

KWORCC Select Claims Report

Presented July 29, 2021



Claim Summary – Reserve Advisory

Employer:	Allen County	Date of Injury:	11/13/2020
Claim No.:	20833076	Job Description:	Heavy-Equipment Operator
Employee Age:	56	Updated:	7/20/2021
AWW:	476.80	TTD Rate:	317.88
Attorneys:	William Phalen	Employer:	Ron Laskowski
Adjuster:	Amanda Chamberland		

	Medical	Indemnity	Rehabilitation	Legal	Expense	Total
Reserves:	\$ 51,450.00	\$ 27,909.89	\$ 0.00	\$ 9,100.00	\$ 8,880.00	\$ 97,339.89
Amount Paid:	\$ 22,225.73	\$ 6,675.48	\$ 0.00	\$ 0.00	\$ 739.50	\$ 29,640.71
Outstanding:	\$ 29,224.27	\$ 21,234.41	\$ 0.00	\$ 9,100.00	\$ 8,140.50	\$ 67,699.18

Accident Description / Nature of Injury:

- The employee pulled his mid to lower back and left elbow as he was lifting a garage door to retrieve equipment at the beginning of the workday.

Investigation / Compensability:

- The employee was in the course and the scope of his employment
- The claimant denied prior significant treatment to his back and none to his elbow, however my medical investigation located prior medical care to the same elbow pre-injury. Additionally, medical records cite a chronic history of back pain. This was later addressed via a prevailing factor inquiry.

Medical Management:

- The Claimant treated locally with Dr. Wolfe where an x-ray was taken showing a potential old avulsion fracture to the left arm. He was referred to Dr. Mih, orthopedic specialist. Dr. Mih found the avulsion fracture to be acute in nature. He also diagnosed the claimant with a left elbow tendon tear. He determined that the injury would heal non-surgically with immobilization. Claimant was requested to complete PT. After a series of PT, he experienced a new onset of ulnar nerve symptomology. An EMG was performed showing ulnar nerve entrapment to which Dr. Mih found claimant’s prior and pre-existing left elbow complaints were contributory. Claimant requested an ulnar nerve surgery which was denied based on the prior complaints to the same area. He continues to treat for both the work related and non-work related left elbow and arm care.
- The claimant treated with Dr. Bailey at Precision Spine for his low to mid back complaints. An MRI showed nothing of surgical significance. Claimant had an extended course of physical therapy as well as multiple injections. He improved but still complained of ongoing residual back pain and stiffness. He was released at MMI with no further medical care specific to the back as of 7/19/2021. He then retained counsel.

Periods of Disability:

- The claimant missed a total of 21 weeks of work due to his work injuries. He is now working in an accommodated fashion with restrictions remaining to the left arm area.

Permanent Partial Impairment / Permanent Disability:

- Claimant is estimated to receive an whole body impairment of approximately 7% and require additional funds to settle the claim above the impairment, the claim is reserved for the same.

Subrogation / Other Issues:

- The claimant was not truthful about his prior medical history. This has been brought to the attention of counsel and we will continue to research any other possibly omitted medical condition that pre-dates our file.
- The employee suffered from poor work performance prior to his workplace injury and may be subject to termination which could increase his claim exposure.

Plan of Action:

- I will work with counsel to locate any and all prior medical for the claimant via deposition, medical canvas, etc.
- Counsel and I will continue to maintain the denial of his underlying prior conditions and only treat the acute injuries caused by the work event
- Once the claimant reaches MMI we will attempt to reach a settlement agreement with claimant's counsel
- All efforts will be made to close this claim full and final with a potential global settlement to include termination



Claim Summary – Reserve Advisory

Employer:	Ellis County	Date of Injury:	06/15/2021
Claim No.:	21854004	Job Description:	Paramedic
Employee Age:	45	Updated:	7/20/2021
AWW:	1,612.10	TTD Rate:	687.00
Attorneys:	N/A	Employer:	N/A

Adjuster: Amanda Chamberland

	Medical	Indemnity	Rehabilitation	Legal	Expense	Total
Reserves:	\$ 27,900.00	\$ 15,114.00	\$ 0.00	\$ 600.00	\$ 4,310.00	\$ 47,924.00
Amount Paid:	\$ 75.68	\$ 0.00	\$ 0.00	\$ 0.00	\$ 32.19	\$ 107.87
Outstanding:	\$ 27,824.32	\$ 15,114.00	\$ 0.00	\$ 600.00	\$ 4,277.81	\$ 47,816.13

Accident Description / Nature of Injury:

- The claimant was stepping out of an ambulance when the airway bag on her shoulder shifted, causing her right foot to hit the ground forcefully and twist. She felt a snap and instability immediately in the right knee.

