



Occupational Health in Massachusetts

Use of Workers' Compensation Insurance for Medical Care for Work-Related Injuries

Occupational Health Surveillance Program
Massachusetts Department of Public Health

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Highlights

- An anonymous telephone survey, the Behavioral Risk Factor Surveillance System, included questions about workers' compensation for 4,321 Massachusetts adults in 2007.
- Of these survey respondents who had been employed for wages, 4.2% reported being injured seriously enough while performing job duties during the previous 12 months that they required medical advice or treatment.
- Of the respondents who had a workplace injury requiring medical attention, just under 60% reported that workers' compensation insurance paid for the care.
- By far the most frequent source of payment other than workers' compensation was private insurance (24% of respondents).
- These findings suggest that Massachusetts workers are not receiving all the occupational health benefits to which they are entitled, and that these costs are being shifted to other sources.

How many people get hurt on the job? When people with work-related injuries need health care, how often does workers' compensation insurance pay for the services? The Occupational Health Surveillance Program (OHSP) at MDPH together with other occupational health leaders across the country are seeing increasing evidence that many more people are hurt at work than our official national figures suggest, and that they are not obtaining workers' compensation benefits that they are entitled to.¹⁻⁷ New data analyzed by OHSP add to the growing body of research on cases of work-related conditions currently lost to public health surveillance systems.

This past year OHSP used the Behavioral Risk Factor Surveillance System (BRFSS) to collect new types of occupational data for Massachusetts. The BRFSS is an annual, random-digit-dialed telephone survey of U.S. adults conducted by the Centers for Disease Control and Prevention (CDC) in collaboration with the states. The survey is conducted in several languages in Massachusetts, including English, Spanish, and Portuguese. It consists of a core of questions about health behaviors and conditions, as well as optional questions developed by CDC. States have the option of adding their own questions as well. In 2007, Massachusetts collaborated with nine other states (CA, CT, KY, ME, MI, NJ, OR, TX, WA) in adding a set of questions focused on workers' compensation.



Workers' Compensation Insurance

Massachusetts law requires all employers to carry workers' compensation insurance (WC) for all employees, even if they have just one employee.* All employees with injuries or illnesses caused or significantly exacerbated by their jobs are entitled to WC coverage for all medical care required by their work-related injuries or illnesses, as well as for reimbursement for prescriptions and travel to and from medical visits. Employees are covered regardless of their work schedule, length of time on the job, other benefits, or immigration status. Unlike many other forms of health insurance, WC involves no co-pays or premiums for the patient.

WC also entitles employees up to 60% of their average weekly wage (but no more than the state's average weekly wage at the time of their injury) if they miss five or more full or partial work days because of a work-related injury or illness. Obtaining these benefits can depend on a health care provider identifying the employee's condition as work-related so that the care for that condition can be charged to the employer's WC carrier rather than other forms of coverage.

This means that underutilization of WC benefits can shift costs to other forms of insurance or publicly supported care, and can also result in greater costs to patients and their families.

Massachusetts Residents' Reports of Work-Related Injuries

The additional BRFSS questions on workers' compensation first asked respondents whether they had been employed within the past 12 months. Those who reported having been employed were then asked, "During the past 12 months, that is since {one year before today's date}, were you injured seriously enough while performing your job that you got medical advice or treatment?" People who reported needing medical advice or treatment due to a workplace injury were asked, "How many days of work did you miss because of your most recent work-related injury?" and "For your most recent work-related injury, who paid for your treatment?" To answer this last question, respondents were given a list of potential payers to choose from. Those who chose a payer other than "Workers'

compensation" or "Your employer through a workers' compensation claim" were asked "For your most recent work-related injury, why was the treatment not paid for by workers' compensation?"

Percentages of responses are weighted to take into account differences between the total Massachusetts population and the group of people who participated in the survey. This weighting is designed to address the different rates of participation by people from different ethnic, racial, and age groups.

Of 4,321 Massachusetts adults who were asked the additional WC questions in 2007, 64% reported being employed (excluding the self-employed) during the previous 12 months. This percentage employed varied by gender, race and ethnicity, age, and annual household income (Table 1). Among those employed, 4.2% were injured seriously enough while performing job duties that they required medical advice or treatment. A higher percentage of employed men than employed women reported such injuries (4.7% of male respondents versus 3.7% of female respondents). Six percent of people earning less than \$50,000 that year reported injuries versus 3.2% of people earning \$50,000 or more.

Table 1. Percentage of Massachusetts adults employed for wages in the past year *

	Sample size	Percent employed	95% Confidence interval
All	4,321	63.8	61.6 - 65.9
Gender			
Male	1,539	67.5	64.1 - 70.9
Female	2,782	60.4	57.9 - 63.0
Race†			
White, non-Hispanic	3,670	63.0	60.8 - 65.2
Other, non-Hispanic	606	66.7	60.4 - 73.0
Hispanic	312	57.5	46.9 - 68.1
Age†			
<45 years	1,246	75.6	72.3 - 78.9
≥45 years	3,019	52.6	50.1 - 55.2
Income			
<50 thousand	2,509	50.8	47.5 - 54.1
≥50 thousand	1,812	75.0	72.4 - 77.7

* Excludes self-employed

† Excludes missing responses

Source: 2007 MA BRFSS

* This requirement applies regardless of the number of hours worked in any given week, except that domestic service employees must work a minimum of 16 hours per week in order to require coverage. A very few other occupational categories, such as seamen, real estate salespeople, professional athletes, and officers of corporations who own at least 25% of the stock in their corporations also are not required to have WC coverage (Massachusetts General Laws Chapter 152, Section 1).

