A Utility Company Cuts Injury Costs by 51% and Lowers EMR with Tele-Triage

How a proactive injury response model reduced costs, improved compliance, and transformed workforce trust.

51%

Reduction in Injury Management Costs

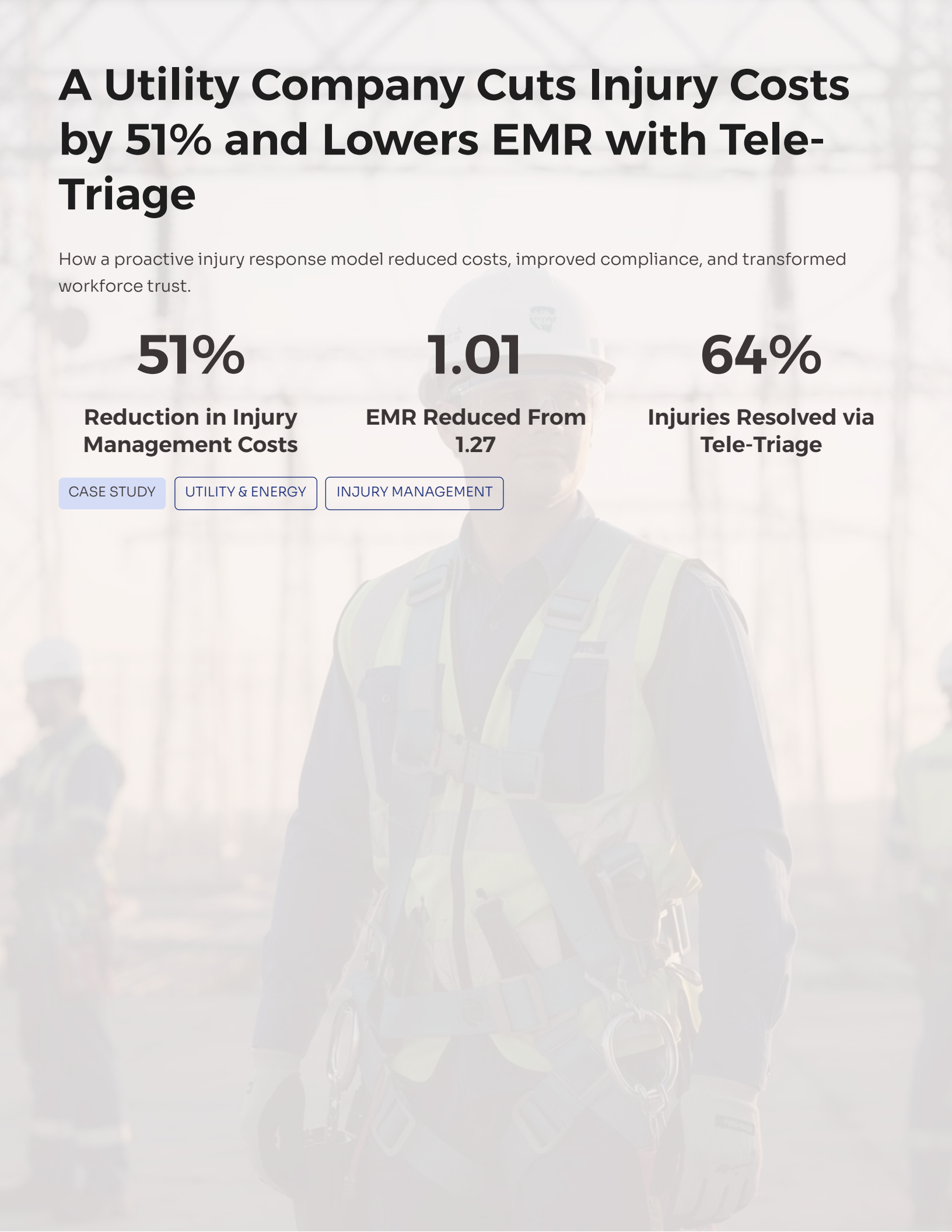
1.01

EMR Reduced From 1.27

64%

Injuries Resolved via Tele-Triage

CASE STUDY | UTILITY & ENERGY | INJURY MANAGEMENT



Executive Summary

A national utility services company was experiencing rising injury-related costs and declining safety performance, driven by an increasing Experience Modification Rate (EMR). Over five years, their EMR climbed to **1.27**, limiting their ability to compete for certain contracts and increasing workers' compensation costs across their entire portfolio of operations.

