

Expert view

*An interview with Josephine Copeland,
senior vice president, product design and strategy, Sedgwick*

edge:

Before we dive in, tell us a bit about this new role with Sedgwick's managed care division... and why you were the right person to fill it!

Jo:

Sedgwick's leaders are always looking toward the future — as any innovative organization must — and always considering how to best drive the most optimal outcomes, both for clients and for ill or injured employees. Sedgwick's innovation and leadership were a big part of my decision to come on board; I wanted to be surrounded by industry thought leaders in technology, innovation, cost containment.

I knew when I joined Sedgwick's managed care leadership team, I'd be diving right in to find new opportunities to provide our clients with the tools they need to get their employees back to health and work, as safely and as quickly as possible.

And just as importantly, our values aligned: When Sedgwick says, "taking care of people is at the heart of everything we do," they mean it.

edge:

What will you be focusing on as you look to find those new opportunities?

Jo:

Everything my team is driving toward falls under one of two tasks: improving user experience, whether that user is an ill or injured employee, customer or claim examiner; and lowering the cost of risk.

When it comes to user experience, my top priority has been — and will continue to be — introducing new concepts into workers' compensation, including those that already exist outside the industry. People are not at their best when they're injured; they deserve to get the best from us. Care is a journey, and humanizing workers' compensation is a good thing.

An imperative. We have to be thinking about all the factors – age, geography, culture, severity – that go into assigning a case manager, and asking how we can conform case management to the injured worker, delivering solutions that are patient-centric and personalized. When injured employees trust their case managers, their engagement in their own recovery and return to work is measurably enhanced.

There are lots of participants in the healthcare ecosystem, and all have different experiences with us. We need to consider each and every one of those

people – from the injured employee and medical provider to the risk manager – keeping in mind their individual experiences and critical goals.

I'm always asking, "What if we did *this*?" If we're asking ourselves that while we consider both user experience and cost of risk, we'll find that's the real marriage of innovation and strategy. The challenge is to become comfortable with examining what may seem too crazy or out of reach...embrace opportunities for bold change.

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edge:

When it comes to that marriage of innovation and strategy, how do you see those two processes complementing one another?

Jo:

I actually think there's a real benefit in separating the two. Everyone has to be able to participate and contribute in their own ways to make a marriage work, right? Operations has a certain rhythm to it. You can't afford constant interruptions. Strategy, on the other hand, doesn't necessarily move to any particular beat. It's go/stop/now go faster/now slow down. The pattern is iterative and responsive to new findings over time.

Those are two very different mindsets and it's unfair to ask them to conform to one way of doing things. It's unfair to ask your operations team to maintain that rhythm, stay in the moment, but also look into the future. You need strategic resources who can collaborate with operations, look for areas ripe for improvement and marry that with what's happening in the industry to ensure our services continue to be highly competitive, while looking to the horizon for new solutions and setting the organization up for meaningful evolution. That's where I come in.

edge:

And what do you see as key initiatives for your team, as far as new solutions on the horizon?

Jo:

First, we're looking at ways technology can help shorten the timeframe between service referral and actual service delivery. Getting injured workers the care they need as quickly as possible places them on the road to recovery faster and helps to reduce lost time days.

Secondly, we're following Medicare's push for 100% value-based provider contracting by 2025 so we consider and are prepared for any impact to workers' compensation in the future.

And we're also working on something that builds upon our existing decision optimization model – we believe it will revolutionize case management and I'm excited to share more about that in the near future.

I'm a firm believer that if we continue talking about the need, the solution will follow. The question is always: How do we most effectively drive change?

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What needs are you seeing in the market that we should be paying attention to?

Jo:

Right now, for example, workers' compensation has not yet fully embraced what can be accomplished through digital healthcare. We talk about telemedicine, certain wearables, but in workers' comp we tend to think of disparate solutions for specific problems, rather than thinking about addressing overarching recovery needs and lowering the total cost

of risk. If we think of an open wound example, where a patient is bedridden and wound management is so critical: What if his mattress could track and report back on his movement? We'd have better insight into when he's feeling pain, ensuring his home healthcare worker is doing what they should, etc. Monitoring may seem small, but it's critical; there are just so many places recovery can go off the rails.

Also, and unfortunately, so much data today just isn't digestible; it's used to get to predictors. But it needs to be about more than just getting or having the data — it's what we do with the information it provides us that makes all the difference. That's why we're focused on decision optimization, not just predictive analytics. There's so much more we can be doing on the healthcare side, like helping us see where we can help our nurses — whom we rely so heavily upon — optimize their skills.

edge:
Any industry trends you're particularly tuned into right now?

Jo:
In the midst of the pandemic, we've seen a tremendous rise in attention being paid to mental health. I'm concerned that as we start to swing back to work and back to the office — back to "normal" — we should not dismiss the lessons we've learned about trauma, resilience and mindfulness. I hope the industry can incorporate these lessons into creating an environment that is COVID-safe, but more broadly, an environment that supports employees as they look to create balance in their lives.

We were just getting to understand how much mental health impacts recovery. I know our behavioral health team will continue to highlight that correlation and continue to work hard to make sure employers understand the significance and importance of understanding and honoring their workers' mental health and life balance. In that same vein, I'm curious to see how claims might look different as people work

differently — injuries in a remote work environment will just naturally be different from those on site. And that will obviously change how we prepare for them. We have approximately 18 months of retrospective claim data that is most likely driven in part by a remote workforce. This can be a baseline for examining and planning for the "new normal" workplaces.

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You've served on several panels focused on diversity and inclusion, like at the *Business Insurance Women to Watch Diversity & Inclusion event* and *National Workers' Compensation & Disability Conference*. Can you tell us a bit about what those programs mean to you, and how you see them affecting the industry?

Jo:
For women and people of color in our industry — like in so many — there's a funnel, but it's upside down: lots of diversity at the bottom, then less and less as you move up. Representation is so important. It's a message that, thankfully, we're hearing more and more recently, but we need to keep pushing it forward. People need to see themselves in certain spaces to understand and believe those places —

whatever, wherever they are — are for them. Even in the talent gap we're experiencing right now, there are fewer people of color, fewer women.

We have a tremendous opportunity to show women and people of color that this is a powerful industry, one where you can make significant, meaningful contributions. At the end of the day, diversity is about different perspectives,

and the more we have the better. Injured employees are better off when more people are bringing their perspectives to the table. Organizations and leaders are better off, too, when they surround themselves with the people who can bring in what they don't have themselves. Beyond race or gender, it's our filters and experiences that are so important.

JOSEPHINE COPELAND

As senior vice president of product design and strategy for Sedgwick's managed care division, Jo leads the group's efforts to develop innovative, state-of-the-art managed care and medical cost containment solutions that drive optimal outcomes for clients and claimants. With more than 20 years in the industry, her comprehensive management background includes experience in workers' compensation, auto and group health PPO networks, medical bill review and managed care organizations.

She was recently recognized as a *Business Insurance Women to Watch* honoree and has served on panels at the *BI Women to Watch Diversity & Inclusion event* and *National Workers' Compensation & Disability Conference*.