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Assigned Risk Solutions



# The Aging Workforce

Medical Realities and Claims Strategies for a Changing Demographic

Marcos A Iglesias, MD



# Disclaimer



The information presented in this session is for educational and informational purposes only and should not be construed as medical, legal or claims management advice. While every effort has been made to ensure accuracy, medical guidelines, treatments and legal interpretations may vary and evolve over time.

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# Session Objectives



Understand how aging influences injury risk, recovery and claim outcomes

Review data on comorbidities and polypharmacy in older workers

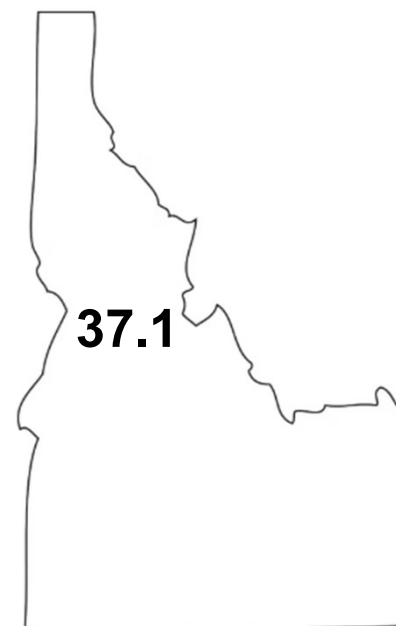
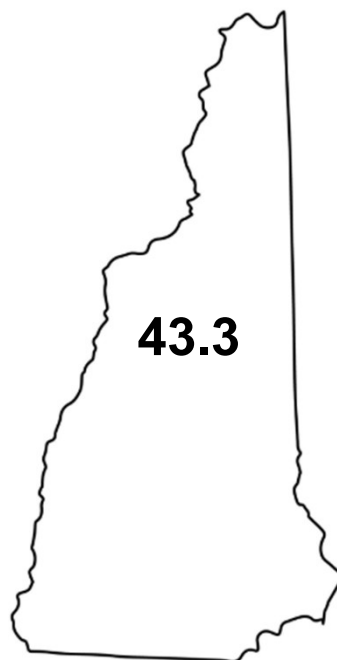
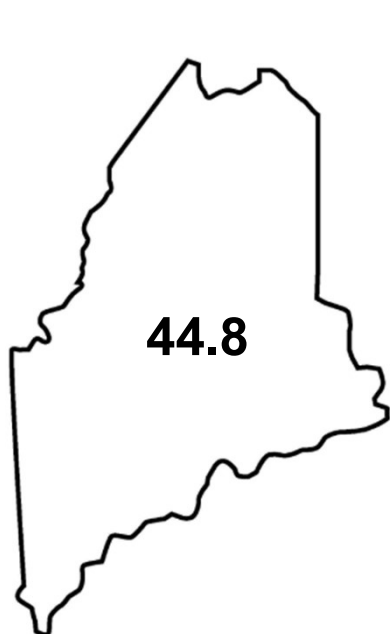
Discuss ergonomic, clinical and ADA strategies