Their injury response model relied heavily on sending employees to emergency rooms for evaluation, even for minor incidents that could have been managed onsite with proper clinical guidance. This reactive approach created a cascading set of consequences that compounded over time and eroded both safety performance and financial outcomes.

The results of this reactive model were significant and measurable. The company faced increased OSHA recordables, higher workers' compensation claims, unnecessary downtime for injured employees, and escalating operational costs that showed no sign of reversing without deliberate intervention.

Examinetics implemented a Tele-Triage-based injury management program that fundamentally changed how injuries were evaluated and managed across all field operations. The program addressed the root cause of the problem, the initial injury response decision, and delivered measurable improvements across every key performance indicator within the first year of implementation.

Key Challenges

- EMR rising over five consecutive years
- Reactive ER-first injury response model
- Excessive OSHA recordable classifications
- Rising workers' compensation costs
- Operational disruption from minor injuries

Operational Background

The company operates in **remote, high-risk utility environments**, where immediate access to occupational care is limited by geography and infrastructure. Field crews routinely work at sites far from traditional medical facilities, making timely, appropriate injury evaluation a persistent operational challenge. When injuries occurred, regardless of severity, employees were routinely sent offsite for evaluation, often to the nearest emergency room or urgent care clinic.

Operational Inefficiencies Created

- Significant travel time to clinics or emergency rooms, pulling workers and supervisors off active job sites
- Delayed care decisions resulting from lack of standardized triage protocols at the point of injury
- Inconsistent injury evaluation processes across different field teams and project locations
- Over-classification of recordable injuries due to the absence of real-time clinical guidance

The Core Problem

Without a standardized injury management strategy, safety outcomes and costs continued to worsen year over year. The absence of a consistent, clinically guided first-response process meant that even minor injuries were escalated to the same level of response as serious ones, driving recordables, claims, and costs far beyond what the underlying injury severity warranted.

Field supervisors lacked a clear, repeatable protocol for making injury response decisions in the moment. This left individual judgment as the primary decision-making tool, an approach that produced inconsistent results and introduced significant liability and compliance risk across the organization's distributed workforce.

The Challenge

The organization faced a compounding set of operational and financial risks that, left unaddressed, threatened both its competitiveness and its workforce safety culture. The challenges were interconnected, each one reinforcing the others and making individual point solutions insufficient to reverse the trend.

Competitive Exposure

- EMR steadily increasing over five years
- EMR peaking at **1.27**
- Loss of eligibility for certain project bids

Financial Pressure

- Increasing workers' compensation costs
- Excessive reliance on emergency room visits
- Growing administrative and claims overhead

Compliance Risk

- High frequency of OSHA recordables
- Recordable cases triggered by minor injuries
- Inconsistent injury classification processes

Operational Disruption

- Unnecessary claims filings on minor incidents
- Avoidable medical treatment costs
- Workflow interruptions from offsite evaluations

Even minor injuries were triggering recordable cases, claims filings, unnecessary medical treatment, and operational disruption. The organization needed a way to **intervene earlier and manage injuries more effectively** at the point of occurrence.

Program Assessment

Examinetics conducted a detailed evaluation of the company's injury management practices before designing a solution. This diagnostic phase was essential to ensuring that the intervention would address root causes rather than surface symptoms. The assessment drew on historical data, operational observations, and stakeholder input to build a comprehensive picture of where and how the existing system was failing.

The evaluation included analyzing three years of loss run data to identify cost trends and claim patterns, identifying injury trends and cost drivers specific to the company's operational environment, and reviewing response protocols across all active job sites to understand how decisions were actually being made in the field.

The findings were clear and consistent: the **initial injury response decision** was the single largest driver of cost, recordables, and EMR escalation. The moment an employee was sent to an emergency room rather than evaluated onsite, a predictable chain of events followed, one that almost invariably resulted in a recordable case, a claim, and significant administrative burden.

This insight reframed the entire solution strategy. Rather than targeting downstream cost reduction through claims management or litigation support, the opportunity was to intervene at the earliest possible moment, at the point of injury, with real-time clinical guidance that could redirect care appropriately and prevent unnecessary escalation.

Assessment Methodology

01

Loss Run Analysis

Three years of claims and cost data reviewed for patterns and trends

02

Injury Trend Identification

Cost drivers and injury categories mapped to operational context

03

Protocol Review

On-site response processes evaluated across all field locations

04

Root Cause Isolation

Initial response decision identified as primary cost driver

> The opportunity was clear: implement a **standardized, real-time injury evaluation process** that intercepted the escalation chain before it began.

