

Independent Medical Advice for Disability Insurers

The Help You Need to Make Accurate, Responsible, Defensible Decisions

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Sometimes, You Need a Hand

Nobody said it was easy in the field of disability insurance adjustment and management. Medicine and disability insurance are complicated fields, and just because you may be an expert in your company's policies doesn't mean you're equipped to make medical calls.

And so often, the decision of whether to pay or deny a claim comes down to a medical call. Your claimant may have some medical attestation to their condition, but from your end, you can't always be sure it's the full picture.

There are many forces at play you have to watch out for in order to keep the business performing appropriately and responsibly for those who really do need the help, and keeping premiums as low as possible to remain both competitive and accessible. When these forces unfairly tip the balance, premiums rise to compensate, and those who rely on you suffer.

As case manager in this process, you've got an important part to play in keeping the balance. This is a handbook to guide you through a variety of complicating factors in disability claims management. By the end, you'll know what to look out for — and you'll find out how to adopt the single most important strategy for cutting through uncertainty in disability claims.

The Question at the Heart of Disability Insurance

Is the claimant able to work? That's what a claim frequently comes down to. But there's so much that can go into that. Is the disability physical or mental? Are they completely unable to do their existing job? Are they able to do parts of it with employer accommodation? How does the case intersect with potential WCB payments? Is it likely that the claimant is able to return to work within a few weeks, months, years — or will they never return at all?

Then, how complete does the medical documentation sound? A seemingly incomplete picture could point to a problem you need to take notice of. You'll need to consider when they stopped working or if you have any reason to believe they're still working. Depending on the claimant's policy, they may also have to prove that not only can they do their own job, but that they're not able to do any job that their qualifications and experience allow for.



Getting a Fuller Picture of the Disability

There's what the claimant's telling you, and there's what's really going on. Certainly there are many cases where these are in sync: the person is suffering what they're claiming to suffer from, they meet all the requirements, they need the payments, and it's an easy approval.

But there are the cases with gaps. Perhaps they're suffering something, but it's not quite the extent they claim. Or it doesn't actually meet the policy's requirements. They're capable of doing work, but they're claiming it's just not possible.

A few important suspicious red flags to watch out for are long term disabilities lasting longer than expected, [chronic pain that isn't objectively verifiable](#) and relies on the patient themselves to report, and a history of prior injuries and claims.

How to Reduce Uncertainty and Confirm the Disability

There are many methods insurers use to confirm the existence, extent, and longevity of a disability. You may be able to request more information from the claimant's doctor if you feel it's lacking. You'll have access to tables, of course, that provide statistics that can guide your expectations. And to some extent you'll likely be familiar with common ailments and develop a good sense of what you're looking to see.

Many insurers will also turn to surveillance techniques when something pops up that gives them pause. Any visit to the claimant will involve an observation of their condition — or you may turn to an independent investigator to find out what they're up to. It often doesn't take long to spot an inconsistency between the reality and the claim, when it exists.

Then, there's the option of getting an Independent Medical Examination. This involves bringing in an independent medical expert to take their own look at the issue. This offers clarity, from a specialist, that you can often get relatively quickly, compared to normal waiting times.

It also helps you navigate the difficult world of medicalization: [when a non-medical issue gets unnecessarily promoted to the status of medical problem.](#)

Medicalization: What it is and How It Spreads

Medicine itself can get sick. Sometimes, a disability claim is obviously plain dishonest. But medicalization can be a major factor in disability claims, because it leads a person to think and believe that they're more sick and less capable than they actually are. This results in unnecessary claims made entirely in good faith.

There are many forces in play that create these medicalizing effects. Often, a person is genuinely suffering some pain and difficulty. Their friends and family's natural reaction is to comfort and reassure, perhaps suggesting they're suffering from some condition they've heard of. A sympathetic GP might have a similar effect, now from their position of authority. The internet is ready to illegitimately confirm anybody's suspicions about anything. And then there's a whole host of additional para-professionals offering their own treatment — and they have financial incentive to lock these people into their programs.

The result of all this is the person feels they are genuinely suffering from some intractable condition, when really all they have to do is wait for the body's natural healing abilities to kick in. They get sucked into a world of unnecessary treatment filled with authority figures validating their concerns, and in the worst cases, consider themselves permanently disabled and unable to work.

And that's where it intersects with their disability insurance package.



Subjective Conditions and Medicalization: What to Watch Out For

A somatoform disorder lies in the middle of the “real” medical problem spectrum. Between outright malingering when a person is inventing or exaggerating an issue for some gain, and obvious pathology like serious diseases and broken bones, somatoform disorders are impossible to nail down objectively — but the patient may well be feeling real debilitating pain.

For the disability insurer, you can end up in quandary. An objectively verifiable disability claim can make for an easy decision, but with a somatoform disorder, much of the trust lies with the patient. Let's look at some examples.