Provide actionable case management tactics

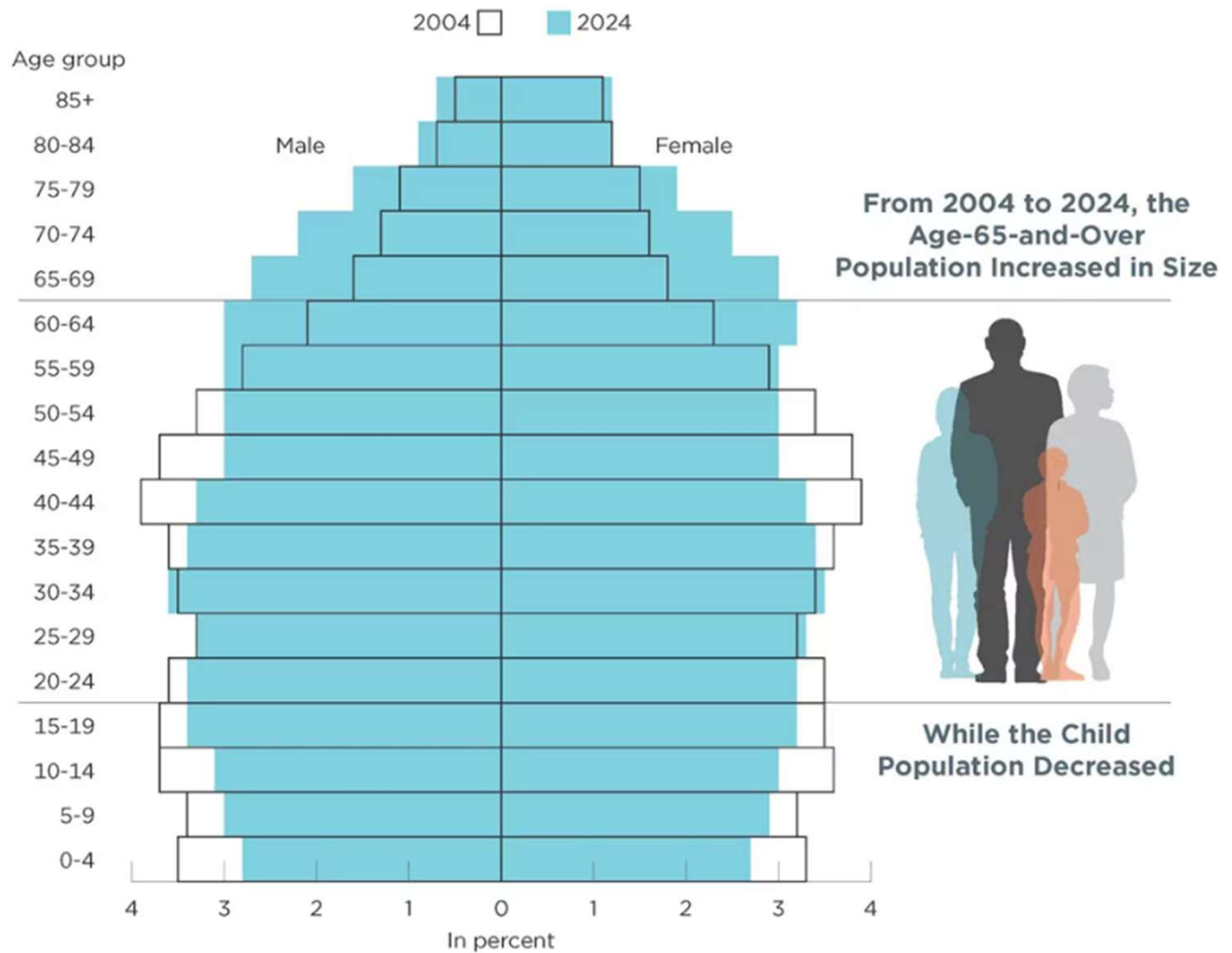
# We Are Getting Older



**39.1 years (median age in 2024)**

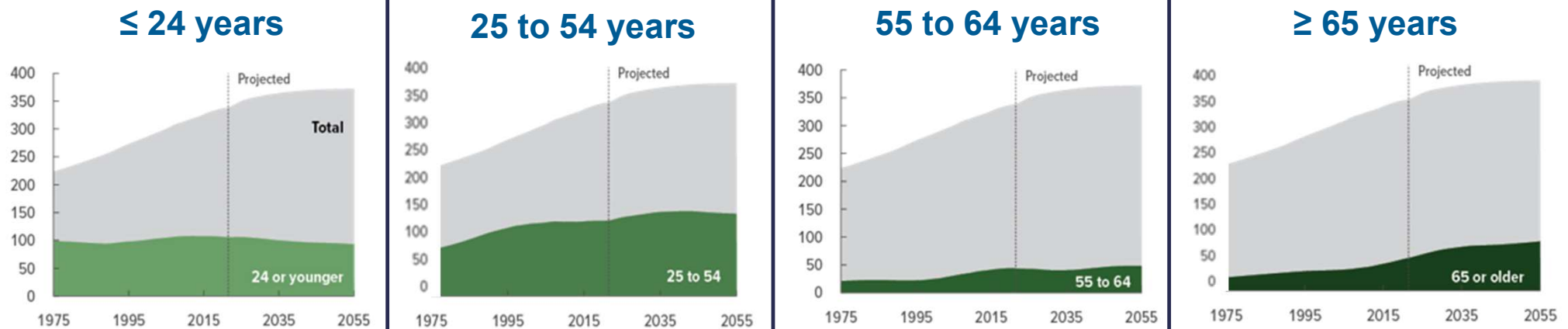


# Aging Population



United States Census Bureau, 2025.

