

Workers' comp division OKs guidelines to help injured give up smoking

By Ed Sealoer
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Colorado workers now can tell insurance companies to cover smoking-cessation programs if their doctors say that would help them recover more quickly from job-related injuries.

The medical treatment guideline changes, which the Division of Workers' Compensation (DWC) phased in this year, came about after DWC officials read numerous studies saying that stopping smoking helps workers to heal more quickly from certain procedures.

The Workers' Compensation Coalition, a Denver-based organization of businesses concerned about the insurance issue, also lobbied the DWC to enact the proposed changes.

The changes technically aren't mandates. But because insurers as well as medical professionals sit on the task forces that recommended and passed the guidelines, DWC officials haven't encountered opposition from insurers.

"Science shows that with the cessation of smoking ... in the case of injury, people recover more quickly and are able to get back to the daily activities of the workforce," said **John Berry**, president of the Workers' Compensation Coalition. "The small costs of the drugs are offset by the quicker return to work that the worker has. We're not trying to propose something that will increase costs to business."

The smoking-cessation change is likely to affect industries such as construction, where smoking and injuries are more common, Berry said. It may be able to save companies money by providing one more way for employees to heal and get back on the job, he said.

"It's really a cost/benefit-driven proposal," Berry said.

The DWC's medical treatment guidelines, which have been in place since 1991, cover 10 categories of work-related injuries and their treatments that should be covered, from lower-back pain to chronic pain to traumatic brain injuries.

Using evidence-based medicine, DWC officials periodically update the treatment recommendations to include new therapies that can help workers recover more quickly.

The guidelines have covered smoking cessation in the case of spinal fusion surgery for nearly 10 years. But in recent years, DWC officials have read studies in medical journals linking quitting smoking to healing — especially for broken bones. Cigarette smoke contains carbon monoxide, which reduces the amount of oxygen — essential to healing — to the brain and other vital organs.

In recent months, DWC officials recommended smoking cessation to cover more lower-back injuries, shoulder-injury treatments and treatment for lower extremity injuries, said **Daniel Sung**, supervisor of the division's medical policy unit. And they've added less forceful language that encourages the coverage of smoking cessation to help with soft-tissue injuries because there's less evidence that it helps healing in that category.

"It's a really big deal in terms of improved outcomes and reductions of complications following surgery," Sung said. "You as a patient and injured worker should not be surprised if a surgeon comes to you and says, 'I really need you to quit smoking.'"

But it's costly. The drugs can run from \$200 to \$350 per person, and counseling can add another \$140 to the bill, according to an April study from [Penn State University](#) in University Park, Pa.

But that same study, cited by Berry in his appeal to DWC, argued that by reducing medical costs associated with smoking-related diseases and increasing worker productivity, the state could lose the tax revenues from cigarette sales and still save \$19.25 per pack of cigarettes. And it said that the ratio of benefits to cost on smoking-cessation programs varies from 82 cents to \$2.66 saved per dollar spent, depending on the type of treatment.

In another area, the DWC just added to the guidelines a causation table to help employers determine whether repetitive-stress injuries, such as carpal tunnel syndrome, were caused in the workplace, said **Paul Tauriello**, acting division director.