injured/ill workers." Read more at www.iwh.on.ca/tools-and-guides/seven-principles-for-successful-return-to-work.
- The RxProfessor, "An Advocacy Success." Read more at https://workcompcollege.com/an-advocacy-success/.

The Roadmap for Implementation

It should be obvious by now that implementing a workers' recovery mindset is less about technical skills (three-point contact, ensuring drug formulary compliance, eliminating upcoding by medical providers) and more about soft skills. These skills can be innate to some people—they naturally (or were nurtured to) care for people in an empathetic manner. For others, those interpersonal skills can be learned over time. Everyone in a claims organization, whether the claims examiner or the nurse case manager or the customer service representative or management or attorney, comes into their role with some level of competence in these soft skills. This means that, before you embrace a workers' recovery mindset, you may need to better equip the full team to adopt that mindset as corporate culture.

The following is a starting point to consider for implementing a workers' recovery mindset:

- Upskilling: Claims professionals (emotional intelligence, motivational interviewing, active listening), supervisors (modified duty opportunities), providers (psych-informed practice), and nurses (health literacy bridge).
- **First-contact:** Reframe the opening interaction with an injured worker to show empathy, establish expectations, and craft a shared plan. As mentioned earlier, this is the first (but not last) time to ask the simple question "when do you anticipate going back to work?"
- Function-first care: Focus on treatment that prioritizes active care and self-management. As Dr. Mel Pohl famously said, "motion is lotion."
- RTW from Day One: Since worklessness is a statistically
 more dangerous comorbidity than smoking, think in terms
 of return to work from the very beginning. This might
 include a stronger focus on transitional or modified duty
 earlier than usual.
- Communication: Use words that humanize (from "investigation" and "claimant" to "understanding" and "injured worker"). Set expectations for all parties (including the injured worker) early in the process. Summarize each touchpoint and be transparent about challenges to establish rapport and trust.

- AI: Judiciously use artificial intelligence to automate routine, repetitive tasks (with human-in-the-loop monitoring) to free up time for claims professionals.
 That newly found time can be utilized to ask open-ended questions of the injured worker and wait, maybe in awkward silence, for an answer that will provide insights into their mindset.
- Advancing Advocacy Playbook: A diverse group of work comp experts created a helpful playbook on how to implement advocacy into the claims process. The 60-page document is filled with strategies and tactics that can be incorporated in whole or in part. It can be accessed on LinkedIn at www.linkedin.com/company/advancingriskmgmt-advocacy.

As you implement these potentially new methods, a form of measurement should be established so progress can be monitored:

- Desired Outcomes: Identify objective data from the entire claims dataset that can create a baseline with regularly scheduled assessments. This could include:
 - o Days to first contact
 - o Days to first active care
 - o Percentage with transitional duty
 - o Number of lost workdays
 - o Litigation rate
 - o Percentage screened for psychosocial risks
 - o Percentage of care plans with a RTW goal
 - o Total cost of claims
 - o Timeline to settle claims

This can also include subjective data such as:

- o Injured worker satisfaction survey
- o Claims examiner satisfaction survey
- o Screening tool(s) results

You do not achieve what you do not measure, so establishing up-front how progress will be monitored will yield not only more quality data but higher adherence.

 Professional Development: Identify specific curriculum that will reinforce this new mindset and approach to claims. Technical skills like determining compensability can be easily taught by any expert. Explaining emotional intelligence and providing guidance in how to utilize it is a more nuanced lesson.

- **Determine ROI:** Following is a short list of ways in which a workers' recovery mindset can be not just beneficial to the injured worker and their family but also to the employer and claims organization:
 - o Reduced medical costs through appropriate, timely care
 - o Lower indemnity costs by shortening disability duration and accelerating return-to-work
 - Fewer litigated claims since injured workers who feel supported and respected are less likely to seek legal representation
 - Decreased claim complexity as early intervention on psychosocial risks prevents escalation into catastrophic or chronic claims
 - o Improved workforce productivity with faster reintegration of employees into their roles
 - o Lower reserve requirements since claims close faster and with fewer complications
 - o Better vendor efficiency because coordinated care reduces redundant services
 - o Reduced chronic pain risk because early psychosocial interventions reduce fear-avoidance and catastrophizing
 - o Increased treatment adherence as workers are more engaged and trusting of their care team
 - o Greater overall satisfaction for injured workers leading to smoother communication and cooperation

In Conclusion

Adopting a whole-person recovery mindset is not just a philosophical shift. It is a practical strategy that improves functional outcomes for injured workers and the financial outcomes for organizations. Seeing the person behind the claim, addressing psychosocial and workplace barriers early, and keeping recovery as the shared goal, creates a strategic ecosystem that restores health, reduces costs, and builds trust. The choice now is whether to maintain the decades-long status quo or take the next step toward a model that is humane, efficient, and effective.

About the Author

Mark Pew is an award-winning international speaker, author and jurisdictional advisor in Workers' Compensation. The RxProfessor has focused on the intersection of chronic pain and appropriate treatment since 2003. Mark created "Qualified Medical Intervention" that won a 2012 Business Insurance Innovation Award. He received WorkCompCentral's Magna Comp Laude award in 2016, IAIABC's Samuel Gompers Award in 2017, named "Top 100 Healthcare Leader" by IFAH in 2021 and received the Health 2.0 Outstanding Leadership award in 2022. He is co-founder of The Transitions and Advancing Advocacy and has served on the Advisory Boards of Harvard MedTech, Simple Therapy, and Goldfinch Health. Mark was inducted into Who's Who in America in 2024. Contact Mark at mpew@workcompcollege.com.

RECHARGE WITHOUT GUILT

By: Heather McDaniel—SAIF, Andrea Bailey—SCIF, Mary Selzler—WSI

Submitted by the AASCIF HR Committee

As employers focused on the health, safety, and wellness of our employees, providing adequate time to disconnect and recharge seems like an obvious way to keep employees happy and healthy. However, for many employees, taking time away from work can be difficult. Employees who do step away often promise to be available, check in regularly to ensure important emails are tended to, or log in from a café or hotel lobby to ensure meetings aren't missed. Quickly responding to urgent messages or taking a phone call while using time off has become normalized in our hyper-connected world.

Often, this reluctance to fully disconnect is tied closely to the guilt of being absent, concerns about commitments and priorities slipping through the cracks, burdening colleagues, and the inevitable mountain of work upon returning to the office.

While staying tethered to work can seem like the best way to ensure stress-free time away, this inability to fully disconnect is unlikely to benefit either the employee or the employer.

The Benefits of Disconnecting

According to a 2023 survey from the Pew Research Center, almost half of employees take less time off than their employer offers¹. The reasons vary from employees not feeling that they need the time away, worrying that they might fall behind at work, concerns about co-workers having to take on additional work, negative consequences for job advancement, job loss, or that they are discouraged by their manager or supervisor for taking time away.

For those workers who do utilize their paid time off, 54% say they still check in with work. are checking work while they're away². Despite these statistics, disconnecting from work can have a positive impact on an employee's mental and physical health and overall productivity.

