

WHAT'S NEW Benefits & Compensation™

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Finally! A new approach to FMLA that benefits everyone

■ Lessens impact of tricky intermittent leave cases

They're among the biggest FMLA users: Employees with chronic pain that never seems to get better.

Some are FMLA abusers, but most have a legit medical problem. Even so, getting medical certification can be tough, and it's hard to predict absences for these workers (unlike the suspected fakers with backaches every Friday).

But there's hope for lessening the hassle of administering intermittent leave for these employees.

Cuts costs, help with certification

Research shows the frontline use of the medical sub-specialty called pain management can help you get reliable certification for these employees' conditions.

It may also help cut FMLA-related absences and their associated costs by one-third or more.

The goal, says Dr. Ira Fox of Anesthesia Pain Care Consultants, is to treat patients so they get enough relief to go back to work.

How it works: The doc uses X-ray guidance to locate the source or sources of pain.

Once accomplished, it's possible to document the condition for FMLA administration and set up an appropriate treatment schedule.

In many cases, this makes a big dent in employees' need for partial and full FMLA days off. The typical treatment is an injection of long-lasting pain-killing medication that gets to the source of the pain.

Another reason to consider making pain management referrals a primary FMLA strategy: The service costs much less than traditional treatments.

Example: Compare the cost of a few anesthetic injections to MRI's and possibly unnecessary surgery.

Best to start early

The best odds for success come when pain management is used early in the FMLA process – preferably as the employer's first stop after a GP.

That's because there's a psychological connection between pain and healing.

The chance of success goes down for people who doubt they'll get better. That can happen when employees bounce from one doc to another or when pain goes away for awhile, then rears its ugly head again.

Reputable pain management clinics have patients undergo psychological evaluations before they're treated.

A huge advantage: This helps identify people whose pain may stem from depression or other mental issues.

Evidence-based medicine

Most health plans nowadays will cover pain management service and may even work to educate GPs to send patients with pain to these specialists.

Even so, your company's results may vary from one plan to another.

Some third-party administrators (TPAs) are better than others at making coverage decisions for pain.

The reason: It's hard to apply "evidence-based medicine" – studies that prove one treatment method works best for certain conditions – to pain management. Dr. Fox says this is because real-life treatment success depends largely on subtle differences in the pain medicine doc's technique.

For best results, Dr. Fox recommends asking your vendor:

- What are the certifications and training of the pain med docs in its network? At minimum most should be anesthesiologists, board certified in pain. Look for the American Board of Anesthesiology added qualities in pain management, American Board of Pain Medicine and FIPP - World Institute of Pain.
- Does the carrier have data to show the cost-efficiency and back-to-work success rate of its network?
- Does the TPA favor pain medicine as a frontline treatment? If not, how many medical channels would your employees have to go through first?
- Does the carrier's medical director consult the latest pain management studies? Reason: The field is evolving fast and some techniques seem to work better than others for different types of pain.

It's not a cure-all for everyone who wants FMLA for pain, but frontline use of pain management clinics can help you certify and administer these cases. Bonus: There's strong evidence it helps cut workers' comp claims, too.