APPLICATION 3: BACK INJURIES

1. **What cost relief does an employer receive on a claim for a single back injury?**

   **Date of accident on or after August 1, 1994**

   WCB does not provide cost relief to claims resulting from a direct injury to an otherwise healthy spine.

   For back injuries occurring on or after August 1, 1994, cost relief will be considered if medical evidence indicates that the compensable accident has aggravated a pre-existing condition and causes a prolonged period of disability.

   For accidents on or after September 1, 2018, if cost relief is granted, WCB will relieve claim costs exceeding eight times the worker’s weekly compensation rate. The dollar value will not be the same for all workers as the amount is dependent on the worker’s individual earnings.

   For accidents on or before August 31, 2018, claim costs exceeding the dollar value of eight times the weekly maximum compensation rate [based on maximum compensable earnings under s.56(4) of the former WCA] in effect at the date of accident are relieved. The dollar value is the same for all workers, regardless of the worker's individual earnings (See Addendum A for the dollar value).

   **Date of accident prior to August 1, 1994**

   For back injuries (other than a direct injury to the spine) occurring prior to August 1, 1994, with over eight weeks of disablement, WCB will presume that a pre-existing condition is likely a contributing factor. Claim costs in excess of the amount specified in Addendum A are relieved from the accident employer's account.
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2. **What is the provision for cost relief on a back injury claim with other injuries?**

   When a worker with a pre-existing back condition has a compensable accident which results in multiple injuries, including a back injury, WCB will consider cost relief when all of the following conditions are met:

   - the resultant claim costs exceed the amount specified in Addendum A
   - the other compensable injuries (excluding the back injury) are not causing total disability
   - the compensable aggravation of the pre-existing condition is the only reason for the prolonged disability

   If the claim meets the above conditions, cost relief applies from the day after the date the worker ceases to be totally disabled from the other compensable injuries.

3. **What is the criteria for cost relief on a back injury that occurred on or after August 1, 1994?**

   When determining cost relief for back injury claims with a date of accident on or after August 1, 1994, there are four questions that must be asked. Cost relief will only be given if the answer to all four of the following questions is “yes”:

   i) Is there evidence of a pre-existing condition?
   ii) Is there evidence that the injury aggravated the pre-existing condition?
   iii) Was the disability period prolonged due to the aggravation?
   iv) Has the total claim cost exceeded the dollar value of eight times the weekly amount specified in Addendum A?
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4. **How does WCB determine if there is pre-existing condition as specified in Question 3, above?**

Information about any underlying degenerative condition may be found in medical reports from prior back injury claims, radiology reports, Alberta Health Care records, employer's or worker's report of accident, etc.

If there are differing opinions about the interpretation of imaging (including X-rays, MRI, CT scans) a radiologist’s opinion usually takes precedence over that of other professionals.

The presence of a pre-existing condition does not necessarily mean that cost relief will be granted. Some pre-existing conditions are significant, while others are incidental and may not affect the period of disability resulting from the compensable injury. The following are examples of significant and incidental pre-existing conditions:

**Significant Conditions**
- Spondylolisthesis and retrolisthesis
- Degenerative disc disease
- Degenerative facet joint disease
- Pre-existing compression fractures
- Inflammatory arthropathies

**Incidental Conditions**
- Minor osteophytes
- Minor congenital abnormalities (e.g., spina bifida occulta)

The above list is not intended to be all-inclusive.
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5. **How does WCB determine if the compensable back injury has aggravated the underlying condition?**

To determine if a compensable injury has aggravated a pre-existing condition, WCB will obtain a medical opinion, taking into consideration:

- the mechanism of injury (how the injury occurred; e.g., twisting, lifting heavy objects)
- the extent or severity of the underlying condition
- the degree to which the injury may have affected the condition

In all cases where a pre-existing condition is present, WCB must also determine if the compensable injury has aggravated the condition and prolonged the period of disability. Even significant pre-existing conditions identified by imaging may not have been aggravated by a trivial injury and, in such cases, cost relief is not applicable.

When the pre-existing condition is not aggravated, but the period of disability is longer than normally expected for the compensable injury, WCB will review the claim to determine if the ongoing disability is related to the compensable injury.

6. **Are there any exceptions to this policy?**

Yes, some employers are not eligible for cost relief for back injuries. See Application 1, Question 1 and Policy 07-02, Part II, Application 7, Industry Custom Pricing (ICP).

7. **When is this policy application effective?**

This policy application (Application 3 – Back Injuries) is effective September 1, 2018, except when noted otherwise in a specific policy section(s).
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Previous versions

- Policy 0502 Part II - April 2018
- Policy 0502 Part II - August 2015
- Policy 0502 Part II - December 2010
- Policy 0502 Part II - January 2004
- Policy 0502 Part II - January 2003
- Policy 0502 Part II - January 2002
- Policy 0502 Part II - December 2000
- Policy 0502 Part II - January 2000
- Policy 0502 Part II - June 1999
- Policy 0502 Part II (consolidated manual 1st Issue) - February 1997