Welcome
Dear Reader,
We are pleased to present to you this edition of First Source in its new format! We hope this format is easier to read in its PDF form, as well as aesthetically pleasing. With this new layout, we will continue to provide you with important industry news and FRR happenings. With upcoming issues, we will add new features – this edition introduces our new Reader Contests (details within)! We welcome content suggestions!

First Source-Spring 2012 highlights our continual commitment to Medicare expertise, as Kaija Blalock points out a common pitfall in handling MSA cases. Additionally, you will find a focus on Workers’ Compensation in a variety of perspectives: OSHA’s new priorities; an interesting case study; and an industry must-read. Lastly, healthy lifestyle information can be found here, too.

We hope you enjoy this issue!

-The FRR Team

Medicare’s Conditional Payment Letters
Take a Close Look!

As most of us know, The Medicare Secondary Payer Act (the MSP), allows Medicare to make “conditional” payments for medical treatment in some circumstances while a Workers’ Compensation or Liability claim is pending.

The MSP makes clear that repayment will be required once the case settles. Medicare issues “Conditional Payment Letters” in advance of settlement, notifying beneficiaries and Carriers of changes Medicare has paid and identified as related to the claim.

The Centers for Medicare and Medicaid Services (CMS) has now introduced a process whereby certain Medicare beneficiaries can self-calculate Conditional Payment amounts owed and resolve those even prior to settlement. In order to make use of this option, the beneficiary must be settling a claim for a physical trauma based injury, the total settlement amount must be less than $25,000, the date of injury must date six months or more prior to settlement and the beneficiary must have attained MMI.

Carriers are now routinely reporting claims with “on-going responsibility for medicals” to the CMS. With this new stream of information on Medicare beneficiaries, it’s wise to anticipate an increase in Conditional Payment Letters. Hopefully, the reporting process and detailed information provided by the Carrier will also help Medicare identify only related to the work or liability claim.

Careful examination is a must! Medicare is not always accurate. First Rehabilitation Resources, Inc. has reviewed Conditional Payment Letters on behalf of clients and in most cases, we have identified charges unrelated to the injury in question.

Please take a close look and let us know if you need help in reviewing a CMS generated list of related charges.

Careful examination is a must! Medicare is not always accurate.
OSHA Announces National Emphasis Program for Nursing and Residential Care Facilities

According to the U.S. Bureau of Labor Statistics, nursing and residential care facilities experienced some of the highest rates of lost workdays due to injuries and illnesses. In response to this, OSHA has announced a new National Emphasis Program for Nursing and Residential Care Facilities to protect workers from serious safety and health hazards that are common in medical industries. These hazards include exposure to blood and other potentially infectious material; exposure to other communicable diseases such as tuberculosis; ergonomic stressors related to lifting patients; workplace violence; slips, trips and falls, and exposure to hazardous chemicals and drugs.

Injuries resulting from patient transfer and patient lifting are a particular area of concern

According to the American Nurses Association, 12% of nurses leave the profession due to back pain. Nursing is one of the top 10 most hazardous jobs for injuries to muscles and joints. Many heavy labor industrial jobs have weight lifting limits of 50 pounds, yet nurses routinely bear many times that weight when transferring, repositioning or lifting patients. Nursing home workers in particular are at higher risk of injury than underground coal miners, construction workers, and tire manufacturers.

Many states have safe patient handling laws

Many states have enacted legislation mandating safe patient lifting. According to the American Nursing Association, a strong advocate for such legislation, 10 states have implemented safe patient handling laws, to include Maryland.

Did you hear ...

I'M NOT AGING - I' M evOL vIng!

2012 Employee Wellness Initiatives

Not familiar with Employee Wellness Initiatives? Do read on!

Employee Wellness Initiatives (EWI)

We’ve been putting on these types of events for the past three years and with each event sponsored, we continue to grow in our knowledge and expertise… all the while, having fun and sharing the joys of wellness with our participants and healthy-lifestyle-seeking partners!

The Evolve with Exercise program is designed to help participants stay on track

During the month of April, FRR promoted healthy living by increasing awareness on a variety of issues including cardiovascular health, smart eating, physical conditioning and relaxation techniques.

This year, FRR staff came prepared to take blood pressures, ensure proper ergonomic alignment at work stations, provide remedies to relieve stress, opportunities to participate in healthy cooking demonstrations, as well as promoting healthy eating, with of course, wholesome, nourishing snacks. An “Evolve with Exercise” program has served to motivate and keep our participants on track, even after our staff left their offices.

Also, a thank you to our partners for your participation... CAM Physical Therapy, Modern Medical, and Rehab at Work.

Healthy (and Fun) Water Drinks Served at our Spring EWI Events

Mimosa Mocktail

Ingredients:

❖ Orange flavored sparkling water
❖ Light orange juice (50% less calories and sugar)
❖ Ice

Directions:

Mix all three ingredients in a fun, summer glass. Adjust the measurements of each to your liking.

Mojito Mocktail

Ingredients:

❖ Lime flavored sparkling water
❖ Mint leaves, crushed
❖ Ice

Directions:

Tear one or two mint leaves into a glass, add ice and pour the sparkling water over all. Add or reduce mint leaves to taste.

Enjoy!
We look forward to seeing our friends and colleagues at this year’s MWCEA Annual Conference, although it will require some patience as the event will be held in October, rather than the usual month of September.