Health and Wellness:

According to a 2021 article from Forbes, using vacation time not only increases mental health through stress reduction, improved sleep, and increased mindfulness but can also decrease the risk of medical conditions such as heart disease,

stroke, and type II diabetes⁴. It is also recognized that "stress is thought to influence disease risk through a number of pathways, including alterations in health behaviors such as smoking, alcohol consumption, compliance with medications, and emotional states." Additionally, the medical community has recognized that normal leisure activities including exercise and sleep may also have influence on the risk of disease; reasoning that vacation could serve as a protective factor in an employee's health⁵.

A 2000 study performed at the University of Pittsburgh Department of Psychiatry, analyzing the impact of vacations on more than 12,000 men's health, found that more frequent annual vacations during the study resulted in reduced risk of death during the 9-year post-trial period. The study concluded that more frequent annual vacations appeared to have a positive impact on health, presumably by way of stress reduction, increased physical activity, and social interaction⁵.

Productivity and Results:

Time away, stress reduction, productivity, and creativity in the workplace are also closely tied. According to a 2018 survey conducted by the American Psychological Association's Center for Organizational Excellence, 68% of working Americans reported a more positive mood upon returning to work after vacation time, 66% reported more energy, 57% reported increased motivation, and 57% reported feeling less stressed. In addition, 58% shared that they were more productive and 55% shared that their work quality was better upon returning to work⁶.

Brain science also supports the connection between a relaxing vacation and employee creativity. Emma Seppala, author of the book The Happiness Track: How to Apply the Science of Happiness to Accelerate Your Success, found that taking time may boost creativity through exposure to new experiences and creating opportunities for our brains to generate alpha waves critical to this process³. According to Brigit Schulte, author of Overwhelmed: Work, Love and Play When No One Has the Time PET scans and MRIs demonstrate that creative moments and cognitive flexibility often take place when a person is most relaxed ⁴.

Practical Tips for Successfully Stepping Away

Despite the clear benefits, there's little more difficult than returning to work from a relaxing time away, only to find an inbox stacked with urgent messages and a calendar full of aging tasks. While it's unlikely that every task or email can be

managed during an absence, there are some practical ways for employees to be strategic about enjoying time away without taking work along for the ride.

If extended time away isn't feasible, evidence points toward short vacations (as little as 4 days) also having positive effects ⁷. Consequently, an extended weekend may be a great alternative for employees struggling to disconnect.

Plan Ahead

To ensure employees are truly able to unplug and recharge, it's important to plan ahead. Employees should ensure time is clearly on the calendar and email out of office. Planning time off in advance also allows for scheduling important tasks around vacation days.

While ideally, cross-training has already occurred, upcoming vacation time may be a good opportunity to consider where gaps in cross-training exist. For senior leadership, consider providing growth opportunities for high-potential employees to take on additional responsibility during leaves. Employees identified for future succession and on a path for growth would be well-served to be provided opportunities for stretch responsibilities when supporting vacation for a succession role. By normalizing cross-training and role-backup, organizations can ensure that essential duties don't depend on a single individual, making it easier for employees to take time off without worry.

Preparing for unplanned situations or emergencies can also be crucial to uninterrupted time away. Advanced contact with colleagues who can take over important duties, answer questions, or make approvals will help reduce the chance of needing vacation-time contact with work. Finishing tasks that can be completed, identifying meetings or deadlines that can be rescheduled, tasks that others can handle, and work that can be declined altogether (often referred to as the four-D's strategy: do, delegate, defer, and decline) can also help prepare employees to step away.

Finally, blocking out an extra day when returning from time away to catch up on any missed work and respond to outstanding emails can help ease the overwhelm associated with returning from time away. Keep this day free of meetings and create a system to ensure you are attending to the most important things first, including a specific time to manage accumulated email.

During Time Off

Employees should ensure co-workers and customers know they'll be unavailable and should leave behind their laptop or work phone to avoid temptation to "just check in." If employees use a personal device for work, they should consider turning off notifications for the duration of their vacation. If checking in is necessary, it should be limited to pre-scheduled times as much as possible. Ask employees still working not to initiate unnecessary communication with employees on planned time off.

If work is necessary during scheduled vacation time, it's imperative that employees set clear boundaries and stick to them. If work requires too much attention during time away, rescheduling to a less busy time can be an avenue to ensure the ability to disconnect.

A Culture of Support

While it might be easy to place the responsibility of taking and protecting time away on the employee, employers also share the responsibility of making this time feasible and supported for employees. The APA survey demonstrated a positive impact from vacation time ⁶. The benefits to both the employee and work quality and productivity were significantly increased when the organization's culture encouraged time off, compared to those organizations that did not encourage time off. Furthermore, the APA found that employees who report higher levels of psychological safety were more likely to report a culture that respects time off.

Creating a culture that supports healthy time off utilization begins with leadership. According to the Pew Research Center one-in-ten employees say their manager or supervisor discourages them from taking time off ¹. It is essential for leaders to set clear expectations for employees regarding the use of paid time off and support reasonable time away.

A supportive culture can include effective work-life policies and practices, normalizing not reaching out to employees on vacation, respecting out-of-office messages, cross-training and developing employees for stretch assignments, establishing boundaries as a normal part of taking time off, and avoiding the glorification of constant connection. Leaders should set the example that taking un-tethered time away is essential and supported.

Providing these mechanisms for employees to fully disconnect and leading by example can start to shift the organization's culture, fostering a narrative of support and self-care around time off.

The evidence is clear that when an organization and its employees adopt a mindset that values rest and time away as a strong contributor to employee wellness and productivity, both the employee and employer can benefit.

References:

- 1 How Americans View Their Jobs | Pew Research Center
- ² 2024 Work in America Survey: Psychological Safety in the Changing Workplace
- Three Science-Based Reasons Vacations Boost Productivity | Psychology Today
- 4 Why Taking Vacation Time Could Save Your Life
- ⁵ Are Vacations Good for your Health? Gump, Matthews, UMASS
- ⁶ American Psychological Association | Work and Well-Being Survey
- Short Vacation Improves Stress-Level and Well-Being in German-Speaking Middle-Managers—A Randomized Controlled Trial

REVISITING THE GRAND BARGAIN: A 2025 UPDATE ON WORKERS' COMPENSATION JURISPRUDENCE

By Lyndsey Beidle Meninger, Vice President of Legal Services at Chesapeake Employers' Insurance Company, Chair of the AASCIF National Issues Committee

Submitted by the AASCIF National Issues Committee

The Grand Bargain—workers' compensation's foundational compromise—continues to evolve under the scrutiny of courts across the country. While the original intent was to provide a no-fault system and exclusive remedy for workplace injuries, recent decisions from state appellate courts continue to reveal a shifting and questioned landscape that our community needs to be aware of and take note for future evolution of the Grand Bargain. These cases challenge the boundaries of employer immunity, the definition of compensability, and the scope of statutory exclusivity. In 2023, the AASCIF National Issues Committee wrote an article entitled the "Importance of Understanding and Remembering the Grand Bargain", as a continuation of that article, and as courts increasingly revisit and reinterpret the principles of the Grand Bargain, it is more important than ever to reaffirm our commitment to preserving the integrity and purpose of the Grand Bargain in workers' compensation. As we explore recent cases around the country below, one can see how the foundation of the Grand Bargain is being questioned and scrutinized more than ever before, and we must continue to highlight why the Grand Bargain is important to all parties involved in workers' compensation.