Common Somatoform Disorders

Fibromyalgia

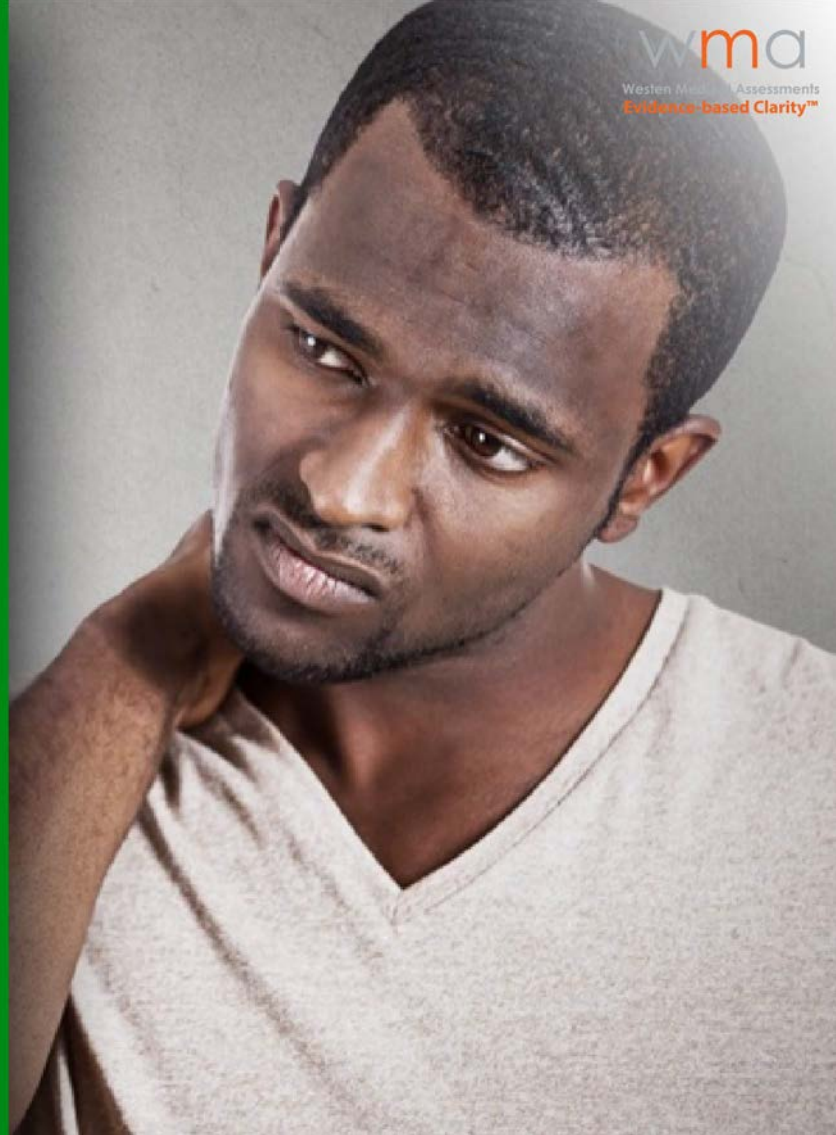
This is a medically controversial condition, with sufferers complaining of pain, feeling tired, and having issues sleeping. However, there is no known cause, and it's only diagnosed after ruling out other conditions.

Myofascial Pain Syndrome

This one involves pain in soft tissues (muscles or fascia) in one region of the body. There is also often reported tenderness and restricted range of motion. But again, the cause is not known, and the symptoms are subjective, which makes it hard to treat.

Chronic Fatigue Syndrome

Another example is chronic fatigue syndrome. A person with this may complain of being tired all the time and having a significantly harder time doing things that should be routine. It may occur gradually or suddenly. Again, the symptoms and diagnosis are vague.





What Disability Insurers Can Do About Medicalization

Several things tie all these and other conditions together: the cause is unknown, many details are vague, and there are no objectively verifiable aspects whatsoever — your claimant may well be feeling what they say they are, but you wouldn't be alone if you have questions about it.

However, understanding what medicalization is means you have a better chance of spotting it in your claims — or at least, you know what to look for, and what to do about it.

If you'd like a deeper look at the topic of medicalization, you'll want to check out this [webinar our Medical Director Dr. Roger Hodkinson gave](#). It's got a lot more detail and will prime you to start to see where this process may be creeping in.

Mental Illnesses — Where Do They Stand in Disability Claims Management?

Mental illness can have just as powerful an effect on a worker's ability to perform as a physical disability, but with the added complication of generally not having an obvious visual element: such as a broken leg.

For a disability case manager, or any observer, understanding the severity of a mental illness and the implications for work is a difficult task often better suited for mental illness experts. Any mental illness may qualify a worker for benefits, depending on their plan and the extent to which it affects their work. You may find this list of common mental illnesses to be a useful resource in understanding how to manage such cases.

