



Work Loss Data Institute

“The Evidence Based Guideline Company”

www.worklossdata.com

Thirteen unique and major advantages of ODG

1. ODG is unique in taking evidence-based guidelines to their logical end point; the conclusions are linked directly to the evidence in the studies and references. ODG Treatment is based on a comprehensive and ongoing medical literature review with preference given to high-quality systematic reviews, meta-analyses and clinical trials. Each recommendation is linked to the supporting medical evidence, provided in abstract form, which has been ranked, highlighted and indexed. Full text copies of these studies are used by physician editors in formulating recommendations and are available on request. The ODG return-to-work guidelines are based on an aggregate of over 10 million cases from CDC, OSHA, and actual workers’ compensation claims. For details on methodology, see www.odg-disability.com/methodology_outline.pdf. Accountability and transparency are the hallmarks of the ODG development process.
2. ODG is comprehensive. The treatment guidelines cover conditions that represent over 99% of workers’ compensation costs, and the Procedure Summaries cover virtually every treatment or procedure that may be performed for those conditions, along with links to the scientific evidence. Treatment guidelines that are clear and comprehensive can minimize uncertainty and unnecessary disputes between medical providers and managed care entities, and ensure that injured workers get early access to care. Because ODG Treatment is comprehensive, it does not need to be supplemented with other guidelines to cover missing treatments. The return-to-work guidelines cover every reportable condition, all 10,000 ICD9 diagnosis codes.
3. ODG is continuously updated reflecting the findings of new studies as they are conducted and released; subscribers are always up to date. ODG undergoes a comprehensive annual update process based on scientific medical literature review, survey data analysis and expert panel validation. In addition, as new studies are released, the Web version is updated throughout the year to reflect these new studies.
4. ODG is independent of any medical specialty group and multidisciplinary in scope, and represents all medical specialties, and not just occupational medicine doctors, orthopaedic surgeons, chiropractors, physical therapists, etc. ODG has realized considerable provider acceptance (including adoption by 16 states and provinces – more than any other guideline) because ODG is evidence based, and recommendations are linked directly to the most up to date studies; the results of that research are reflected in the constant updating of the guidelines. These studies are focused on one outcome: What is best for the injured worker. Unlike medical specialty society guidelines, ODG does not represent the interests of any one provider-group over other providers.
5. WLDI is in the guideline business, focused on researching and publishing evidence based medical guidelines. WLDI does not rely solely on volunteer contributors, as do many medical specialty guidelines. In addition to an extensive internal editorial staff, WLDI retains doctors who are leaders in their fields to act as chapter leads on a compensated basis. Unlike volunteers who may have other priorities, these WLDI editors are incentivized to focus their efforts on one objective: creating the highest quality guideline.
6. ODG provides integrated guidelines, with both medical treatment guidelines and return-to-work guidelines (also known as lost time guidelines or disability duration guidelines).

Treatment and duration guidelines must work together to be effective (timeframes for duration correspond precisely to treatment pathways).

7. ODG is designed to be used for utilization review (UR) as well as clinical practice, unlike other treatment guidelines, which may recommend the same treatment for every patient (sometimes referred to as "cookbook" medicine), and unlike nursing textbooks that lack any basis for UR. ODG seeks clarity and lack of ambiguity in recommendations, and ODG allows the ability to copy & paste, saving time and effort in documenting approvals or denials of treatment. Entries in the Procedure Summaries always start with the words, "Recommended," "Not recommended," or "Under study."
8. ODG is available in a Web-based version, which users can access from any location with an Internet connection, while the raw experience data from ODG is also available to clients in tabular format to compare with internal claims data.
9. ODG can be integrated into claims management systems. The ODG ICD9-CPT[®] Crosswalk UR Advisor file contains every possible combination of ICD9 diagnosis code and CPT procedure code seen in workers' comp. For each ICD9-CPT combination, it provides information on frequency as well as number of visits, plus recommendations from ODG. The file also provides a "Bill Review Payment Flag" which is Green, Yellow, Red, or Black, for use in automating claims management decision-making.
10. Training in ODG is readily available. Online training demos are provided by WLDI account executives at no charge to users, and a Help Desk is available via toll-free telephone line as well as email. In addition, the American Academy of Disability Evaluating Physicians (AADEP) offers continuing education courses on the use of ODG. There is also a self-paced CD-ROM training option available.
11. ODG has met the stringent criteria of the Federal Agency for Healthcare Research & Quality (AHRQ), and has been accepted for inclusion in the National Guidelines Clearinghouse (NGC), located at www.guidelines.gov. To be included a clinical practice guideline must provide corroborating documentation that a systematic literature search and review of existing scientific evidence published in peer reviewed journals was performed during the guideline development, and documented evidence can be produced that the guideline is up-to-date.
12. ODG is cost effective for all types of users, and in states that have adopted ODG, users within those states can purchase the guidelines at a 50% discount, bringing the cost down to \$162.50. There are also substantial discounts available to organizations with quantity users. In addition, because ODG has been accepted by AHRQ for inclusion in the National Guidelines Clearinghouse, summaries of the guidelines are available at no charge on www.guidelines.gov, and these summaries may be all some users need, including providers doing a limited amount of workers' comp, as well as small employers and even some injured workers. The goal is for the guidelines to be a communication tool so that all parties are on the same page when it comes to expectations for treatment and return to work. For guidelines to be successful, they need to facilitate early access to appropriate care for the injured worker, when all providers know up-front that they will get paid if they follow the guidelines.
13. ODG has been proven. The 2007 edition of *Official Disability Guidelines* is the 12th annual edition of these leading return-to-work guidelines, and the 2007 edition of *ODG Treatment* is the 5th annual edition of those leading treatment guidelines. While other publishers may promise better guidelines in the future, ODG keeps delivering. And studies have shown that outcomes are significantly improved through use of ODG. In fact, one study showed that after adoption of ODG, medical costs were reduced by 64% and lost work days were reduced by 69%, while at the same time injured workers got earlier access to appropriate care and doctors praised the program.