



### **IBI Presentation:** Mitigating the Impact of Absence on 24/7 **Employers**



#### **Presenters**



#### Michelle Jackson, MSW

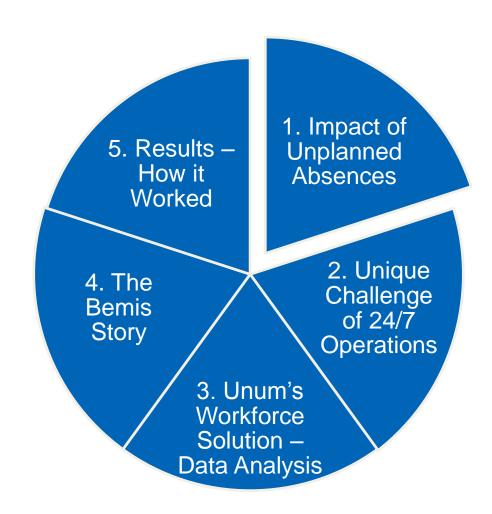
- Assistant Vice President, Workforce Solutions Group
- Bachelors in Psychology
- Masters in Social Work
- 18 years tenure with Unum
- Managed both Clinical/Vocational and LTD Claims teams
- Sales/Service role primarily working with national clients on all service aspects and developing benefit solutions



#### Lisa Trepanier, CRP, SPHR, SHRM-SCP

- Director Global Mobility & HR Administration
- Bachelors in Business Administration
- 13 years tenure at Bemis
- Responsible for overseeing the Global mobility function and the HR Plan Administration team.
- Primarily responsible for establishing common HR program, benefit administration processes and procedures and compliance.

## Agenda – Putting it all together



## The Impact of Absence

Disability
related
absences cost
employers
between 8%
and 15% of
payroll
FML, STD, LTD



Disability costs are expected to increase in the United States by 37% over the next 10 years



Indirect cost such as lost productivity, presenteeism, negative impact to engagement

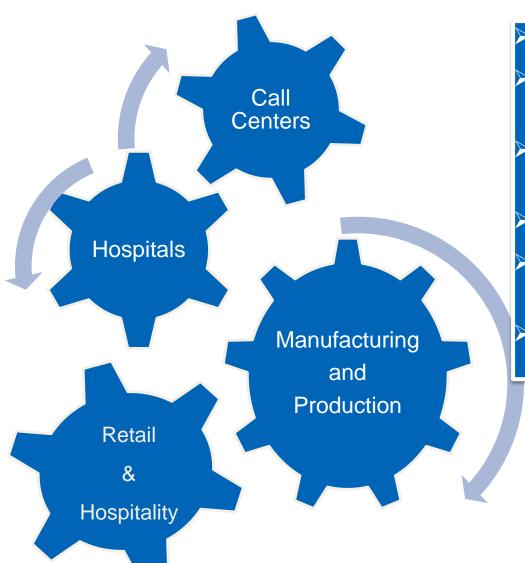


Co-workers
were perceived
to be about
30% less
productive
when providing
coverage for a
peer during a
typical
absence.

Good News: Employers with Stay-at-Work (SAW) & Return-to-Work (RTW) programs have significantly fewer short term disability (STD) lost work days & lower cost per Long Term Disability (LTD) claim\*

<sup>\* 2015</sup> EMPAQ Insight Study

### The Nature of the 24/7 Organization



- Round the clock coverage
- Multiple shift options early hours and late shifts
- Regulatory requirements for staffing levels
- Staff to patient requirements
- Customer service considerations
- Maintaining expectations of productivity

### Workforce Solutions through Data Analysis

# Evaluation of Workforce absences - gather the data

- Family Medical Leave Total FML Leaves, Non concurrent FMLA Leaves and Non concurrent FMLA lost workdays
- STD/LTD Annual claims incidence per 100 covered employers; cost per employee and Lost workdays per 100 employees; diagnostic drivers

# Analyze the data for key trends

- Key drivers by diagnostic category (muscoskeletal, cancer, circulatory)
- Breakdown by Department, occupation and/or locations
- Determine any policies or practices that contribute to absence

# Determine key areas to target based on data

- Identify highest utilization area based on data
- · Highest potential area for improvement
- Motivated key partners

# Develop Return to Work Strategy and implement program

- Senior Leadership support is key to success
- · Identify resources and key partners to include
- Develop workflow and strategy with vendor partner

