

TeleCompCare®



Employee Frequently Asked Questions

What are the hours of operation for nurse triage and telemedicine?

Triage nurses and telemedicine providers are available 24 hours a day, 7 days a week, 365 days a year.

Should the employee still report the injury to their supervisor?

Yes, the employee should first report the injury to their supervisor and the supervisor should conduct their internal investigation as usual. If the employee is requesting medical treatment or is unsure if they need medical treatment, the employee should be instructed to call the TeleCompCare® (TCC) triage nurse.

Does the employee's supervisor need to be on the line or in the room during the nurse triage call and how is the correct employer identified?

When calling the triage nurse, the employee should reference the employer's unique TCC account number. This unique identifier will help the nurse find the correct employer name and location so the claim is set up on the correct policy. The employee provides the triage nurse with their personal information and medical history, so the supervisor should give the employee privacy for the call.

What happens if an employee has an incident, but does not wish to seek medical treatment?

The supervisor/HR representative can report the claim to us online via the appropriate brand claim reporting portal or they can call the nurse triage line. After pushing option #2, they will be directed to our intake department. The supervisor will need to know the employer's policy number to use this option.

How does the triage nurse decide recommended treatment options after speaking with an employee?

With the aid of a computer program, the triage nurse follows evidence-based medical guidelines and specific triage algorithms to determine the proper treatment recommendation. The three treatment recommendations are: Nurse self-care instructions, virtual telemedicine visit or referral to an occupational clinic.

Can an employer choose their own clinic if an employee is referred for treatment?

Absolutely. If the employer already has a relationship with an occupational clinic, the employer should supply this information to our TeleCompCare® team at the time of TCC enrollment and it will be provided to our triage nurse vendor. If a clinic referral is recommended, the employee will be directed or soft channeled (per state laws) to the preferred clinic. In states where a panel is to be provided to the employee, the employee will be referred back to their supervisor to obtain a copy of their employer's panel.

What happens if an employee is recommended to receive treatment via a virtual telemedicine visit?

If the triage nurse recommends a telemedicine visit, they will be transferred to a concierge agent who will help the employee download the virtual telemedicine visit app and create their own personal account. He/she will stay on the phone with the employee until the provider is available.

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What if the employee does not want to participate in a telemedicine visit and would prefer to go to a clinic?

If the triage nurse recommends a telemedicine visit and the employee does not feel comfortable with this option, they always have the choice to decline the telemedicine visit. In this case, the employee will be sent to an occupational clinic or employer's preferred clinic.

How is a return to work addressed during a virtual telemedicine visit?

After the telemedicine visit is complete, the employee will receive an email with instructions to log into the telemedicine application to retrieve their return to work slip which they'll provide to their supervisor/HR rep. A copy of the return to work slip will also be sent to the employer contact listed during initial enrollment.

What percentage of cases are referred for telemedicine, self-care and clinic referral?

On average, 15% of referrals result in a telemedicine recommendation, 43% of referrals are self-care and 42% are referred to an occupational clinic.

How is the first report of injury created after an employee speaks with a nurse?

The triage nurse report is sent to our intake team, where triage information is entered into our claim system and a new loss is created. The employer is no longer required to report the claim separately to AF Group.

Who receives a copy of the nurse triage reports?

The employer can designate who at their company should receive the triage nurse reports for each of their locations. The report can go to several people at each location, however, we will need to obtain a distribution list from the employer.

Is there a cost to use the TeleCompCare® (TCC) program?

If the triage nurse recommends self-care, there is no cost to use the program and the claim is simply recorded. If the nurse recommends treatment such as clinic referral or telemedicine, a charge is applied to the claim file under the medical expense. The employer will not receive a separate bill.

How is the telemedicine virtual appointment paid?

The physician visit is billed and paid to the claim file, the same as an in-person physician visit at a clinic.

How is this program rolled out to an organization?

The TCC team can provide marketing material and support to aid in the rollout to employees, however, the employer rollout is unique to their organization and culture. Typically, TeleCompCare® is rolled out similarly to other employee benefits, like open enrollment. This can be done by distributing the employee marketing packet, posting intranet videos and conducting staff meetings.

Are there multilingual nurses available to speak with an employee?

Yes, the employee has an option to push #9 to connect to a Spanish-speaking nurse. All other translation services are available as well through our vendor partner.

What is the process if the employer mandates post-accident drug testing?

If post-accident drug testing is a mandatory process for the employer's injury reporting process, the supervisor should provide the employee with instructions on how to complete this (per the employer's policy). The triage nurse will not instruct the employee to submit to a drug test.