Solution: The Tele-Triage Program

Examinetics implemented a comprehensive injury management program centered around **Tele-Triage** — a real-time, clinician-led evaluation model that intercepts the injury response process at its most critical moment. The program was designed to be simple enough for field use while being clinically rigorous enough to meet OSHA standards and drive measurable outcomes.

Tele-Triage — Frontline Strategy

24/7/365 access to licensed clinicians who evaluate injuries in real time, directly from any job site. Clinicians guide the immediate response, determine appropriate care level, and document the encounter to support OSHA compliance and recordability decisions.

Supervisor Training

Clear, structured guidance on when and how to activate the Tele-Triage injury line. Supervisors were equipped with a simple decision framework that removed ambiguity from the injury response process and ensured consistent activation across all field teams.

Standardized Protocols

Consistent injury response processes were established and enforced across all field and project teams. This eliminated the variability that had previously driven inconsistent outcomes and ensured that every injury was evaluated using the same clinically validated criteria.

System Integration

Tele-Triage data was integrated into existing safety tracking systems, providing leadership with real-time visibility into injury trends, response patterns, and program utilization, enabling continuous improvement and proactive safety management.

Employees could now report an injury and speak with a medical professional immediately, from any job site, regardless of location or time of day. The program eliminated the geographic barrier that had previously made appropriate injury evaluation impossible in remote utility environments.

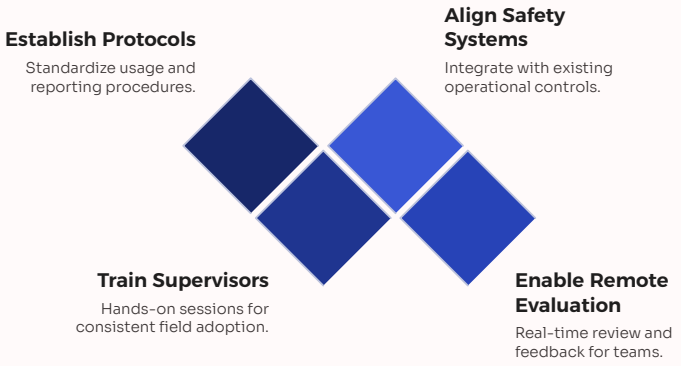
Implementation

The program was rolled out across all operations with a deliberate focus on usability, adoption, and consistency. Examinetics recognized that even the most well-designed clinical program would fail to deliver results if field teams did not understand how to use it or lacked confidence in the process. Implementation was therefore designed around the needs of frontline supervisors and field workers, not just the requirements of the safety management team.

Supervisor and field leader training was a foundational element of the rollout, ensuring that the individuals closest to injury events had the knowledge and tools to activate Tele-Triage immediately and consistently. Training was practical and scenario-based, reflecting the real conditions that field crews encounter in utility environments.

Clear usage protocols were established and distributed across all teams, providing a consistent reference point for injury response decisions regardless of project location or crew composition. These protocols were aligned with the company's existing safety management processes to minimize friction and accelerate adoption across the organization.

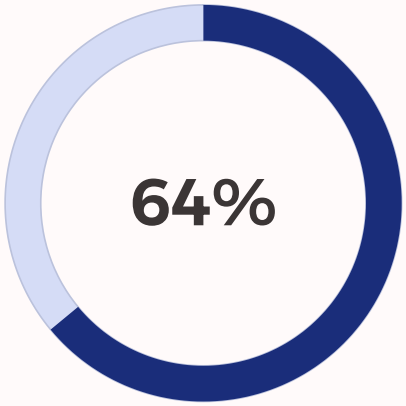
Rollout Key Steps



The phased rollout ensured that every injury was evaluated quickly, consistently, and appropriately from day one of program activation — delivering immediate value while building long-term organizational capability.

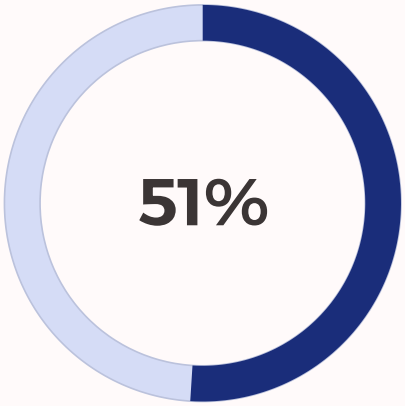
Results

The organization achieved significant, measurable improvements across every key performance area within the first year of program implementation. The results validated both the diagnosis and the solution — confirming that intervening at the point of injury with real-time clinical guidance was the most effective lever available for driving cost, compliance, and safety outcomes.