Massachusetts: Rosa v. Affordable Interior Systems Inc., No. 24-P-540 (Mass. App. Ct., Aug. 27, 2025).

In *Rosa v. Affordable Interior Systems*, the Massachusetts Appeals Court reaffirmed the exclusivity of workers' compensation for temporary employees. The injured worker, injured while on assignment through a staffing agency, attempted to sue the host employer for negligence, gross negligence, and reckless, willful, and wanton conduct, bypassing the workers' compensation act, arguing that the host employer utilizing the staffing agency was not specifically named in the "alternative employer endorsement" of the staffing agency's workers' compensation policy. The Court held that the staffing agreement qualified the host employer as an "alternate employer" under the workers' compensation policy, and the host employer need not be specifically named in the endorsement, thus granting

exclusivity of their workers' compensation act. This decision underscores the strength of exclusivity provisions even in temporary employment arrangements and upholds policy endorsements.

Texas: Lilly v. Weisinger, 2025 Tex. App. LEXIS 6851 (Aug. 28, 2025).

In *Lilly v. Weisinger*, the Court of Appeals for the Ninth District of Texas barred a negligence suit against a farm owner where the injured worker was covered by workers' compensation through the owner's company. The employee was working for a water well drilling company for the farm owner but had been instructed by his manager to assist with hay tedding at the owner's personal farm. Due to the deviation from the water well drilling, the injured worker argued that the exclusive remedy provision did not bar his negligence claim. However, the Court held that because the work assigned was temporary and allowed under Texas law, the injured worker was an employee of the owner, even when tedding hay, and that exclusivity of workers' compensation prevailed. This case illustrates Texas's nuanced approach to exclusivity, particularly when the employment relationship is informal or disputed.

Maryland: Ledford v. Jenway Contracting, 490 Md. 666 (2025).

The Supreme Court of Maryland addressed the limits of wrongful death claims in *Ledford v. Jenway Contracting.* In a 4-3 opinion, the Court upheld the Appellate Court's decision that exclusivity of remedy applied to an adult daughter of a deceased worker despite her non-dependency status in the Workers' Compensation Act, and therefore, she was unable to file a Wrongful Death Act suit (WDA).

The Supreme Court of Maryland posed two questions in the case: 1. Does the Workers' Compensation Act's exclusivity provision bar a deceased covered employee's non-dependent, adult child from pursuing claims against the deceased covered employee's employer? and ². If so, does the Act conflict with Article 19 of the Maryland Declaration of Rights? The Court held that the adult daughter was barred from filing a wrongful death act suit because of the exclusivity provided in the Workers' Compensation Act, and that barring same did not conflict with Article 19.

The majority held that the Act clearly limits an employer's liability to what is provided in the Act, which does not include wrongful death claims by non-dependent adult children. Although the daughter received no benefits, the employer's compliance with the Act (e.g., medical and funeral benefits) triggered the exclusivity provision.

On the constitutional question, the Supreme Court of Maryland found no Article 19 violation, noting that non-dependent children have never had this remedy under Maryland law. The Court emphasized that if the Maryland legislature had intended to change that in the 1997 WDA revision, it would have amended the Workers' Compensation Act accordingly.

Ultimately, the Court upheld the Grand Bargain of the Workers' Compensation Act, shielding compliant employers from additional liability. This decision reinforces the scope of the Grand Bargain and its limitations on third-party claims, though the narrow 4–3 ruling—accompanied by a strong dissent—signals ongoing judicial debate over both the majority's findings and the broader implications for workers' compensation law in Maryland.

Pennsylvania: *Herold v. University of Pittsburgh*, 329 A.3d 1150 (2025).

The Supreme Court of Pennsylvania ruled in Herold v. University of Pittsburgh that the state's Occupational Disease Act's ("ODA") exclusivity provision does not apply when a disease manifests beyond the statutory limitations period. The Court analyzed whether a disability or death resulting from an occupational disease (in this case, mesothelioma) which occurs beyond the four-year limitations period set forth in their workers' compensation statute, removes the claim from the purview of the ODA's exclusivity clause, that would not otherwise allow a suit against an employer. (In this case, the decedent died eighteen years after he was last exposed to asbestos and seven years after his last date of employment.) The Supreme Court had to apply the decision of Tooey v. AK Steel Corp., 81 A.3d 851 (Pa. 2013) to this case. In Tooey, the Court allowed a civil action for injuries which manifested outside of the Workers Compensation Act's 300-week limitations period. This case extended Tooey's holding to the ODA. The Court held that "a common law action for relief for a disability or death resulting from an occupational disease covered by the Occupational Disease Act-and which occurs beyond the fouryear limitations period contained in the ODA, rendering such disability or death non-compensable-does not fall within the purview of the ODA's exclusivity provision." This ruling allows civil suits for latent occupational diseases, again, challenging the traditional boundaries of the Grand Bargain.

Illinois: Kordas v. Bob's All Bright Electric Inc., 2025 IL App (3d) 240482.

The Illinois Appellate Court reaffirmed the strength of the exclusive remedy provision under the Illinois Workers' Compensation Act. The case involved an employee who was seriously injured when a coworker—who was also the owner's son—attacked him with a shovel on a job site. The employee sued the employer for negligent hiring and supervision, arguing that the company knew of the coworker's mental health issues and failed to act.

The Court held that their Workers' Compensation Act provided the exclusive remedy for the injuries because the employer did not intentionally cause or direct the assault. Under Illinois law, an injury is considered "accidental" from the employer's perspective unless the employer deliberately intended harm or engaged in conduct substantially certain to cause injury. Allegations of negligence—even involving known mental health concerns—do not rise to the level of intentional torts that would bypass the Act's exclusivity.

The decision underscores in Illinois that even violent acts by coworkers fall within the scope of workers' compensation coverage unless the employer's conduct meets a high threshold of intentionality. The Court distinguished this case from others where employers concealed known dangers, emphasizing that mere failure to supervise or disclose mental health issues does not defeat the exclusivity bar in Illinois.

New York: *Lin v. Lu*, 2025 NY Slip Op 00309.

The New York Appellate Division emphasized procedural primacy in *Lin v. Lu*, where a wrongful death claim was filed following a fatal workplace accident by the injured workers' decedents. The appeal from the lower court was by the employer, who had moved for summary judgment dismissing the complaint, arguing that the decedent was injured in the course of her employment and that the workers' compensation law provided the exclusive remedy for the damages alleged in the complaint; however, that motion had been denied and this appeal followed.

