Supporting Employment for Newly Ill and Injured Workers

Evidence on Early Intervention

Jack Smalligan and Chantel Boyens

KEY FINDINGS ABOUT WORKER HEALTH AND EARLY INTERVENTION STRATEGIES

Each year, about 2.5 percent of US workers (roughly 4 million people) report a new, serious health shock that could affect their ability to work. After four years, this group is almost three times more likely to have left the labor force.

Evidence-based early intervention strategies improve employment outcomes and are effective across a range of medical conditions.

Access to employer-provided early intervention services in the US is limited and uneven because the services are generally provided voluntarily.

Every year, millions of workers in the United States develop debilitating illnesses or injuries or experience the worsening of chronic conditions that limit their ability to remain on the job. While a select few have access to employer-provided early intervention services that help them stay connected to the workforce, most do not because employer-provided services are voluntary in the US.

The most effective intervention services are offered to workers soon after they become ill or injured—well before their condition worsens and they apply for Social Security Disability Insurance (SSDI). Interventions that occur after workers have been out of the workforce for a substantial period are not nearly as effective.

WHAT IS EFFECTIVE EARLY INTERVENTION?

Effective early intervention services

- emphasize strong communication and coordination among the employee, the employer, the health care provider, and the worker’s personal environment;
- identify work as a positive health outcome and recognize the benefits of continued employment for workers and employers;
- educate employees and employers on reasonable accommodations to address a new potentially disabling condition; and
- support continued employment for workers who develop new illnesses or injuries that could limit their ability to work or force them to leave the workforce.

WHAT DOES THE EVIDENCE SAY ABOUT EARLY INTERVENTION?

Research on early intervention programs in the US and abroad shows that they can help workers who experience a new illness or injury or the worsening of a chronic condition. Effective programs

- increase the likelihood of workers returning to their jobs,
- reduce or delay applications to SSDI,
- increase worker earnings,
- reduce the length of time a worker stays away from work,
increase worker retention,
reduce the likelihood of the condition(s) leading to a long-term disability and of long-term harm from the incident,
help combat depression, and
are effective across a range of medical conditions, from musculoskeletal conditions such as chronic back pain to common mental health disorders such as depression.

HOW CAN EFFECTIVE EARLY INTERVENTION BE SCALLED SO MORE WORKERS BENEFIT?

In the US, expanding access to effective early intervention is more likely to occur outside of employer-based models through other vehicles such as workers' compensation, vocational rehabilitation, paid medical leave, and temporary disability insurance.

Our review of the evidence suggests these approaches could be successful if they include the key elements of effective early intervention models. The US Department of Labor is already taking steps in this direction with the Retaining Employment and Talent after Injury/Illness Network (RETAIN) grant program, administered with support from the Social Security Administration.

Growing bipartisan interest in establishing a national paid family and medical leave policy presents a promising opportunity for policymakers seeking to expand access to early intervention. A paid medical leave claim can be an early warning that someone has an injury or illness that could force them to leave the workforce. A new medical leave benefit could be paired with grants for states to test promising early-intervention models. The grants could follow a tiered-evidence approach that allows for state development of new models and emphasizes testing and rigorous evaluation to ensure programs can be replicated faithfully and expanded over time.

ADDITIONAL READING

Employment and Income Consequences of New Work-Limiting Health Shocks
Stipica Mudrazija and Jack Smalligan (forthcoming)

Expanding Early Intervention for Newly Ill and Injured Workers and Connections to Paid Leave
Jack Smalligan and Chantel Boyens https://urbn.is/2l0Wx07

Stay-at-Work/Return-to-Work Research & RETAIN Demonstration Projects

Supporting Employment for Newly Ill and Injured Workers: Evidence on Early Intervention
Jack Smalligan and Chantel Boyens https://urbn.is/2ARVHzU

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