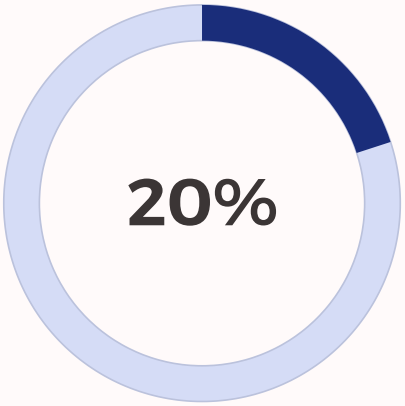
Resolved via Tele-Triage

Injuries previously resulting in ER visits now handled as OSHA-compliant first-aid cases onsite



Cost Reduction

Reduction in injury management costs including clinic invoices, claims filings, and administrative overhead



EMR Improvement

EMR dropped from 1.27 to 1.01, restoring bid eligibility and reducing premium costs

Elimination of Unnecessary Escalation

The 64% resolution rate through Tele-Triage represents a fundamental shift in how injuries were handled. Cases that previously triggered automatic ER referrals were now evaluated by licensed clinicians in real time, with the large majority appropriately classified as first-aid cases. This directly eliminated unnecessary recordables, claims filings, and the operational disruption that accompanied every offsite medical visit.

EMR Recovery and Competitive Restoration

The drop in EMR from 1.27 to 1.01 had immediate and tangible business consequences beyond the safety metrics themselves. The company restored eligibility for project bids that had been inaccessible at the higher EMR threshold, reduced workers' compensation premiums tied to the modifier, and lowered exposure during safety audits and prequalification reviews — outcomes that directly strengthened the organization's competitive position.

Employee satisfaction also improved significantly. Workers reported greater trust in the injury response process and valued the convenience of immediate, remote access to care — contributing to a stronger safety culture across the organization.

Strategic Impact

This transformation extended well beyond the direct cost savings visible in the injury management budget. By shifting the organization's injury response from a reactive, ER-first model to a proactive, clinician-guided system, Examinetics helped the company fundamentally reposition its relationship with safety, moving from a compliance cost center to a strategic operational capability.

Improved Data Visibility

Leadership gained real-time access to injury data, response patterns, and program utilization metrics — enabling proactive safety management and evidence-based decision-making for the first time.

Faster, More Consistent Response

Every injury was now evaluated using the same clinically validated process, regardless of location or crew. The variability that had previously driven inconsistent outcomes was eliminated across all operations.

Increased Workforce Confidence

Employees and supervisors gained confidence in the injury response system. Workers knew they would receive immediate, professional attention for any injury, a change that measurably improved safety culture and trust in leadership.

Reduced Operational Disruption

With 64% of injuries resolved through Tele-Triage, the frequency and duration of work stoppages related to injury response dropped substantially, returning productivity to operations while improving safety outcomes simultaneously.

Supervisors gained a **simple, repeatable process** for managing injuries in the field. Safety leaders gained **better insight into trends and performance** through integrated data reporting. And the organization as a whole shifted from a reactive model to a **proactive, controlled injury management strategy** that aligned safety performance with business objectives.

The Examinetics Advantage

This case demonstrates a principle that holds across utility, energy, and high-risk industrial environments: the **first decision after an injury occurs** determines the majority of the downstream cost, compliance, and outcome profile. Organizations that invest in controlling that first decision — with real-time clinical guidance, standardized protocols, and integrated data — achieve dramatically better results than those that manage injuries reactively after escalation has already occurred.

What Tele-Triage Enables

- Reduce unnecessary medical visits and emergency room referrals for minor injuries
- Lower recordable injury rates through appropriate, clinician-guided first-aid classification
- Control workers' compensation costs by intercepting claims before they are filed unnecessarily
- Improve employee experience with immediate access to professional care from any location
- Strengthen overall safety program performance with integrated data and reporting

About Examinetics

Examinetics helps organizations take control of injury management through proactive, technology-enabled solutions that reduce risk and improve outcomes across the employee health lifecycle.

From Tele-Triage and occupational health services to compliance and wellness programs, Examinetics delivers integrated solutions built for the realities of high-risk, distributed workforces in utility and energy environments.

> "The first decision after an injury occurs determines cost, compliance, and long-term outcomes. Examinetics puts clinically validated guidance at that decision point — every time, from anywhere."