SAW/RTW REPORTING
JUNE 2019
Requesting SAW/RTW Assistance

39-71-1041: Stay-at-work/return-to-work goals and options:
Return the injured worker to the same position with the same employer or to a modified position with the same employer as soon as possible after an injury or an occupational disease occurs.

39-71-1042: Request for and delivery of stay-at-work/return-to-work assistance:
(1) (b) If an insurer has accepted liability for the claim, the insurer shall provide stay-at-work/return-to-work assistance either in accordance with the insurer’s stay-at-work/return-to-work policy or by designating a rehabilitation provider to provide rehabilitation services.

(2) (c) If an insurer at risk has NOT accepted liability for the claim, the insurer may choose one of the following actions:
   (i) The insurer at risk for the claim may initiate stay-at-work/return-to-work assistance either in accordance with the insurer’s stay-at-work/return-to-work assistance policy OR by designating a rehabilitation provider to provide rehabilitation services AND shall notify the Department within 3 business days of being contacted by the Department that the insurer is acting under this subsection (1) (c) (i).
Responsibilities of the Insurer

24.29.1807: Responsibilities of the Insurer

1. Each insurer shall adopt a SAW/RTW policy and submit a current, complete copy of the policy to the Department. The insurer shall provide the Department with all SAW/RTW policy updates a minimum of ten business days in advance of implementation of policy change.

2. The insurer shall designate a single point of contact with authority to coordinate all Department requests for SAW/RTW assistance for injured worker and shall provide the Department with written notice of the contact person’s name or position title, telephone number, email address, and mailing address. When contact information changes, the insurer shall update the Department a minimum of 10 business days in advance of the change.

3. When a request for SAW/RTW assistance is made directly to the insurer prior to the insurer’s acceptance of liability for a claim, the insurer may elect to provide SAW/RTW assistance to the injured worker or it may refer the injured worker to the Department for assistance.

4. When a request for SAW/RTW assistance is made directly to the insurer and the insurer declines to provide SAW/RTW assistance the insurer shall notify the injured worker and the Department in writing within three business days of request for assistance.

5. After the Department has initiated SAW/RTW assistance to the injured worker, the insurer shall notify the Department in writing 3 business days of the insurer’s acceptance or denial of liability for an injured worker’s claim.
SAW/RTW Outcome Reporting

Initial Vision:
- Program created by Legislature as part of 2011 WC (HB334) reforms to assist IW & employers
- Stakeholder input indicated the need to report outcomes to measure effectiveness of program

What Rule Dictates:
24.29.1807: Responsibilities of the Insurer
(8) The insurer shall report the outcome of SAW/RTW assistance to the Department, using the Department Outcome Reporting Form, within 30 business days of the earliest of:
   (a) the return to work date
   (b) the termination of SAW/RTW services, or
   (c) the injured worker’s attainment of MMI

What Is Actually Happening:
- Not receiving any outcome reporting for this program, accept Plan 3
  - Last correspondence from MSF 11/15/18
- How can we leverage adjusters and current technology to report outcomes to DLI?
  - Are adjusters already capturing this info in an easy to send format?
  - What’s possible w/ EDI?
- How can we facilitate a smoother process?
  - Change reporting timeframe
  - Create a from to report quarterly instead of individually
  - Add to an existing form already submitted to DLI
Questions?

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