Investigation / Compensability:

- Claimant was in the course and scope of her employment and the mechanism is accepted as compensable.
- She has a history of prior tear to the same knee, the LCL, however the prevailing factor was addressed by Dr. Hildebrand who found work injury the prevailing factor for condition.

Medical Management:

- The employee treated at Clara Barton Clinic where an MRI was ordered of her right knee. The MRI showed edema, a sprain and a possible meniscus tear. She was referred to orthopedic specialist, Dr. Hildebrand, who found that the work injury is the prevailing factor for her condition and not her previously underlying LCL tear. Dr. Hildebrand recommended arthroscopic surgery of the meniscus tear which has been authorized and will be performed on 7/30/2021.

Periods of Disability:

- The employee is currently off of work as her employer has not been able to accommodate her restrictions. I have discussed a light duty accommodation plan with her employer which they will consider post-surgery.

Permanent Partial Impairment / Permanent Disability:

- The employee is expected to receive an impairment of 7% to the right knee and the file is reserved for the same.

Subrogation / Other Issues:

- N/A

Plan of Action:

- I will continue to work with the employer to bring the claimant back to work in an accommodated position
- I will review the medical progress of the claimant and intervene if lack of progress or medical direction is needed
- Once the claimant reaches MMI I will request a rating and attempt to settle her file, full and final



Claim Summary – Reserve Advisory

Employer:	Ford County	Date of Injury:	02/07/2021
Claim No.:	21843811	Job Description:	Firefighter
Employee Age:	34	Updated:	7/20/2021
AWW:	1,003.52	TTD Rate:	669.04
Attorneys:	Jeff Cooper	Employer:	Ron Laskowski
Adjuster:	Amanda Chamberland		

	Medical	Indemnity	Rehabilitation	Legal	Expense	Total
Reserves:	\$ 23,500.00	\$ 13,676.16	\$ 0.00	\$ 7,500.00	\$ 3,525.00	\$ 48,201.16
Amount Paid:	\$ 896.44	\$ 757.69	\$ 0.00	\$ 0.00	\$ 366.56	\$ 2,020.69
Outstanding:	\$ 22,603.56	\$ 12,918.47	\$ 0.00	\$ 7,500.00	\$ 3,158.44	\$ 46,180.47

Accident Description / Nature of Injury:

- While getting equipment from a fire truck, the claimant slipped and fell on ice. The weather was cold and the fire hose had been leaking causing multiple ice spots. He reported falling on his back and left side causing pain in his left shoulder and arm down to his fingers, left hip pain, lower back and bilateral knee injury.

Investigation / Compensability:

- The mechanism of injury is compensable. Claimant did not request immediate care or report the injury until weeks later, although still within the reporting timeline. His supervisor did confirm knowledge of the event.
- Claimant originally denied prior neck and left shoulder injuries or care. My investigation ultimately located records of care within months before the work injury, contradictory to claimant’s account.

Medical Management:

- Claimant treated at the county-owned Grow Well Clinic. His radiology imaging and multiple MRI’s were negative for any significant acute injury. The provider felt that with claimant’s persistent complaints that an orthopedic evaluation should be considered. Claimant was referred to see Dr. Pat Do to evaluate his neck and shoulder injury, at the time his sole complaints. Before the appointment date, claimant canceled the same stating his symptoms had completely resolved and he no longer required care. He was released from the internal county treating provider on 3/23 based on his testimony. In May he began feeling pain in his neck again, now radiating to his elbow. He did not relate this to our injury and treated with his personal care physician (PCP). Claimant’s PCP reportedly identified a disc bulge on the MRI that the PCP felt to be contributory to the work injury, and that was missed by the original provider. The claimant felt that the disc bulge could only have resulted from his original work comp claim and again requested care. I requested prior medical records before treatment could be considered authorized. Before the claimant submitted a records release, we received a second radiology read from a neuro radiologist which determined again there was no disc bulge. Accordingly, claimant’s care was denied. The employee continued to text the county provider without our knowledge. After reviewing a cell phone MRI screenshot, the county clinic provider determined there could be a bulge. We requested another medical release from claimant. Once returned, I finally was able to locate medical records that determined the employee had a significant and recent history of similar complaints before our injury date. Before any action could be taken to refer for a prevailing factor opinion, the claimant obtained representation.