The New York Appellate Division agreed with the employer and remanded the case for a determination by the New York Workers' Compensation Board, reaffirming that courts must defer to the Board on questions of compensability before proceeding with civil litigation. Of note, the New York Appellate Division did not go so far as to say the outcome should the decedents not prevail in front of the Workers' Compensation Board.

Florida: Steak n' Shake v. Spears, 2025 Fla. App. LEXIS 4564.

In *Steak n' Shake v. Spears*, following a workplace armed robbery, the injured worker received no physical injury,

but had severe emotional distress, filed a claim against her employer instead of a workers' compensation claim as mental injuries in Florida are not deemed compensable unless they are accompanied by or caused by physical injuries. The lower court allowed the civil lawsuit to proceed, however, the Florida Fifth District Court of Appeal vacated the trial court's ruling and held that even claims for mental injuries must first be evaluated by the workers' compensation system, reinforcing the procedural gatekeeping role of the system. However, once the claim is denied by the workers' compensation system, the injured worker does have the right to pursue civil remedies against their employer. However, even under *Steak 'N Shake*, employers may not deny compensability of a workers' compensation claim and subsequently assert civil immunity if the injured worker then sues in civil court.

These cases reflect a national trend: courts are increasingly grappling with the boundaries of workers' compensation exclusivity, particularly in matters involving non-traditional employment, latent occupational diseases, and emotional injuries. Additionally, courts are being asked to review the Grand Bargain again and again, giving more opportunity for the continued deterioration of same. While the Grand Bargain

remains a cornerstone of labor law, its application has grown more complex. Preserving the balance between employer protections and employee rights requires ongoing vigilance. After all, the Grand Bargain marked a pivotal moment in American labor history, establishing a no-fault compensation system that safeguards both workers and employers. Without it, those protections risk erosion, threatening the integrity of the workers' compensation system. As the legal landscape continues to shift, understanding these developments is essential to preserving the Grand Bargain and the system it underpins. As workers' compensation carriers, we play a vital role in upholding this balance—by ensuring fair claims handling, promoting workplace safety, and advocating for policies that reinforce the principles of the Grand Bargain.

WHY MENTAL HEALTH CAN'T BE A BLIND SPOT IN WORKERS' COMPENSATION

By Gail Connolly, Loss Prevention Manager at Beacon Mutual; Shannon Broadbent, Vice President of Human Resources at Beacon Mutual; Elizabeth Neves, Human Resources Generalist II at Beacon Mutual; Catherine Pederson, Claims Specialty Services Program Manager at LNI; and Christopher Ross, Senior Vice President, Safety & Health Services at SCIF

Submitted by the AASCIF Safety & Health Committee

When an employee is injured, the focus often falls on physical recovery: treatment, therapy, return to work. But behind every claim is a person navigating fear, anxiety, or stress alongside their injury. Mental health can act as a comorbidity in these cases—it may not start the injury, but it can influence recovery, complicate treatment, and extend claims.

From a simple sprain made worse by stress to first responders facing PTSD, mental health is now intertwined with nearly every type of workers' compensation claim. Carriers are seeing the impact in rising costs, more complex medical needs, and evolving legal requirements. The question isn't whether mental health matters—it's how to respond thoughtfully and strategically.

The Hidden Weight of Mental Health in Claims

Workers' compensation claims often follow a predictable path: treatment, recovery, return to work. Add mental health into the mix, and that line becomes less clear:

- Recovery slows down. Stress, anxiety, or depression can stall physical healing.
- **Costs increase.** Extended wage-loss benefits, therapy, and more complex care inflate reserves.
- Litigation risk grows. States handle stress-only or psychological claims differently, and incomplete documentation leaves carriers exposed.

Even minor injuries can become complicated when employees feel isolated, unsupported, or fearful about returning to work. Mental health may not start the claim, but it often shapes its trajectory.

What Employers Need (and Expect) From Carriers

Employers are looking for more than claims handling—they want insight, strategy, and tools to support their workforce and manage claims:

- Prevent claims before they happen. Workplace safety audits, job design assistance, violence prevention planning, and ergonomic programs reduce both physical and mental stress injuries.
- Respond effectively without causing harm. Managers trained in Mental Health First Aid (MHFA) can handle employees in crisis without legal missteps.
- **Avoid litigation.** Clean documentation and solid medical evidence protect both employer and carrier.

Employers expect carriers to be proactive, compassionate, and strategic when mental health factors appear in claims.

Why a Human Touch Matters

Employees who feel supported after an injury are less likely to develop long-term psychological complications. A structured check-in, a quick phone call, or even a handwritten note can make a measurable difference.

These gestures aren't just "nice to have." They're smart business. Supported employees recover faster, claims close sooner, and litigation rates drop—benefiting employees, employers, and carriers alike.

Self-Care for Those Managing Claims

Supporting employees through physical and mental health challenges can be emotionally demanding for claims professionals, HR staff, and loss prevention consultants. Managing this workload without burnout is critical for effective outcomes:

- Set boundaries and take breaks. Step away from screens and files when possible to recharge.
- Seek support. Peer groups, supervisors, or professional counseling can provide perspective and relief.
- Practice reflection and mindfulness. Regularly check in with your own emotional well-being to maintain clarity and empathy.
- Leverage resources. Use EAPs, professional development programs, and mental health training to strengthen your ability to respond effectively while preserving your own resilience.

Caring for yourself ensures you can care for others—and it directly impacts the quality and fairness of the claims you manage.

Best Practices Carriers Can Champion

Carriers that make the biggest impact focus on four areas:

- 1. Educate policyholders on prevention. Safety, violence prevention, and seasonal risk training reduce both physical and psychological claims.
- 2. **Normalize mental health conversations.** MHFA training equips supervisors to recognize distress early and respond appropriately.
- Tighten documentation processes. Encourage thorough medical records early—especially for mental health claims—to ensure cases are defensible and efficiently resolved.
- 4. Connect employers with external resources. Employee Assistance programs (EAPs), trauma counseling, and organizations like National Alliance on Mental Illness (NAMI), Mental Health America, Substance Abuse and Mental Health Services Administration National Helpline (1-800-662-HELP), and Suicide and Crisis Lifeline (988). Other resources include Job Accommodation Network (JAN), NIOSH -Total Worker Health, and National Council for Mental Wellbeing.

A Cultural Shift, Not Just a Claims Strategy

Stigma around mental health persists, and some employers worry that open conversations will "invite claims." Evidence shows the opposite: workplaces that address mental health proactively see employees seeking help early, preventing crises and costly claims.

Carriers are uniquely positioned to encourage this culture. Every loss prevention visit, claims discussion, and risk consultation is an opportunity to remind employers that supporting mental health isn't just compassionate—it's strategic.

The Bottom Line for Carriers

Mental health comorbidities aren't going away—they're central to modern workers' compensation. Carriers that take a proactive, human-centered approach can control costs, reduce litigation, and strengthen relationships with policyholders.