# Population Size by Age Group (millions)





# The Aging Workforce in Context

- Median age of U.S. workers: 42 years (2016), continuing to rise
- By 2060, 25% of Americans will be 65 years or older
- Older workers often work longer due to financial and social reasons

# Chronic Conditions Increase with Age



- 75% of adults over 55 years have  $\geq 1$  chronic condition
- Over half have  $\geq 2$  chronic conditions
- **59%** of U.S. adults have  $\geq 1$  chronic condition; **42%** have  $\geq 2$

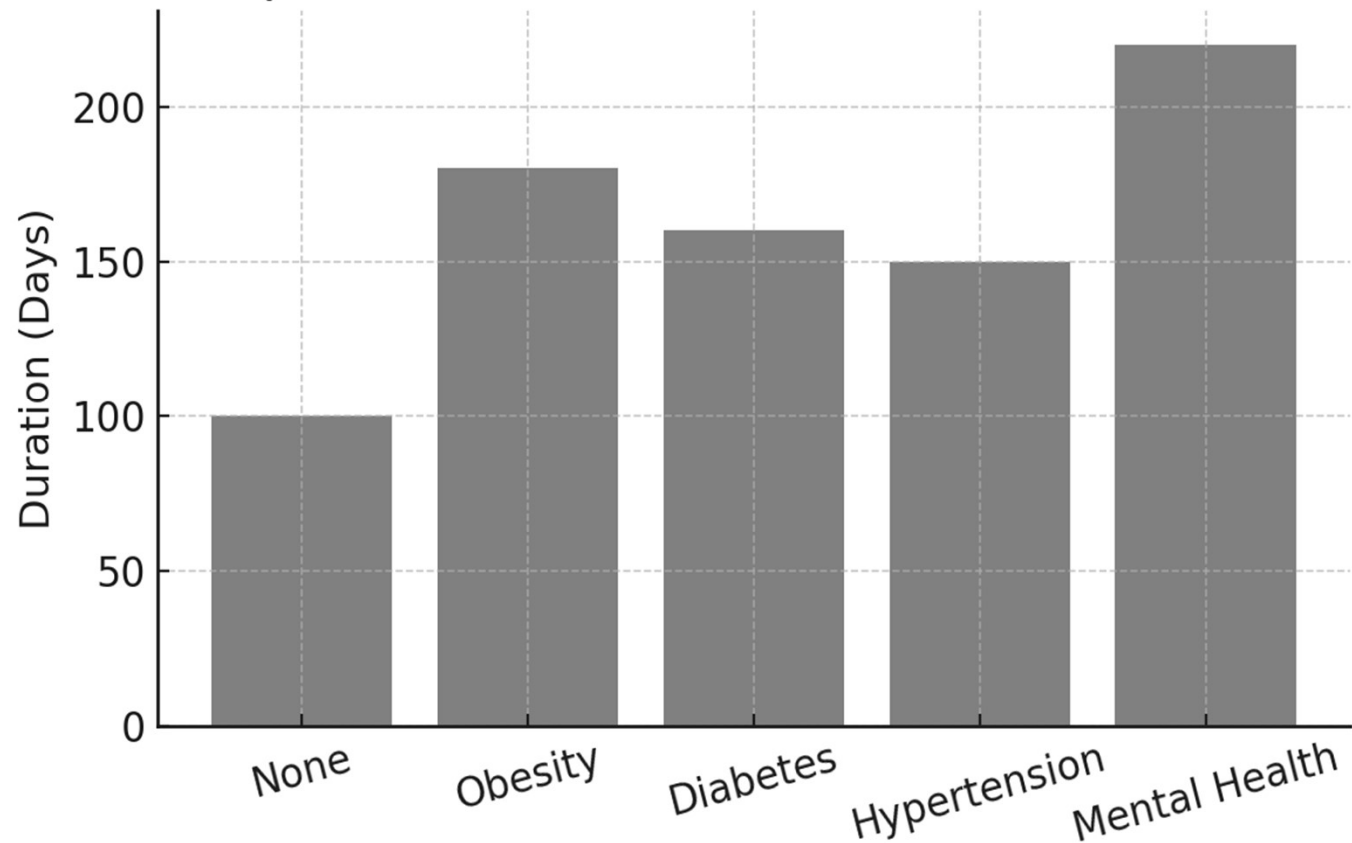


# Why Comorbidities Matter

- +76% disability duration
- +341% total costs
- +285% TTD days
- +147% litigation
- +123% surgery rates

