

Brooke D'Angelo Testimony

NYS Senate Worker's Compensation Hearing

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The loss of humanity and lack of personal connection are the top and most important failures of the workers' Compensation system. Every single additional failure is subsequent to this.

When I was initially injured, I found out that there is an immediate stigma attached to having a workers' compensation claim. You have to constantly prove your injury, and advocate for yourself. You have to go through examinations that are often humiliating, while automatically being looked at as someone who wants an extended vacation, or is just seeking pain medication.

I also learned that my word and ability to communicate isn't enough. I had to get an attorney. Immediately. Nothing seems to get approved without the backup of an attorney. The system is designed to make it so the injured worker doesn't understand the steps, formularies, request procedures, and form titles.

Because of the combination of my injuries, I had the need for an abdominal surgeon, GI specialist, pain management doctor, and a spine surgeon. First, I made calls to those I knew and trusted and who were highly recommended. I think that 2 of 30 physicians that I called accepted Workers' Compensation.

There are so few specialists in Western New York who accept Workers' comp patients. Their reasoning- too much paperwork, not worth the trouble, time wasted, frustration, and too little payment. It's just not worth it to them or the company they work for.

Those who do accept WC are overwhelmed. Cannot give personal attention. Their staff members are constantly chasing the denials and fulfilling requests to escalate to the next level.

Patients are afraid. They finally get in to a doctor they often feel "stuck" with and don't speak up for their health anymore. They are in fear of being discharged, therefore having no other doctor to turn to. Patients don't get quality-of-life-saving procedures and surgeries on time, or at all.

I have been unable to see a GI specialist for my abdominal injury. There are NONE who accept Workers' compensation within a 5-hour drive of me.

I have to cautiously advocate for myself with my doctors, afraid that I'll be considered an annoyance to the staff and be pushed to the bottom of the pile, or even discharged.

I learned that no matter how dire, there is no such thing as instant approval.

For a CT scan request through Workers' comp., the doctor fills out forms, makes the request to the carrier, the carrier and attorney may have to confer. The carrier may take days to approve or

deny. The doctor may have to have the treatment request moved up to a level 2, or 3, or- if denied again, your attorney will request a hearing. I know that when my attorneys have requested hearings on my behalf, the response is obnoxiously slow. That hearing gets scheduled through the Comp. Board. And that scheduling system seems to be backed up, unless you are the carrier, who is guaranteed a hearing within 21 days of request. In the meantime, I'm in communication with my only lifeline- my attorney's office. And attorneys cannot even communicate to the doctors directly!

Often weeks later, or longer, the CT scan may get approved. Only to await a call from a 3rd party scheduler. A company you never heard of, which the carrier contracts to make your appointments for your scans. That's always a tedious back and forth game too. By the time you do get your scan, you feel defeated and lose so much hope.

In May of 2022, I had a spinal cord stimulator implant. The pain was excruciating. It felt like a hot-axe was sticking out of my back. The ripping, searing, breathtaking pain was barely suppressed.

I was being released after a day and a half, and the surgeon told me he sent the post-op pain medication script to the workers' comp portal. To my surprise, there was no approved pain medication at the pharmacy when my husband went to pick it up. I called my attorney and they had no luck reaching out to my adjuster. I had no post operative pain medication! I remember being in so much pain, screaming in my living room, and attempting to control the bursts of tears. The excessive movement of crying, was making the pain worse.

When my attorney reached my adjuster on Monday, they found that the medication had been DENIED. The doctor resubmitted it to the next level. Two days later, after the adjuster approved it, it had to go through the third-party medication release company. What? Why does this exist? Who are these companies? Why do we need them in the mix?

Still, more back and forth occurred. A huge game between my attorney, the adjuster, me, the doctor, and the third-party company lasted a week. ONE WEEK post-op is when the pain medication was approved.

The trauma I endured and the PTSD are going to be life-long battles. Living in fear of losing your workers' comp. payments; dealing with private investigators; not getting approved for treatments and medications; anxiety, depression, impact on relationships, dependency on partner, humiliation, and hopelessness- the list goes on.

This has been a hard task today. There is never a shortage of tears when you don't feel like you have control of your health. It wasn't supposed to be this way for me. I'm educated. I have potential. I have ambition. I never sat still. I volunteered. I used to make a difference in the world. Not anymore. Delays and lack of doctors have contributed to me now being disabled.

Now I spend my days in pain. Not able to afford any luxuries, such as dinner at my favorite restaurants, or ever having a vacation. Sad. Thinking of who I could have been.

If we made it simpler for a doctor to treat a WC patient, then we'd have more participating physicians. If we had more choices of WC doctors, then patients could get treated in a timely manner. If injured workers could get treated promptly, then they could focus on healing and returning to normalcy (and work!).

I know that I have not endured the worst of it. Bring up "workers' compensation" in any room in Western New York, and just be prepared for the shocking stories to follow.