You're not just adjusting claims—you're supporting people. Helping employees navigate both physical and emotional recovery protects the worker, the employer, and your own loss ratios. And caring for yourself along the way ensures you can continue to serve effectively. Compassion and strategy go hand in hand, keeping claims fair, defensible, and under control.

AASCIF BRINGS NATION'S WORKERS' COMP LEADERS TO NEW ORLEANS

LWCC welcomed over 400 members for collaboration, professional development, and innovation aimed at advancing how the industry cares for stakeholders nationwide.

Submitted by: Shawn Zeringue, Marketing & Communications Specialist—LWCC



The 2025 American Association of State Compensation Insurance Funds' Annual Conference returned to New Orleans for the first time since 2007, bringing together more than 400 workers' comp professionals from across the country. LWCC, Louisiana's largest workers' compensation insurance carrier, proudly served as host, creating an environment focused on collaboration, professional development, and innovation to help advance how the industry serves businesses and injured workers.

"The AASCIF Conference is a flagship event in our industry, and we are honored to have brought the event back to New Orleans this year," said Kristin W. Wall, LWCC President and CEO. "Hosting this event provided a chance for us to showcase Louisiana's culture, hospitality, and business leadership while highlighting the important work being done to support businesses and injured workers across the country."

As host, LWCC helped secure world-class speakers and organize community engagement, all while ensuring that attendees experienced the best of New Orleans and Louisiana.

AASCIF President Terry Miller expressed his appreciation, stating, "Special thanks to Kristin Wall and the LWCC team for their hospitality and dedication to our industry. Their leadership set the stage for a truly exceptional conference."

The conference offered a well-rounded experience for attendees, combining member-led breakout sessions, meaningful networking opportunities, and thought-provoking keynote presentations. From start to finish, the program inspired dialogue around leadership, technology, and purposedriven business practices, all aimed at strengthening the workers' compensation industry.



Harvard professor and author, Ranjay Gulati, gives leadership presentation.



Business coach and author, Julie Laperouse, and LWCC Senior Vice President and Chief Strategy Officer, Seth Irby, provide actionable tips to implement learning.



Stanford researcher and physician, Jonathan H. Chen, MD, PhD, provides expert insight on Artificial Intelligence.

Keynote presentations included:

• How to Be Bold: Ranjay Gulati

Harvard Business School professor and author Ranjay Gulati explored how courage is not an innate trait possessed by a select few, but a skill that can be learned and strengthened. Drawing from his book How to Be Bold, he shared a practical framework for developing everyday bravery, from speaking truth to power and championing new ideas to leading through uncertainty. Through engaging stories and research-backed insights, Gulati inspired attendees to push past fear, act with purpose, and embrace moments of impact as opportunities to lead with courage.

• The Future of AI in the Workplace: Dr. Jonathan H. Chen

Physician, researcher, and data scientist, Dr. Jonathan H. Chen shared expert insight into the intersection of human and artificial intelligence, highlighting the transformative potential of data-driven decision-making. His presentation explored how AI can empower professionals to work more efficiently, communicate more effectively, and unlock the collective knowledge embedded in real-world data. Dr. Chen also introduced emerging innovations such as AgenticAI, a next-generation framework designed to enhance collaboration between humans and intelligent systems.

AASCIF to Geaux: Julie Laperouse and Seth Irby

Closing the conference on an energizing note, Julie Laperouse, Baton Rouge-based author, speaker, and founder of Screaming Peacock, joined Seth Irby, LWCC Senior Vice President and Chief Strategy Officer, for an interactive keynote that helped attendees transform inspiration into action. The duo provided practical strategies for implementing new ideas, building buy-in within organizations, and driving meaningful change beyond the conference walls, all while keeping the enthusiasm and collaboration of AASCIF alive in their home states.



Left to right: AASCIF President Terry Miller, Former Kids' Chance Scholarship recipient Dani Trombatore, Louisiana Bar Foundation President Edmund J. Giering IV and LWCC Executive Vice President and Chief Operating Officer Gretchen Hofeling present \$10,000 donation to scholarship program.

As part of its purpose to help Louisiana thrive, LWCC helped coordinate a \$10,000 donation to the Louisiana Bar Foundation's Kids' Chance Scholarship Program through AASCIF, which supports the education of Louisiana students whose parents have been killed or permanently and totally disabled in work-related accidents. Over 20 years of support, 356 Louisiana students have received over \$975,000 in scholarships, according to Louisiana Bar Foundation President, Edmund J. Giering IV. Applications for 2026 scholarships open December 1.

The 2025 AASCIF Conference was held October 11–14 at the New Orleans Marriott Downtown. The event will next move to Albuquerque, New Mexico in 2026.

AROUND AASCIF



KENTUCKY

State Funds Soar with AI: Top Trends and Must-Have Training

by Ryan Worthen, KEMI Director of Marketing & Customer Experience

At the AASCIF Annual Conference in New Orleans last week, I connected with colleagues from various state funds about their AI journeys. Discussions spanned claims automation, predictive analytics, and ethical challenges, reflecting the diverse ways AASCIF members are adopting artificial intelligence.

With AI use surging, strong governance is essential to ensure ethical and effective implementation. Based on those conversations and KEMI's own experience with AI over the past year, here are some key themes in the evolving AI landscape.

Rising AI Adoption

AI adoption in workers' comp continues to grow. In 2025, 70% of insurers reported using some form of AI, up from 68% in 2024, according to recent industry surveys. Tools like Gradient AI and Enlyte are being used to streamline claims processing, improve outcomes for injured workers, and reduce claims costs.

KEMI recently partnered with Wisedocs to generate summaries of medical notes, allowing the company to process large volumes of claims data more efficiently. This is part of a broader trend: McKinsey's 2025 Global Insurance Report projects that 85% of routine claims will be fully automated between 2027 and 2030 among leading insurers. This automation is driven by natural language processing for medical records and predictive analytics that assess claim severity and flag anomalies early in the process.

Some state funds are also testing AI-powered chatbots and wearable technology to lower administrative overhead and improve communication with injured workers. However, industry surveys continue to raise concerns about potential litigation arising from AI-driven decisions, especially if algorithms produce biased or inconsistent outcomes. This highlights the growing importance of comprehensive AI governance.

Regulatory and Governance Updates

The NAIC's 2020 AI Principles remain a cornerstone for the insurance industry, focusing on fairness, accountability, transparency, compliance, and security. Building on that, the 2023 NAIC Model Bulletin, now adopted by 42 states, outlines expectations for insurers to perform model validation, conduct bias audits, and align with the NIST AI Risk Management Framework.

At KEMI, we've embraced these best practices by establishing an internal AI Governance Committee. This cross-functional group has drafted a governance charter, updated HR policies to address the use of AI, and we are working closely with our Information Technology (IT) and Legal teams to develop a process for employees to request AI-enabled software. Every request will be reviewed to ensure it meets ethical and operational standards.