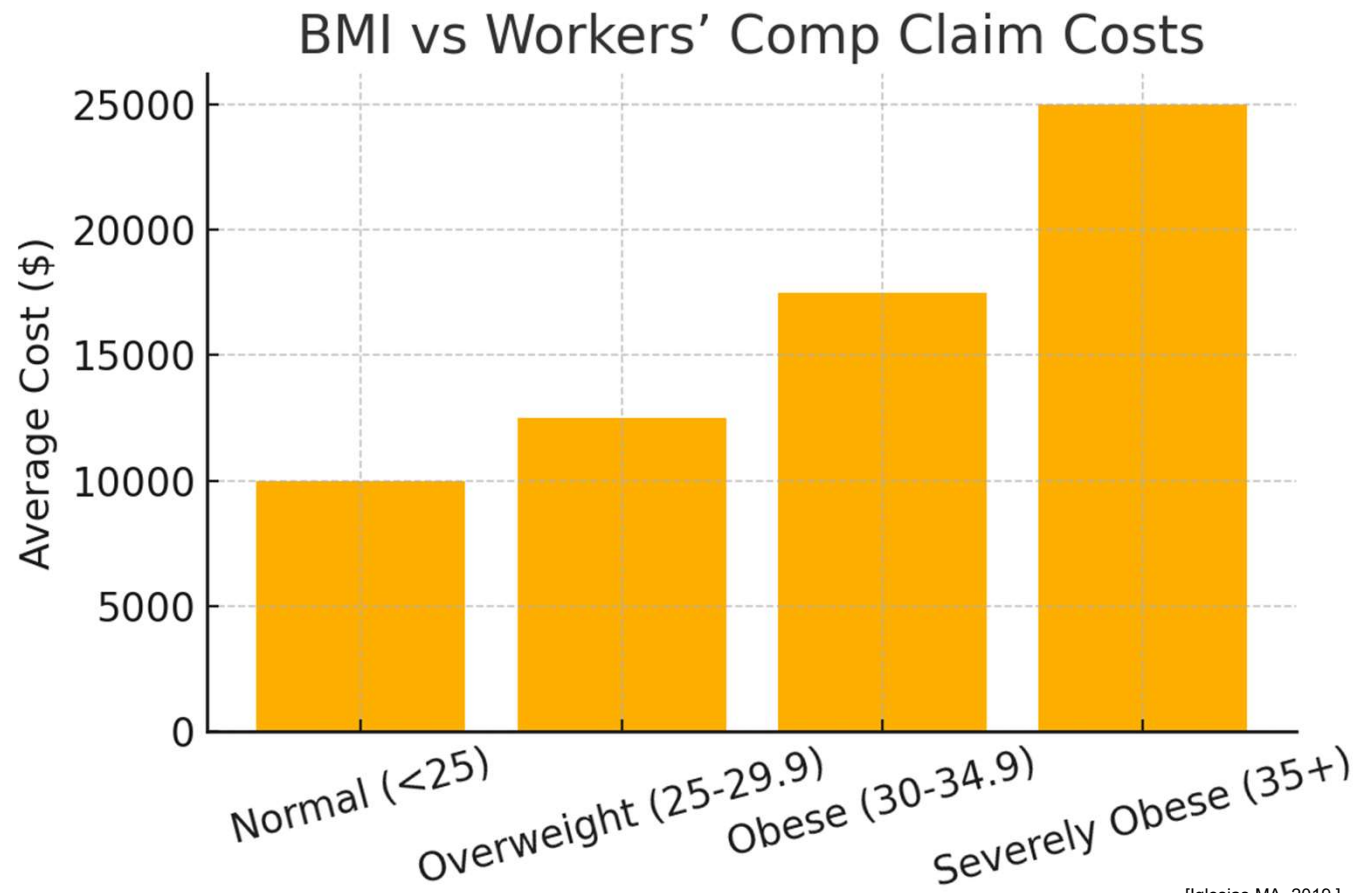


Impact of Comorbidities on Claim Duration



## Spotlight: Obesity

- Affects 40% of adults; projected to reach 50% by 2030
- 13x more lost workdays, 7x higher WC costs
- Impacts recovery, equipment needs and comorbid risk



[Iglesias MA, 2019.]