## **Bemis Company Profile**

Industry Leader in packaging since 1858

Inspired packaging Solutions

\$4.3 billion 2014 net sales

- Fortune 500
- S&P 500

59 facilities in 11 countries

- North America
- Latin America
- Europe
- Asia Pacific

17,000 employees worldwide

Technical,
Scientist,
Production
and more



# **World Class Customer Base**















































**Smithfield** 







# The BEMIS Story – Setting the Stage

## **Evaluation of Incidence**

860 STD claims for all of Bemis in 2012

## Lost Work Days (LWD)

- 26,171 LWD = 101 FTE's out of work annually
- 44% of claims are musculoskeletal /injury

A Growing Problem

Both
Union &
Non
Union

#### **Pilot RTW Detail**

- \* 12,794 LWD
- \* 49 FTE's out of work within 9 pilot sites
- \* 62% of the pilot location's LWDs due to musculoskeletal

#### On Site visit

- Identified production workers' occupation
- 2-4 week transition plan was optimal
- Variable work week schedule



## **Factors Leading to RTW Strategy**

Reduce ADA legal risk – rigid policy with no restrictions in order to return Consistency
between
workers'
compensation
(WC) and nonwork disabilities

Aging workforce associated with long-term absences average age of a Bemis employee is 47

Lost time impact study – average leave durations lasting longer than expected Need for RTW program was identified



# Program Overview April 2012 through 2015

Program Development – 9 partner locations

- 9 unique facilities actively participated in building the RTW strategy for the organization
- Unum conducted onsite visit to observe roles/occupations to understand how to accommodate restrictions

Launched pilot RTW program

- Chose locations (14) with high STD incidence
- Locations with opportunity and engagement
- Rollout to all North America facilities completed January 2014

Identified biggest concerns

- Returning too soon would cause increase in WC claims due to re-injury
- Potential for an increase in union grievances
- Work is too physical for employees to be less than 100%

Provided specific education

- Educated pilot facilities on STD recurrent provision vs new WC
- Shared successes: TRTW have allowed employees to transition safely to full-duty, no increase in WC claims
- Employees WANT to come back to work see this program as interactive and flexible; educated supervisors and managers on employee desire to work

## **Program Management – Details**

Program designed to transition back to work from short-term disability (STD) leave prior to fullduty release

- Designed to occur at the end of healing and only in a productive manner
- In partnership with Attending Physician & restrictions/limitations
- Threshold for considering RTW = 42 or more days on STD

Primary goal is to increase productivity by reducing lost time and STD claim durations

- Does not extend STD leave period beyond current dates for full-duty release
- Allows for gradual transition and work hardening
- Can mitigate associated cost of long-term absence

Return transition
timeframes and restriction
accommodations
determined by the
business

- Transition timeframes typically 2 to 4 weeks in duration
- Most popular accommodation is bringing employees back on short weeks with reduced hours
- Acceptable job modifications include co-workers rotating tasks, alternate work assignments, and cross training

## **Program Management – Outcomes**

Transitional Return to Work is now part of the normal process – embedded in workflow

Improved employee level engagement and satisfaction

Mindset of Accommodation – extinguished old stance

24/7 Shift Work can be accommodated (12 hour rotating, long & short shifts )

Trade Partners – employee level accountability

#### Results: How it Worked

#### **RESULTS THROUGH 2015**

Lost Work Days Impact

From April 2013 through 2015

A. Saved Lost Workdays 1,596

B. Full Time Equivalent (FTE) Impact = (A/260) 6.1

C. Average Salary \$45,000

D. Indirect Savings @ 100% (BxC) \$276,230

E. Direct Savings (BxC x 60% STD benefit) \$165,738

TOTAL Savings from RTW Program ......\$441,968

<sup>1.</sup> Bemis saved lost work days with RTW program (from program inception to current)

Estimated average salary

<sup>3.</sup> Productivity savings (indirect savings) - Calculated by assuming 100% of direct savings; may include hiring and training of replacement workers, overtime, lower productivity from replacement workers, and routine overstaffing

<sup>3.</sup> Direct savings - 60% of salary replacement

### Considering implementing a RTW strategy?

Gather information and data. You must be able to quantify the cost of lost time

Develop Return to Work Policy
Outline opportunities, barriers and challenges

Determine key partners to collaborate with, i.e. Occupational Health, Case Managers, vendor resources, on site clinic

Gather Senior Leadership support

– make the case – the business
case by the numbers

Start small – identify a pilot location and implement

Monitor and measure the results

Expand

## **Questions and Answers**



#### Michelle Jackson, MSW

- Assistant Vice President, Workforce Solutions Group
- mijackson@unum.com
- 804.346.1350



#### Lisa Trepanier, CRP, SPHR, SHRM-SCP

- Director Global Mobility & HR Administration
- Imtrepanier@bemis.com
- 920.527.5166