Training Is Key

Training is foundational to navigating AI's complexity. At KEMI, we've prioritized internal education to ensure employees understand how to use AI tools responsibly, and we've encouraged team members to pursue professional development in this area.

One particularly effective resource is WorkCompCollege.com, which now offers two complementary AI certifications for workers' comp professionals:

AI in Workers' Compensation (AIWC): A foundational
certification focused on understanding how AI impacts the
workers' comp industry at a policy and governance level.
It explores ethics, bias mitigation, regulatory frameworks,
and leadership decision-making. This program is ideal for
those helping to shape organizational AI strategies, such as
compliance officers, executives, or governance committee
members.

Applied AI in Workers' Compensation (AIMWC): A
more concise, hands-on program centered on practical AI
skills that can be used in daily work. It offers actionable
ways for individuals and specific roles to integrate AI
tools for productivity and efficiency. While AIWC helped
shape KEMI's policies and governance approach, AIMWC
provides practical guidance for front-line implementation
and immediate value creation.

Several KEMI employees, including myself, have completed the AIWC certification through WorkCompCollege and found it extremely valuable. These programs equip staff with the knowledge to implement AI responsibly and effectively, aligning with both NAIC and NIST standards.

AASCIF members can benefit from these accessible, industry-specific courses to help build a culture of AI literacy across their organizations.

Call to Action

AI has the potential to deliver both revenue growth and cost savings, but bias and data breaches pose significant risks without strong governance and consistent training. Whether your fund is just beginning to explore AI, refining existing policies, or is fully invested in this technology, the Community Forum on AASCIF's website is a great place to connect with peers.

Post about the AI tools you're using, your governance frameworks, or your team's training experiences to spark collaboration across member funds. Let's continue working together through AASCIF to shape an ethical, transparent, and effective AI future for workers' comp.

Sources

- Insurance Journal, "AI Adoption in Insurance Hits 70% in 2025," September 2025
- McKinsey & Company, "Global Insurance Report 2025," January 2025
- NAIC, "2025 Insurance Industry Survey on AI Risks," March 2025
- NAIC, "Principles on Artificial Intelligence," August 2020
- NAIC, "Model Bulletin on AI Systems by Insurers," December 2023
- NIST, "AI Risk Management Framework," January 2023
- WorkCompCollege.com, "AI in Workers' Compensation (AIWC) and Applied AI in Workers' Compensation (AIMWC) Certifications," 2025



LOUISIANA

Louisiana Loyal Leadership Summit Empowers the Next Generation of Agent Partners

LWCC recently welcomed more than 80 agent partners from across the state for the 2025 Louisiana Loyal Leadership Summit, a professional development experience designed exclusively for rising agent leaders. The summit focused on equipping agents with the skills, insights, and connections needed to advance the workers' compensation industry while supporting the growth of Louisiana businesses.

The one-day event featured thought-provoking keynotes and interactive sessions that inspired action. The Power of Purpose explored how aligning business strategy with deeper meaning can spark engagement, attract customers, and create lasting impact. Don't Make It Weird: Postmodern Networking energized attendees with practical guidance on team dynamics and authentic relationship building. Breakout sessions delved into critical leadership topics, offering strategies for navigating high-stakes conversations with confidence and empathy, managing organizational change, and applying humancentered design to better serve clients and foster innovation.

By redesigning the summit to focus exclusively on agents, LWCC highlighted the essential role these partners play in delivering best-in-class workers' compensation coverage to more than 18,500 Louisiana policyholders. "Strong partnerships with our agents are essential in bringing to life LWCC's purpose of helping Louisiana thrive," said Seth Irby, Senior Vice President and Chief Strategy Officer. "This summit provides rising leaders with new perspectives and connections that help them elevate their agencies and the clients they serve."

Attendees left with insights and resources they can put to work immediately in their own agencies. Reflecting on the experience, David Hoogland shared, "As an agent who has been in the industry for a while, I have attended many conferences, but LWCC's Leadership Summit stands out as one of the best. The speakers were inspiring, the interactive sessions brought the lessons to life, and the focus on communication provided practical tools to strengthen both my work and our agency's success."

Participants returned to their communities ready to apply new skills and share insights with their teams. By investing in the next generation of agency leaders while engaging experienced professionals, LWCC continues to champion innovation, enhance service, and fulfill its mission to better Louisiana one business and one worker at a time.

To learn more about this Louisiana Loyal initiative, click here.



MAINE

MEMIC Announces \$19 Million Policyholder Dividend

The MEMIC Group announced on October 8th that its Board of Directors has authorized

a \$19 million dividend for more than 17,000 Maine policyholders. Since 1998, MEMIC has returned more than

\$389 million in dividends to policyholders across all 16 counties in Maine.

This annual dividend is calculated based on MEMIC's financial performance, claims experience, and the collective success of policyholders in maintaining safe workplaces during the 2022 calendar year.



Read the full press release here.

MEMIC Safety Research Center Awards \$30,000 Grant to University of Cincinnati for Innovative Ergonomic Research in Long-Term Healthcare

The MEMIC Safety Research Center has awarded its 2025 workplace safety research grant to the University of Cincinnati for a pioneering study aimed at improving ergonomic conditions for long-term healthcare workers.

Led by Dr. Kermit Davis, Professor and Division Director of Environmental and Industrial Hygiene at the University of Cincinnati, the research will use wearable sensor technology to track postural stressors among nurses and nursing aides in long-term care facilities.

Read the full press release here.



MEMIC Promotes Katrice Kelley to Director of Business Analysis -Underwriting

The MEMIC Group, a workers' compensation insurance company, has promoted Katrice Kelley to Director of Business Analysis – Underwriting.



Kelley brings more than a decade of experience in her new role, having joined MEMIC in 2013. Over the past 12 years, she has held key positions in agency services, underwriting, policy administration, and business analysis.

Read the full press release here.

Submitted by Robb Atkinson, Director of Marketing & Public Relations, RFAtkinson@memic.com



MINNESOTA

SFM promotes Amanda Aponte to Executive Vice President

In her expanded role, Aponte will partner closely with CEO and President Terry Miller, broaden her leadership across the organization, and represent SFM with industry leaders and stakeholders. She will also continue serving as Chief Financial Officer (CFO) during the transition.

"I'm honored to step into this position," Aponte said. "While my background is in analytics, my passion is leading people with kindness and empathy. I'm excited to help guide our teams through staffing and technological evolution as we strengthen our reputation as The Work Comp Experts."

Nearly 20 Years of Impact at SFM

Aponte's journey with SFM began in 2007 as an actuarial intern. Over the years, she rose through the ranks as Actuary, Director of Analytics, Chief Risk Officer and CFO. Her fingerprints are on nearly every financial milestone the company has achieved—from enterprise risk management and reserving to investments and business intelligence.

"I love data storytelling—using data to explain where we've been and where we're headed," Aponte said. "It creates buy-in, drives better decisions and connects across every discipline."

Her financial expertise has not only fueled SFM's growth but also contributed to community impact, including her <u>role on the Children's Minnesota Hospital investment subcommittee</u>.