Depression

Depression can have a major impact on the state of a person's mental health. Among the symptoms, which can present between mild to severe, are losing interest or pleasure in activities, appetite loss, difficulty sleeping, fatigue and thoughts of death or even suicide.

There are many ways that depression might be accommodated in the workplace while an employee is in the recovery process. Flexible work hours can help manage absenteeism, increasing natural lighting can aid concentration, and reducing tasks can improve fatigue.

Ultimately, a leave of absence may be required to allow the employee to recover enough to be able to work at all, and they may be eligible for disability benefits to offset that financial burden.





Bipolar Disorder

Bipolar disorder is an illness that sees a person go through severe mood shifts, from periods of mania to depression. Symptoms that can interfere with work present during manic periods include distractibility, increased or excessive engagement in risky behaviours or goal-directed activities, with depressive episodes featuring symptoms outlined in the previous section.

As with depression, a number of accommodations may be made to lessen the impact. A worker with bipolar disorder may be eligible for disability benefits, but a proper diagnosis is crucial, especially because the severity and frequency of the mood shifts can vary.

It's important to balance mental health needs with work needs

Anxiety Disorder

Anxiety disorders cover a range of more specific conditions. Phobias are fears around things or situations intense enough to seriously impact quality of life. Panic disorder triggers panic attacks for seemingly trivial or no reason at all. Those with social anxiety disorder have persistent fears around social situations, worrying that they'll act in an embarrassing or humiliating way.

Depending on the condition and severity, concluding that an anxiety disorder makes someone eligible for disability benefits is a complicated process that should involve medical professionals with specific expertise. Anxiety disorders can develop over time, and shouldn't be mistaken for more common fears or shyness.





Addiction

Many people might think of addiction in terms of illegal drugs, but addiction can involve a compulsion toward many substances — even behaviours, like gambling and risky sexual behaviour. It can be hard to spot in the workplace, but signs include increased absences, lateness, longer breaks, changes in appearance and attitude, and an upswing in errors.

Someone suffering addiction may be eligible for disability benefits through their insurance plan. If they are, the terms of the plan may require that the person participate in a treatment program in order to receive them. Unfortunately, when it comes to substance addiction, [the path to recovery is uncertain](#).

The Answer: Independent Medical Examinations for Disability Claims Management

You've got a tough disability claim on your desk. The claimant has had an accident that prevents them from working due to a disability, but some of the information just isn't adding up. It could be that they just haven't recorded it properly and you need to reach out to get it. But maybe the doctor's report itself isn't quite aligning with what you think is going on.

One of the red flags discussed in this book may be present. Chronic pain you have difficulty verifying. A physical disability is lasting much longer than expected. Or you suspect that the claimant is able to work, contrary to what they're telling you.

Without direct access to any of these people, and without medical expertise yourself, you need a helping hand. That's where the Independent Medical Examination comes in.

What are the Benefits of Independent Medical Examination?

An Independent Medical Examination involves retaining an independent medical expert to examine a claimant. They will use their knowledge and expertise to provide an opinion about the condition in question. You'll then receive an authoritative report that you can use to aid your decision-making in case management.

Insurance policies are complicated. Injuries and illnesses can also be complicated. Relying on just the information that you're given by the claimant and their doctor might not be enough for you to see that a claim satisfies the minutia of the policy in order to trigger a payment.

You'll get access to an expert with specific expertise in the area of medicine in question. This seasoned opinion will usually carry more weight and paint a fuller picture than the patient's general practitioner and will help you come to a decision that you can not only be confident is the right one, but that you can more easily defend, should the case escalate.

And if an Independent Medical Examination isn't quite right, [you may find some of our other medical services useful](#).





Can a Claimant Refuse to Submit to an IME?

A claimant might have legal grounds to refuse to submit to an IME. Given the complexities of medicine and law, you may need to seek specific advice if a claimant does refuse.

On the other hand, in some jurisdictions and in some circumstances, an IME may be legally mandated after an accident, or it might be contractually obligated as part of the disability claims process. If a claimant refuses to submit to one, you may be free to deny their claim outright as the claimant is in breach of policy.

Know the limits and rights you're operating under and with. This, again, is something a medical expert can help you understand.

How to Find an Appropriate Medical Expert

Western Medical Assessments has decades of experience with Independent Medical Examinations — and has handled more than 63,000 of them! We work with a network of experienced specialists in all fields, and we're well positioned to help connect case managers with practitioners you can trust.

Reach out to us today, and we'll help you get started with the help you need to resolve your difficult claims. You can get started with a quick, no-obligation call to our [Medical Director Dr. Roger Hodkinson](#) at 780.433.1191. He's always happy to share his decades of experience with insurance adjusters looking to make the right decision.

Or reach out to any of our channels!

<https://westernmedical.ca>