In the meantime, please contact your Account Manager if you are interested in us presenting an informational seminar at your workplace!

WORKERS’ COMP ANNUAL “MUST-READ” DOCUMENT:

The NCCI Issues Report

Workers’ comp geeks and nerds, your wait is over: NCCI’s 2012 Workers’ Compensation Issues Report is out.

NCCI manages the nation’s largest database of workers’ compensation insurance information, supplying data to more than 900 insurance companies and nearly 40 state governments. So the Annual Issues Report is a rather big deal - arguably one of the most important workers’ comp documents of the year. The cornerstone document in the report is President and CEO Stephen Klingel’s annual update, this year entitled Workers Compensation Market Struggles to Identify a Direction (PDF). Klingel notes that it’s no easy matter offering any forecasts because we are in a time of uncertainties and adjustments as we make the long, slow climb from the recession.

Related links

Workers’ Compensation Market Struggles to Identify a Direction

The complete NCII 2012 Issues Report

WORKERS’ COMP CLAIM

Compensability of a Crooked Nose

Imagine the scene at the Pennsylvania Workers’ Comp Appeal Board earlier this year: the judges each carefully examined the nose of Rhonda Walker, to determine just how crooked it was and whether Walker was entitled to disfigurement benefits.

Prior to the appeals hearing, a judge had awarded Walker 45 weeks of compensation for scars and disfigurement on her nose. Walker was a Meter Reader and fell down a flight of stairs, fracturing her nose. She was cleared for full duty in August, at which time her indemnity payments were halted. She resigned her position soon after and then filed for permanent disfigurement benefits; she considered herself to be “deformed” because her nose had scars and the tip was crooked.

Following their close and individual examination of Walker’s nose, the judges determined that there was “a slight crookedness” but this was “not noticeably disfiguring.” The alteration in her nose did not “rise to the level of creating an unsightly appearance.” They reversed the award of disfigurement damages. Walker may be self-conscious about her transformed nose, but the changes are not compensable.

EMPLOYEE SPOTLIGHT

April Shifflett, Marketing Associate

Always friendly, willing to help, and full of incredible energy, April Shifflett is the voice of FRR!

Since 2008, April has been taking your calls, assisting with your referrals, directing you to where you need to go, intervening in your times of need and, essentially, taking care of everything “behind-the-scenes” here at FRR. She does it all with a smile on her face and a goal in mind – to get it done, and do it well!

Outside of her professional work-life, April is very involved in coaching her 11 year old daughter’s cheerleading squad, or can be found on any number of sidelines to support her athletically-talented 8 year old son. She is happily married, and very close with her large extended family, many of whom are multi-generational Firefighters (April even Volunteered as a Firefighter and EMT in the past). In her precious spare time, April enjoys cooking/baking, reading, walking/running, and singing.
ON THE HEALTH FRONT:
How 1-Minute Intervals Can Improve Your Health

Adopted from an article by Gretchen Reynolds, February 15, 2012

While many of us wonder how much exercise we really need in order to gain health and fitness, a group of scientists in Canada are turning that issue on its head and asking, how little exercise do we need?

Most of us have heard of intervals, or repeated, short, sharp bursts of strenuous activity, interspersed with rest periods. But the Canadian researchers were not asking their volunteers to sprinkle a few interval sessions into exercise routines. Instead, the researchers wanted the groups to exercise exclusively with intervals.

For years, the American Heart Association and other organizations have recommended that people complete 30 minutes or more of continuous, moderate-intensity exercise, such as a brisk walk, five times a week, for overall good health. But millions of Americans don’t engage in that much moderate exercise, if they complete any at all. Asked why, a majority of respondents, in survey after survey, say, “I don’t have time.” Intervals, however, require little time.

This modified routine involved one minute of strenuous effort, at about 90 percent of a person’s maximum heart rate (which most of us can estimate, very roughly, by subtracting our age from 220), followed by one minute of easy recovery. The effort and recovery are repeated 10 times, for a total of 20 minutes.

Intervals require little time... a total of 20 minutes, and it’s done!

Consult your doctor for clearance, and then consider rapidly pedaling a stationary bicycle or sprinting uphill for one minute, aiming to raise your heart rate to about 90 percent of your maximum. Pedal or jog easily downhill for a minute and repeat nine times, perhaps twice a week. It’s very potent exercise - and then, very quickly, it’s done!

COMING SOON!
New & Improved FRR Website

- Request for Service “Short Form” with Ability to “Attach” Medicals, etc. ... YES!
- Information for Clients/Potential Clients, Employees/Potential Employees, and Claimants/Beneficiaries
- Traditional & Specialty Services Descriptions
- Comprehensive Territory Listings
- Management Team Profiles
- FRR and Industry News, Events and Announcements (including archived Newsletters)
- 24/7 On-Call Contact Information
- Maryland VR-06 Forms for Easy Completion

Reward
Be a lucky winner of a $25 Gas Gift Card!
First Rehabilitation Resources, Inc. (FRR) will give away a First Referral Reward (F.R.R.) to the first 5 individuals to make a new case referral after receiving this issue of First Source. You must make mention of this contest and reference your favorite First Source article.

Easy Referrals Via:
- www.1stRehab.com/request.asp
- Phone: (301) 369-3401 ext 1
  (410) 792-0506 ext 1
  (888) 252-0368 ext 1
- Facsimile: (301) 362-9350
- Contacting your Account Manager

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