Periods of Disability:

- The employee received a total of 5 days of TTD pay for missed work due to the injury.

Permanent Partial Impairment / Permanent Disability:

- Whole body reserves are set at \$10,000 until further medical and litigation assessments are received. If the claimant is able to overcome the prevailing factor opinion regarding his prior care, this exposure will increase significantly.

Subrogation / Other Issues:

- The claimant was dishonest about his prior medical history, and we cannot be certain there are not additional medical providers he excluded from his medical release of information. A medical canvas probe is under consideration.
- Although the employee alleges a disc bulge from the injury, there has been no medical evidence or medical report received to confirm this. Additionally, it has been asserted that disc bulges are often considered incidental findings due to the large population who have a bulge yet are asymptomatic.
- Although his neck and shoulder are his primary injuries, his counsel may attempt to seek care for the other non-active injuries to increase the claim exposure.

Plan of Action:

- Counsel and I will perform additional medical investigation methods such as a medical canvas, claimant deposition, etc. to determine the true extent of his prior medical history.
- An IME will be obtained to determine causation of his continued complaints and the prevailing factor.
- As the claim is litigated, we will seek to settle and close the file within a reasonable settlement parameter on a full and final basis. We will uphold through litigation and settlement that any prior medical conditions are not related to his said work injury.



Claim Summary – Reserve Advisory

Employer:	Sherman County	Date of Injury:	03/27/2021
Claim No.:	21845831	Job Description:	Undersheriff
Employee Age:	52	Updated:	7/20/2021
AWW:	925.95	TTD Rate:	618.66
Attorneys:	N/A	Employer:	N/A

Adjuster: Amanda Chamberland

	Medical	Indemnity	Rehabilitation	Legal	Expense	Total
Reserves:	\$ 37,850.00	\$ 10,826.55	\$ 0.00	\$ 550.00	\$ 6,322.50	\$ 55,549.05
Amount Paid:	\$ 2,912.12	\$ 0.00	\$ 0.00	\$ 0.00	\$ 145.16	\$ 3,057.28
Outstanding:	\$ 34,937.88	\$ 10,826.55	\$ 0.00	\$ 550.00	\$ 6,177.34	\$ 52,491.77

Accident Description / Nature of Injury:

- Claimant was pursuing a felon in vehicle chase. Due to the danger to civilians, claimant ended the pursuit by performing a pit maneuver with the Sheriff Department truck (rammed the vehicle the felon was driving), resulting in injury to claimant’s left shoulder.

Investigation / Compensability:

- Claimant was in the course and scope of his employment and no pre-existing defenses are known at this time, the claim is accepted as compensable.

Medical Management:

- Claimant treated with Dr. Daeze who ordered an MRI showing no findings of rotator cuff tear, labral tear or biceps complex pathology. He was referred to Dr. Bazaz, orthopedic surgeon and treated with physical therapy and multiple injections with little to no improvement. Due to his lack of improvement Dr. Bazaz requested a left shoulder arthroscopy with bursal debridement and subacromial decompression with possible bicep tenodesis. This was authorized and performed 7/20.

Periods of Disability:

- The employee has not missed any work as a result of the work injury.

Permanent Partial Impairment / Permanent Disability:

- I expect a 6% rating to the left arm, the final is reserved for the same

Subrogation / Other Issues:

- I am consulting with counsel to determine if subrogation/restitution is plausible as the other vehicle did not directly hit him, however the injury is a result of a felony in progress.

Plan of Action:

- Once surgery is performed, I will work with the employer to return the employee to a light duty position
- I will review medical care and rehabilitation notes to ensure the claimant progresses as expected
- Once claimant is at MMI, I will attempt to settle his file, full and final