# Spotlight: Diabetes



- Over 100 million Americans with diabetes or prediabetes
- Complicates healing, increases infection and amputation risk
- Costs 2.3x more in medical expenses

[Iglesias MA, 2019.]

# Spotlight: Hypertension



- Affects 103 million Americans
- Delays surgery, interacts with common WC meds
- Raises cardiovascular and stroke risk post-injury

# Behavioral Health & Depression



- Depression = 69% longer disability durations in MSK claims
- Increases complexity and slows recovery
- Often undocumented or missed

# Older Adults Often Take 5+ Medications



[Iglesias MA, 2019.]

# Polypharmacy & Medication Risk



- Drug interactions can delay healing and increase falls
- Use Beers Criteria to identify high-risk prescriptions

# Sensory, Balance & Reaction Time



- Declines in proprioception, vision, hearing, vestibular function
- Increased fall and injury risk, slower hazard response
- Design matters: lighting, noise, contrast, flooring





# Why Aging Makes Claims Harder

- Declines in proprioception, vision, hearing, vestibular function
- Increased fall and injury risk, slower hazard response
- Design matters: lighting, noise, contrast, flooring

# Strategies for Better Outcomes



- Flag comorbidities early
- Integrate Nurse Case Management, Pharmacy and RTW planning
- Use ergonomic adjustments and calculators

# Ergonomic & Job Design Adaptations



- Avoid static postures, bending, lifting from floor
- Sit-stand options, task rotation, anti-fatigue mats
- Lighting and design must match aging sensory needs

# Preventing Injuries in Aging Workers



- Improve lighting and reduce glare across workspaces
- Minimize floor hazards—uneven surfaces, slippery areas
- Encourage snug-fitting, non-slip footwear
- Redesign jobs to avoid prolonged standing or overreaching
- Support musculoskeletal health with ergonomics and breaks

# ADA & Legal Considerations



- ADA interactive process essential for aging workers
- ADEA prohibits age discrimination (40+)
- Create modified duty and document accommodations

# Wellness Programs



- Mixed evidence on ROI
- Modest changes in BMI and activity
- Low participation by high-risk workers



# Targeted Programs

- Targeted programs (e.g., prediabetes, stretching, RTW coaching)
- Total Worker Health™: safety + health promotion
- ROI better when addressing actual workforce risks

# Cognitive Aging & Workforce Impact



- Slower processing, recall, attention
- Retain strengths: expertise, judgment, pattern recognition
- Support with tools, mentoring and job matching



# Not Just Risk: The Value of Aging Workers



- Expertise built from years of hands-on experience
- Strong pattern recognition and judgment
- Resilience and reliability under pressure
- Mentorship opportunities for younger generations
- Transfer of institutional knowledge

## Summary & Recommendations



- **Adjusters:** Flag comorbidities early, request medication reconciliations
- **NCMs:** Prioritize fall risk and functional assessments
- **Employers:** Revise job descriptions, invest in RTW accommodations
- **Clinicians:** Avoid age bias, use Beers Criteria

### **In general:**

- Address comorbidities, polypharmacy, cognitive aging
- Engage in integrated, proactive RTW planning
- Create a workplace supportive of all ages

# Key Takeaways



- Comorbidities and age extend recovery and raise cost
- Behavioral health is often the biggest multiplier
- Proactive, age-informed strategies = better outcomes
- Prevention and accommodation must be strategic



## References & Resources

- NIOSH Total Worker Health, CDC, ACOEM, AARP
- The Hartford, GENEX, AMA Guides, Ohio BWC
- NCCI, WorkCompCentral, Beers Criteria



# Questions & Discussion