



Under Workers' Compensation Health Initiative, N.Y. Union Health Center Helps Injured Garment Workers, But Claims Take Long to Be Decided

Evaluation of a model care system to reduce or prevent disability

SUMMARY

From 1996 to 2000, the [Union of Needletrades Industrial and Textile Employees](#) created a union-based health program to provide more timely access to medical treatment for garment and textile workers in New York.

Investigators at New School University Health Policy Research Center conducted a descriptive evaluation of the project. The evaluation also described the patient population, their work-related injuries and the impact of these injuries on income and their medical benefits.

The project was part of the Robert Wood Johnson Foundation (RWJF) *Workers' Compensation Health Initiative* national program.

Key Results and Evaluation Findings

- In 1996, the union implemented a union-based health program that allowed injured workers to receive care while their claims were still under review, either through the union health center or, for those with third-party insurance, through outside facilities, if necessary.
- The garment workers studied scored significantly lower than the general US population did on standardized scales of physical and mental health function.
- The garment workers experienced a dramatic loss of medical benefits after developing their work-related conditions.
- The garment workers experienced significant declines in their income after developing their work-related injuries.
- On average, it took between 682 and 725 days for the garment workers' claims to be decided by the state workers' compensation board.

- Garment workers reported more disability than did computer workers to whom they were compared.

Funding

RWJF supported this project through two grants totaling \$480,890—one to the union and another to the New School University.

THE PROBLEM

During the mid-1990s, researchers at the Mount Sinai Irving J. Selikoff Center for Occupational and Environmental Medicine evaluated the experience of 135 patients diagnosed with work-related carpal tunnel syndrome who filed for workers' compensation in New York between 1991 and 1994. The results showed that only 21 percent of these workers' compensation claims were initially accepted. The remaining 79 percent either had their claims challenged by the insurance carrier or received no response. Of those cases that had been ruled on by a workers' compensation judge at the time of the study, 96 percent were found in favor of the worker. However, it took an average of 429 days from the date the case was opened to when a judge ruled on it. Some cases took longer than 1,000 days to be decided. For many workers who have no other way to pay for care, this can lead to lengthy delays in receiving necessary medical treatment, and may contribute to the high costs and disability rates associated with work-related musculoskeletal disorders.

THE PROJECT

The first grant from RWJF through its Workers' Compensation Health Initiative national program funded the New York City-based Union of Needletrades Industrial and Textile Employees' Union to implement a demonstration program at its Health Center that was designed to provide more timely access to medical treatment for union members who file workers' compensation claims.

The two main objectives of the project were to: (1) provide and coordinate services, programs and care at the union health center for workers with pending compensation claims; and (2) establish a system that would allow workers who had group health insurance to go outside the union health center, while their claims were pending, for services unavailable at the center. Reimbursement for outside care would be settled once the compensation claims had been settled. Treatment for workers without third-party insurance would be limited to the union health center.

Project staff established a project management group—consisting of representatives of the union, the health center and other agencies and organizations—to provide guidance for the project. The group addressed issues concerning payment, reimbursement, billing

and tracking of services for care provided outside the union health center, while project staff established a system for collecting and organizing medical and legal data on claimants who were patients at the health center.

RESULTS

The union implemented the system in 1996. According to the project director, since 1999 approximately 1,000 injured workers each year have received medical treatment for workplace injuries through the center or its participating outside providers.

THE EVALUATION

The second grant funded researchers at the New School University Health Policy Research Center to evaluate the demonstration program. The evaluation was intended to describe the patient population, their work-related injuries and the impact of these injuries on income and their medical benefits. New School researchers developed surveys in English, Spanish and Chinese, and tested them with 26 health center patients. To gather data for the study, researchers surveyed two groups of union members:

- Sixty-three union members who had filed new workers' compensation claims for carpal tunnel syndrome and other upper extremity disorders from January 1998 to November 2000. The evaluation team surveyed this group soon after they filed their claims. Forty-one of these employees completed a follow-up interview at six months after the initial survey and 28 completed a follow-up interview at 12 months.
- Sixty union members who had filed claims for carpal tunnel syndrome and other upper extremity disorders between January 1996 and December 1997—before the program was put in place. The workers' compensation claims for this sample either were pending or had been settled by the time of the interview. The evaluation team interviewed this group one time only.

In a subsequent study, which was funded through the Mount Sinai Irving J. Selikoff Center, project co-director Robin Herbert, M.D., compared data from the garment workers with findings from a research project focused on a different labor group—computer users with work-related injuries who were treated at Mount Sinai. This allowed comparisons to be made between the experiences of two different groups of workers filing workers' compensation claims in New York State for similar illnesses.

The garment workers studied were primarily female, nonwhite, born outside the United States, in their mid-50s and had been working in the garment industry for 18 years. The computer users also were primarily female, but most were white, born in the United States, in their 40s, and had been working in their respective occupations for nine years. All of the study participants had multiple work-related diagnoses. Carpal tunnel syndrome was the top diagnosis for both the garment workers and the computer users.

Other common work-related conditions included forearm tendonitis, lateral epicondylitis (i.e., tennis elbow), neck tension and wrist/digit tendonitis.

Findings

The evaluation team reported the following findings from their descriptive evaluation to RWJF in November 2000:

- **The garment workers scored significantly lower than the general U.S. population on standardized scales of physical and mental health function.** This indicates that there were serious impairments in physical and mental health functioning among the garment workers due to their work-related musculoskeletal disorders.
- **The garment workers experienced a dramatic loss of medical benefits after developing their work-related conditions.** At baseline, 87 percent had medical insurance; 59 percent had it at the six-month follow-up; 48 percent had it at the 12-month follow-up.
- **The garment workers experienced significant declines in their income after developing their work-related injuries.** Before developing their conditions, 36 percent of the garment workers earned less than \$10,000 a year, and 62 percent had incomes between \$10,001 and \$20,000. After their injuries, 95 percent of the garment workers had incomes from \$0–\$10,000.
- **On average, it took between 682 and 725 days for the garment workers' claims to be decided by the state workers' compensation board.**

The findings from the subsequent study comparing the experience of injured garment workers and computer workers found:

- **Garment workers reported more disability than did the computer workers.**
 - **Whereas over 80 percent of the garment workers were not working at the beginning of the study, 78 percent of computer workers were working.** Many of the garment workers were either temporarily disabled (36%) or permanently disabled (33%) at follow-up, compared with just 14 percent of computer workers who were temporarily or permanently disabled.
 - **Like the garment workers, computer workers experienced a decline in their income after developing their condition, though the effect was not as extensive.** While none of the computer workers had incomes less than \$10,000 before developing their condition, 15 percent did afterward, compared to 95 percent of the garment workers.
 - **It took an average of 429 days for the computer workers' claims to be decided by the state workers' compensation board, compared with between 682 and 725 days for garment workers.**

Communications

Project staff published an article on the project in the American Journal of Industrial Medicine (1997) and made seven presentations. See the [Bibliography](#) for more details.

AFTERWARD

The needletrades union continues to provide the services developed under the RWJF grant. Although funding from RWJF has ended for the evaluation, project staff continues to conduct additional follow-up interviews of union members with funding from the New School Health Policy Research Center. Project staff members are preparing manuscripts on the study for publication.

In addition, the evaluation team received funding from the New York Committee for Occupational Safety and Health—a New York City-based nonprofit coalition of unions and workers, physicians, lawyers and other health and safety activists—to begin a pilot project to overcome barriers to workplace safety and health for low-wage immigrant women.

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