Looking Forward

"Amanda is a sterling example of what happens when we give people the space to fulfill their potential," Miller said. "Her financial acumen and vision have been critical to SFM's success, and her leadership will help position us for the future."

Aponte is clear about SFM's purpose: "SFM is mission-driven. We have a safety-first mindset and we're there for employers and their workers when injuries happen. We strive to have the right employees that believe in and support that mission, people who have the highest service standards and principles. SFM continues to seek policyholders that embrace our expertise, and we will be around to fulfil the long-term promises we make."





NEW MEXICO

New Mexico Mutual Wins Company of the Year

We're honored to be named Company of the Year by the Big I of New Mexico!

This award, voted on by agents within the Big I association, reflects the trust and partnership we've built together. We are deeply grateful to every agent who cast their vote in our favor—their support means the world to us.

At the heart of our success is our commitment to working as one team. Every department, every individual, every initiative is driven by a shared purpose: to empower and support our agent partners with integrity, collaboration, and excellence. This recognition is not just a milestone—it's a testament to the values we live by every day.



New Mexico Mutual Reaffirms A.M. Best Rating

We are pleased to share that our long-standing A- rating from A.M. Best reaffirms not only our commitment to excellence but also highlights our continued financial strength and stability.

This reaffirmation is a testament to the outstanding commitment and exceptional service that the employees of New Mexico Mutual have consistently demonstrated in the field of workers' compensation insurance.

Introducing Mutual Connect—Our Brand New Company Intranet!

MUTUAL CONNECT

YOUR TRUSTED SOURCE FOR ALL THINGS MUTUAL

New Mexico Mutual has partnered with MangoApps to build our company intranet, Mutual Connect. The development team, a combination of an internal employee group and MangoApps developers, designed Mutual Connect to make the following easier for employees:

- Connect with colleagues and departments
- Access important resources and company updates
- Share ideas and celebrate success stories
- Collaborate on projects

We're thrilled to offer our employees a platform that not only houses important company information but allows them to work with their colleagues and learn more about different departments within the organization.

See you in Albuquerque for the 2026 Annual AASCIF Conference!

New Mexico Mutual is thrilled to welcome AASCIF members to Albuquerque next July for the 2026 Annual Conference! New Mexico is called the Land of Enchantment for a reason, and



we can't wait to welcome you to our beautiful state. Our team is already hard at work to make sure next year's conference is not only productive, but memorable and inspiring. Click the video link (youtu.be/UE2c1TNd8L0) for a preview of what's to come!



NEW YORK

NYSIF Launches NYSIF FUNDamental Podcast

NYSIF FUNDamental aims to put the best thinking

forward at the intersection of finance, health, labor and business in New York.

The New York State Insurance Fund (NYSIF), the state's largest, not-for-profit workers' compensation insurer, today announced a new podcast, NYSIF FUNDamental. The podcast series will engage with thought leaders, industry experts and combine the inspiring, personal stories of real people to provide unique perspectives on the issues that matter to NYSIF and its mission. Podcast episodes will cover worker safety, climate change, mental wellness, finance, technology and more.

"NYSIF FUNDamental provides an exciting opportunity for NYSIF to explore and highlight key issues that are foundational to support our mission of service and safeguard the well-being of New Yorkers," said Gaurav Vasisht, NYSIF Executive Director and CEO. "Our dedication to worker safety and wellness is something that we are incredibly proud of, and NYSIF FUNDamental promises to offer engaging perspectives on our longstanding commitment."

NYSIF FUNDamental launched the first two episodes on September 17, 2025.

Episode 1, "NYSIF Makes History," features Mr. Vasisht discussing how NYSIF's rich history in the labor movement informs the organization's modern approach to serving more than 2 million workers in New York State.

Episode 2, "Mt. Sinai Hospital Aims for Net Zero," features Dr. Muoi A. Trinh, Medical Director of Sustainability at Mount Sinai Health System. Dr. Trinh discusses the greenhouse gas emissions from the U.S. health care sector and Mt. Sinai's innovative sustainability strategy, which has the largest hospital network in New York City on target to reach net-zero by 2050.

"Confronting climate change and developing sustainable solutions are essential to responsible patient care," said Dr. Trinh. "As one of the largest health systems in New York, we have a unique duty to take action to improve health and do no harm. We care about our community and how we contribute to climate change affects our community in terms of air quality, pollution, and health."

New episodes of NYSIF FUNDamental will be released at regular intervals throughout the year. NYSIF FUNDamental is available on our website, as well as most podcast platforms, including Apple Podcasts, Spotify, YouTube and Google Podcasts. To subscribe, simply tap or click the follow or subscribe button in your streaming platform.



OREGON

SAIF Declares \$50 Million Dividend

In September, SAIF's board of directors declared a \$50 million dividend. This marks the 16th consecutive dividend given to policyholders, and the 28th instance since 1990.

"Our commitment to serving our customers will always be our most important focus," said Chip Terhune, president and CEO of SAIF. "This year we carefully considered the current economic uncertainty and the rising trends we see in medical costs. Despite those challenges, SAIF's strong fiscal position, effective claims handling, and proactive safety programs make this year's dividend possible."

This October, 50,757 policyholders received the dividend, which was calculated based on the premium for policies that ended in 2024.

Safety Campaigns Focus on Emergency Preparedness and Disease Control

SAIF recently rolled out two safety campaigns. The first, for emergency preparedness month in September, focused on preparing for wildfires and smoke. The second highlighted tips workers can do to reduce respiratory illness in the workplace; we also released another Science of Safety video, focused on soap.

SAIF Tours Oregon With Free Agriculture Safety Seminars

Starting in November, SAIF will again tour Oregon to provide agriculture safety seminars.

Held in 16 cities across the state, these free trainings will run through March 2025. Ten of the trainings are conducted entirely in Spanish.

The seminars have been offered for more than 27 years to farm owners, managers, and workers around Oregon to educate them on how to stay safe in their workplace.

Every year, presenters aim to focus on various topics to address key safety challenges. This time around, they'll touch on:

- Energy control
- Fire code on the farm
- Respiratory programs
- Making the most of safety committee meetings

More information can be found at saif.com/agseminars.

SAIF's Eric Connelly Recognized With Safety Award

Eric Connelly, a senior safety management consultant at SAIF, was recognized by the Columbia-Willamette chapter of the American Society of Safety Professionals. Eric was recognized for his work on several owner-controlled insurance program projects, including a remodel of Portland's international airport.



SASKATCHEWAN

WCB Announces Decrease in 2026 Preliminary Average Premium Rate

On Oct. 28, the Saskatchewan Workers' Compensation Board (WCB) announced that its 2026 preliminary average employer

premium rate will decrease by six cents to \$1.22 from the rate of \$1.28 per hundred dollars of assessable payroll. If approved, Saskatchewan's proposed 2026 average premium rate would be among the lowest average premium rates in Canada. The announcement was made at the WCB's public preliminary rate information meeting with Saskatchewan employers, workers and partners.