While 4% of employed whites reported injuries, there were too few respondents in non-white and Hispanic categories to calculate reliable percentages for these groups. No differences in percentages were seen between people younger than 45 years of age and those 45 and older. The overall numbers here are consistent with Bureau of Labor Statistics (BLS) figures for 2007, which estimated 4.0 injuries for 100 full-time workers (some of the respondents in the BRFSS sample were employed part-time, which would result in a slightly higher rate than the national estimate), although BLS usually finds lower injury and illness rates for workers over 45 than younger workers.

Of the respondents who had a workplace injury requiring medical attention, just under 60% reported that WC paid for the care (Table 2). Of people earning \$50,000 or more, just 47% reported that WC paid for the care, but 71% of people earning under \$50,000 reported payment by WC.

By far the most frequent source of payment other than WC payer was private insurance (24%). While the numbers of respondents for the other types of payments were too small to report reliable percentages, the next most commonly reported forms of payment

were Medicare or Medicaid and self or family. In addition, several of the respondents indicated that they were not able to obtain treatment.

The number of respondents whose care was paid for by sources other than WC was too few to able to report reliable percentages for reasons for not using this coverage. However the most common reason selected among the choices provided was concern about retaliation for filing a WC claim, followed by not knowing that they could do so. Others explained that it was easier to just use other forms of insurance, that they didn't want their employer's WC premiums to go up, or that the injury was their fault, among "other" reasons given.

Improving Access to Workers' Compensation Benefits

The findings that only 60% of people with workplace injuries had their resulting medical care covered by WC insurance is a strong and troubling indication that Massachusetts workers are not receiving all the occupational health benefits to which they are entitled, and that these costs are being shifted to other sources. This proportion is similar to 2002 BRFSS results from Washington State, which found that 52% of workers surveyed who reported work-related injuries or illnesses also reported that WC paid for the treatment.¹

The survey questions in this study addressed only injuries, not illnesses. Although workers' compensation insurance covers care for work-related illnesses (for example, occupational asthma, skin diseases, organ damage from exposure to toxic chemicals, etc.), the work-relatedness of illnesses is harder to demonstrate. We would expect even lower rates of coverage for these conditions.

The BRFSS methodology has limitations. The results depend on respondents' self-reports, which are not always reliable — for example, people might not know who paid for care they received, and could identify a work-related condition differently than a medical professional would. In addition, the survey includes only respondents with telephone land lines, while increasing proportions of U.S. workers, especially young people and immigrants, have cell phones exclusively.

Table 2: Percentage of Massachusetts adults employed and injured on the job in the past year whose medical care was paid for by workers' compensation*

	Sample size	Percent care paid by WC	95% Confidence interval
All	110	59.9	45.0 - 74.8
Gender			
Male	50	58.2	36.1 - 80.4
Female	60	62.1	43.9 - 80.3
Race†			
White, non-Hispanic	92	62.4	47.8 - 77.1
Other, non-Hispanic	††	--	--
Hispanic	††	--	--
Age‡			
<45 years	45	--	--
≥45 years	64	58.1	41.2 - 75.0
Income			
<50 thousand	53	71.2	53.1 - 89.4
≥50 thousand	57	47.4	26.7 - 68.1

* Excludes self-employed

† Excludes missing responses

†† Sample size < 50

-- weighted percents not calculated because denominator < 50

Source: 2007 MA BRFSS

Nevertheless, the findings from this analysis support the need for public health practitioners to improve our outreach and education to employers, employees, patients, and health care providers about benefits available through workers' compensation. We also need to learn more about the obstacles that people face to using these benefits, and ways to overcome these obstacles. OHSP has developed patient educational materials on workers' compensation in English, Spanish, and Portuguese (www.mass.gov/dph/ohsp), and the Division of Industrial Accidents has produced WC guides for employers and in multiple languages for

employees (www.mass.gov/dia). OHSP looks forward to working with colleagues in health education, social work, clinical practice, health care finance, immigrant and refugee health, health care reform, and other fields to improve access to these important benefits.

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References

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Occupational Health Resources for Health Care Providers

Occupational Health Surveillance Program, MA Department of Public Health
617-624-5632, www.mass.gov/dph/ohsp

OHSP provides surveillance reports on work-related injuries and illnesses in Massachusetts, and can offer technical assistance and training to health care providers on occupational health topics.

Publications for providers:

- Occupational Lung Disease Bulletin (quarterly)
- Reporting Occupational Diseases and Injuries
- Protecting Working Teens: A Guide for Healthcare Workers
- Occupational Health Information and Services in Massachusetts: A Resource Guide

Publications for workers:

- Workers' Compensation in Massachusetts
- Protecting Working Teens: A Guide for Parents
- Under 18 and Hurt on the Job: Information on Workers' Compensation
- Your Rights Under OSHA
- Occupational Health Information and Services in Massachusetts: A Resource Guide

Massachusetts Coalition for Occupational Safety and Health

Addressing Work-Related Illnesses and Injuries: A Guide for Primary Care Providers in Massachusetts

http://www.masscosh.org/files/MassCOSH_BookOrderForm_0.pdf