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11.05.17 RR

## **Response to questions raised in estimates**

### **Workforce and Advanced Learning**

#### **Workers Compensation Board – appeal time frame**

The timeframe for appeals is fixed, as defined in legislation. While there is a vacancy in the Worker Advisor position, the Workers Compensation Board and the Office of the Worker Advisor have a process in place to ensure the timeframes are met and the workers are supported, as required, in the appeal process.

The claimant must express the desire for an appeal within certain time frames. For a WCB internal appeal, the deadline is 90 days. For a Workers Compensation Appeal Tribunal appeal, the deadline is 30 days. All partners have a close working relationship and a statement indicating an intention to appeal can be filed, even if the formal appeal and supporting documents are not yet complete. This allows the 90 and 30 day windows to be protected.

A claimant seeking an appeal can go to the Worker Advisor Office or Workers Compensation Appeal Tribunal office any day of the week and someone will help them complete the form to start the process.

This is a collaborative process with the injured worker. Everyone involved clearly explains the process so the worker understands the time limits. If any injured worker has concerns about the process or a case, they may call the Workers Compensation Board or the Worker Advisor Office. WCB also has a Service Quality Coordinator who has a role in ensuring fair decision making and clear decision writing as well as assisting persons with a direct interest if further support is required in this process.

WCB Office: 902-368-5680, Worker Advisor Office: (902) 368-6460

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#### **Impairment assessments**

Impairment assessments are performed at the request of the Workers Compensation Board when a worker has reached a plateau in their medical recovery and functional limitations remain. Impairment assessments are performed by healthcare providers who are certified and have received specialized training. The assessments are performed using American Medical Association (AMA) Guidelines, an international guide to impairment assessment. It is used by many boards across Canada to provide consistency in impairment rating.

If a worker has received an impairment award and there is a change in his or her medical condition they may apply to the Board for a review of the degree of impairment. (No earlier than 16 months from the most recent decision respecting the degree of impairment of the worker).

The annual costs to the Workers Compensation Board in ensuring injured workers receive impairments awards is around \$89,000.

If an injured worker disagrees with the assessment, there are several points of recourse. They can contact their case worker at the WCB who will review their file with them and explain the reasons for the decisions. They can also make a written request for reconsideration of a decision to the WCB Internal Reconsideration Officer.

If they come to the Worker Advisor Office wanting to appeal a WCB decision (wherein the assessment was part of the decision), the Worker Advisor Office does not fund a second impairment assessment. There is a small budget (\$5000) in the Worker Advisor Office for miscellaneous medical inquiry questions on behalf of injured workers. This is common practice across the country.

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#### **Atlantic Harmonization Project**

The IT vendor for the Atlantic Harmonization Project has not yet been finalized, as one province is still in the process of final approvals. The approvals are expected shortly. Once the approvals are finalized, we will supply the name of the IT vendor.