

QBE Return+

Frequently Asked Questions

How is the service paid for, does it affect our claims experience?

Conventional employers' liability cover: QBE cover the costs of the service. Rehabilitation case costs will be clearly visible on the claims experience as 'Rehab Only' cases.

Non-conventional employers' liability cover: QBE cover the costs of the service but will look to recoup these from the policyholder once the input is completed. Rehabilitation case costs will be clearly visible on the claims experience as 'Rehab Only' cases.

How is this beneficial if we have to pay for it?

The costs associated with early rehabilitation intervention assists employees to recover and return to work as soon as possible, mitigating formal claims and potential subsequent claims costs.

How much does an average case cost?

Cases usually cost £200-500 (depending on business sector).

How do you monitor the costs?

Each case has a 'delegated authority' of £3,000, allowing the rehabilitation provider to arrange private treatment up to that amount, without requiring prior authorisation from QBE. If a case is going to breach the delegated authority a member of the QBE Rehabilitation Team will be notified to review the case.

What happens if we aren't liable?

The insureds can decide which cases they wish to refer to the service at the outset, but for all cases that look like they will breach the delegated authority of £3,000, a review of the case will be undertaken by QBE's Rehabilitation Team, in conjunction with the insureds and claims representatives where appropriate. Any cases where legal liability is unlikely to attach will be transitioned across to the NHS by QBE's rehabilitation provider.

Why is the average case cost so different to the delegated authority?

QBE's in house Rehabilitation Team monitors the health landscape and industry costs for treatments and QBE Return+ interventions. From this it is determined that £3,000 provides enough money to finance physical and psychological treatment, should it be required, without prior authority from QBE.

Is rehabilitation cheaper than what we would spend on formal claims?

Yes, our agreed rates with our panel rehabilitation providers are usually around 30% cheaper than third party solicitor led rehabilitation rates.

Treatment

What treatment can be provided under the service?

Physiotherapy, psychological treatment (e.g. CBT, EMDR, counselling, clinical psychology), diagnostics (e.g. ultrasound, MRI, CT, nerve conduction studies), and minor surgical procedures are the most commonly provided treatments.

Do you offer virtual/remote/digital treatment?

Our panel rehabilitation providers have a robust digital/ virtual approach to treatment. We are aware of the many benefits virtual treatment has to offer, and the strong efficacy of virtual treatment alongside traditional, face-to-face treatment.

We offer EAP already, how is this different?

We suggest that QBE Return+ is used as a pathway to manage work-related injury and absence. Our rehabilitation providers can assess mental health/psychological symptoms and refer for private psychological treatment for issues related to the index accident. The service does not replace existing services, such as EAP, which we would encourage you to continue to promote these for non-workrelated situations.

FAQs – QBE Return+

What about NHS treatment?

If NHS treatment is underway and is running smoothly, we aim to support this via case management and avoid disruption of the treatment. If there are lengthy waitlists for treatment or your employee is unable to access a sufficient level of treatment, we can then refer for private treatment.

Case Management

What are the case managers' qualifications?

Our panel rehabilitation provider employs qualified health professionals, that are either HCPC registered Physiotherapists, or suitably qualified mental health clinicians. They are all trained in assisting people back to work after injury.

How are the triage assessments done?

Case managers undertake telephonic triage assessments that can take up to one hour. Face-to-face assessments are not offered in this service.

How do case managers maintain communication during the case?

Case managers will communicate with the employee regularly via phone, to monitor their treatment and return to work. Following the initial triage report, they complete monthly update reports that are sent to the referrers to monitor progress with rehabilitation.

How do case managers assist with RTW?

The case managers are experienced in assisting people back to work after injury. Any information that you can provide to supplement their knowledge on the work tasks your employees are required to do and the environment in which they work (such as job descriptions, photos or videos of work tasks), will assist them in managing the case. If you have any information on suitable duties, please provide them either at referral or throughout the duration of the case.

How is this service different to our Occupational Health Service?

QBE Return+ does not aim to replace existing services, rather dovetail alongside them. Referrals into this service should be made as soon as possible after injury occurs, from a work-related accident. The case managers will arrange private treatment and provide assistance for employees with their return to work, by including work recommendations in their reports. The case managers can liaise with Occupational Health representatives where involved, to ensure all parties are aware of the recommendations.

Contact

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