"Each year, we use our rate model to determine the following year's rates. The rate model is our primary tool to forecast future rates," said the WCB's chair, Gord Dobrowolsky. "When we consider our strong funded position, we are proposing a decrease in our average premium rate."

The WCB's sufficiency policy establishes guidelines for the WCB to remain at fully funded status and sets a target range for the injury fund of between 100 and 140 per cent. The WCB remains within the target range.

"While we have not exceeded the target range of the sufficiency ratio, we are seeing sustainable growth of the system. For 2026, we are seeing growth in total assessable payroll because of wage inflation and workforce growth. Despite durations stabilizing, we are seeing increases in claim costs and improved injury rates," said Dobrowolsky. "The board balances all of these factors to arrive at the six-cent decrease, bringing the 2026 preliminary average premium rate to \$1.22."

With the 2026 preliminary rate proposal:

- The WCB remains within the sufficiency policy target range of between 100 and 140 per cent.
- The overall 2026 proposed average preliminary premium rate will decrease to \$1.22 per hundred dollars of payroll, a six-cent decrease from the 2025 rate of \$1.28.
- Industry premium rates for approximately 96 per cent of Saskatchewan's employers covered by the WCB will see a decrease or no change for 2026.

 Industry premium rates for approximately four per cent of Saskatchewan's employers in four rate codes covered by the WCB will increase next year.

The WCB works to uphold a balance between stable rates that ensures fairness, transparency, collective liability, predictability and a fully funded compensation system. The WCB maintains a strong funded position and has also optimized its investment strategy to improve the long-term expected return on its investments.

In addition to providing feedback during the 30-day public consultation period, employers can influence their individual premium rate through effective injury prevention and return-to-work programs. The degree to which employers in an industry work to eliminate workplace injuries also affects industry premium rates. Employers with a fully functioning safety management system and a solid return-to-work program can help prevent and manage work-related injuries.

More information is available at <u>wcbsask.com/events/preliminary-rate-information-meeting-2026-rates</u>.

WorkSafe Saskatchewan Continues Multi-Year Safety Push for Commercial Truck Drivers

WorkSafe Saskatchewan, a partnership with Saskatchewan's Ministry of Labour Relations and Workplace Safety, is continuing with the next phase of **Get Home Safe**, an ongoing safety campaign focused on commercial truck drivers that aims to raise awareness of the factors behind truck-involved incidents and to position the organization as a trusted partner for the transportation sector.

The campaign concentrates on building stronger partnerships with the province's transportation and warehousing industry, spotlighting the scope of the problem and developing reliable and practical resources for truck drivers. The campaign works to influence sector training, guidelines and road-safety culture. Truck drivers rank among the occupations with the highest number of workplace injuries in Saskatchewan, second only to health-care workers, underscoring the urgency of targeted prevention.

The challenges are complex and multifaceted. Public perceptions of truckers have shifted in recent years, shaped by highly publicized events, even as the industry's behind-the-scenes economic importance is often overlooked. While

some collisions stem from other motorists cutting off heavy vehicles, research consistently points to driver fatigue as a key contributor, with impairment and distraction also significant factors. Staffing shortages, tighter delivery timelines and limited highway rest stops further compound pressures on long-haul drivers.

WorkSafe Saskatchewan is taking a staged approach by determining the supports the industry needs, strengthening relationships with carriers and warehousing companies and building trust directly with drivers. Messaging emphasizes that drivers matter more than any load in an effort to humanize the people behind the wheel and encourage choices that protect themselves and others.

The campaign seeks to engage drivers, industry leaders and the broader motoring public in a co-ordinated push to reduce injuries and keep Saskatchewan's roads safer. That includes sharing practical tools for fatigue management, promoting strategies that minimize distraction and impairment,

and encourage realistic scheduling practices that do not compromise safety. The overarching goal is clear. Fewer injuries, safer highways and a stronger safety culture across Saskatchewan's transportation sector.

More information is available at <u>worksafesask.ca/prevention/truck-driver-safety</u>.



WASHINGTON

L&I partnership with Intercity Transit raises awareness about valuable return-to-work program

As a follow-up to the successful campaign promoting the agency's <u>Stay at</u> <u>Work</u> program, the Washington State Department of Labor & Industries (L&I) recently launched a smaller, social media-



focused effort to further boost employer and worker awareness.

The new campaign successfully capitalized on a partnership with Intercity Transit in Thurston County. Together, the two agencies created a paid-media effort, centered on a video that informs Washington employers about the benefits of the Stay at Work program and encouraged them to participate.

Photo caption: A crew from Washington State Department of Labor & Industries (L&I) films an interview with Intercity Transit General Manager Emily Bergkamp for a video promoting L&I's Stay at Work program.

The Stay at Work program, one of L&I's financial incentive offerings, began in 2011 and reimburses employers for some of their costs when they provide temporary, light-duty jobs for injured workers while they heal. By keeping employees connected to the workplace, the program helps reduce claims costs and supports faster recovery and return to work.

The partnership with Intercity Transit allowed L&I to showcase a local employer that's successfully incorporated the Stay at Work program for its staff. The collaboration included a one-day video shoot at the transit facility, featuring interviews with agency leaders and employees.

With a social media spend of \$500 over two weeks, the resulting video generated around 60,000 impressions on YouTube, Facebook, and LinkedIn. The video had over 11,000 views on YouTube, with about 8,500 unique views, and achieved an "above average" viewer retention rate with nearly half of the viewers watching the entire video.

During the campaign, traffic to the Stay at Work page rose by about 50% within 30 days of video launch. Despite

the campaign's small-scale, requests for information about the program also increased, demonstrating how a strategic partnership can help stretch limited resources and still make an impact.

Karen Peterson receives Governor's Outstanding Leadership Award

Washington Gov. Bob Ferguson recently presented the 2025 2025 Governor's Outstanding Leadership Award to 24 state leaders, including Karen Peterson, chief strategy officer for the Insurance Services Strategic Business Office at Washington State Department of Labor & Industries (L&I).



Karen's four decades in public service reflect steady, visionary leadership rooted in service to

others. She has driven L&I's shift from outdated processes to modern, data-informed, human-centered ways of working, guiding more than 60 initiatives that expanded mental health services, created training incentives for workers, and improved employee onboarding.

She plays a pivotal role in modernizing the state's workers' compensation systems, even stepping in as project director at a critical juncture to restore stability, rebuild trust with oversight partners, and redesign the project's roadmap with limited resources. Karen models thoughtful, inclusive leadership that delivers results and strengthens the agency's ability to serve Washington every day.

In a news release from the governor's office, Peterson was praised for public service work that's been "defined by thoughtful strategy, steady guidance and a passion for improving how government serves people."

"Karen's equity-minded leadership and mentorship have empowered staff and delivered measurable results that benefit workers, employers and communities alike. She exemplifies the quiet power of service-driven leadership that endures and inspires," the news release said.

It's the 40th annual ceremony to honor exceptional leaders with an award established by then-Governor Booth Gardner in 1985.