



Proud to be your proficient and reliable consultant

Your Employees Compensation Claims Specialist



Ever Bright is committed to provide our clients more inclusive services and better communication than they expect.



Carrina Kwok W.S.
Founder & Director



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Founder & Director

Ever Bright Claims Consultants

More than the average Third Party Administrator, we're committed to delivering inclusive services with industry exceeding communication & expertise.

Specializing in Employee Compensation Claims, our on-hand staff provide in-depth knowledge within legal, rehabilitation, investigation, direct settlements, and recovery— providing our clients with solutions to the variety of problems facing EC claims.

A History of Excellence

Our team reports a high rate of success dealing with direct and pre-action settlements well before any legal proceedings commence, resulting in a cost effective solution that benefits both the employer and employee.

General Claims Management — Contacting each and every injured employee from the day incidents are reported, our team maintains frequent contact throughout the claims process. Keeping our clients informed with regular monthly updates, we plan for any possible actions to prevent potential litigation. We also meet quarterly with employers to ensure all parties are up to date and remain proactive.

Are You Experiences These Problems with Employee Compensation Insurance?

We often find our clients are facing ever increasing Policy Premiums year over year for their Employee Compensation Insurance. This is often the cause of just one or two work injury claims— when poorly tended to these claims can run lengthy, result in a huge compensation to the injured worker, and likely incur substantial legal costs.

One of the major benefits to closing cases consistently and quickly is the reduction in premium increases.

Poor employee moral can lead to the lack of worker motivation. This type of intangible loss can be compounded by other less than satisfactory risk management, job allocation, and increasing sustained injuries to workers.

Moreover, the lack of fluent knowledge of claims procedures; processing of MAB, tracking rehabilitation, ensuring injured workers can return to pre-accident work, and following through with claim compensation, can be detrimental to an inexperienced or unequipped enterprise.

This is why when considering a Third Party Administrator for your Employee Compensation Insurance, the dedicated and astute team at Ever Bright is the ideal solution.

What is a Third Party Administrator (TPA)?

Simply put, a TPA handles all claims processing & administrative duties for organizations that self-insure their employees. Greatly beneficial for larger companies with Employee Compensation Policies that are self-insured, having a TPA is proven to be an efficient and cost effective solution.



Why Consider Self Insured Retention (SIR)?

Our recommendation for organizations facing increasing Employee Compensation premiums during renewal years is to consider Self Insured Retention. By negotiating with the insurance company, adding a SIR condition we can illustrate tremendous benefits.

Setting Self Insured Retention at HK\$ 100,000 for each claim

- All expenses below that number the insured is liable
- All claims exceeding that number are taken over by the insurer

Under this sort of SIR imposed policy, insurance premiums can be reduced while the insured can efficiently monitor the claim.

What Makes an Inclusive Service?

Breaking away from other third party administration solutions, Ever Bright leverages a uniquely trained and well versed team to prepare for a wide range of potential claims issues... all while providing closely monitored and detailed case reporting that far exceeds the traditional industry expectations.

Together we work with our clients to steer them away from expensive litigation and lengthy claims, creating massive savings.



Health Care — prioritizing the complete rehabilitation of injured employee, allowing them to return to work quickly & safely. We often meet directly with injured employees, suggest & arrange additional medical consultations, examinations, or treatment if necessary; and provide continued monitoring of employees as they undergo treatment to make sure they're on track to resume normal working conditions.



Investigation — providing experienced professionals to obtain recorded statements, investigate claims for suspicious activity/ malicious intent, and ensuring that all claims reporting is genuine.



Recovery — overseeing the recovery of employees whose injury is the result of reckless and/or intentional action by a third party other than a fellow employee. Our specialists deploy innate legal knowledge to expedite the claims process while protecting the interests of the employer and insurer.



Direct Settlements — Avoiding lengthy litigation and ensuring costs remain at a minimum concerning claims of injured employees that have a) failed to seek assessment from the Medical Assessment Board; or b) employees with an injury that has been left untreated for unsound reasons.

Why Should Your Enterprise Use a TPA Service?



When Using a TPA

Clear, concise, and realistic procedural guidelines for special handling of claims.

Proactive approach with claims to plan ahead, with regular inclusive updates.

Case by case monitoring, and prompt notification for any changes in the injured party's attitude or behavior.

Professional and experienced suggestion for medical treatment, helping workers achieve a speedy recovery & return to work.

Consultation, advisement, and strategic planning for each and every claim.

Presented with a well organized database to control & monitor every claim file.

Without a TPA Service

No clear guideline or procedure.

Reactive approach to issues, without any timely updates.

No indication on a worker's attitude.

No way to determine workers are receiving accurate medical treatment.

Difficult to strategize effective procedure.

Poor organization and increase difficulty keeping track of files as multiple claims stack up.

The Rehabilitation & Investigation Process

After an incident occurs, employers send Ever Bright the necessary forms and related documents. At this point we review the information and examine the possibility of an investigation (according to the circumstances of the accident) in addition to suggesting a course of rehabilitation.



Injured Worker Rehabilitation

- Collect Information From the Employer
- Contact is Made with the Injured Employee
- Ever Bright Cooperates on a Medical Case Plan
- We Facilitate & Arrange with the MAB
- Direct Settlement with Employee Compensation and Common Law, if applicable
- Institute a Return-To-Work Plan



Case Investigation

1

Contact is Made with the Employer to...

1. Obtain Accounts of the Accident from Co-Workers & Witnesses
2. Notify the Injured Employee to Schedule the Work Injury Claim

2

Ever Bright Contacts the Involved Parties to...

1. Inform the injured employee, witnesses, and co-workers of Ever Bright's role
2. Document and retain statement from the involved parties

3

A Site Investigation Begins Including...

1. Photographs of the Accident Location
2. Examination of the Accident Location and Surrounding Area

Once finished implementing the investigation Ever Bright submits a full report along with comments on potential liability of the accident.

CASE ONE

Accident Occurred 14 September 2017. Worker slipped and fell while moving steel components on a construction site. The injured worker was 27 years old, and suffered a sprained neck and waist.

- Ever Bright received instruction from insurer to follow up with the claim // 25 SEP 2017
- Ever Bright arranged the 1st meeting with the injured worker, and obtained accident details and assessment of his physical condition // 6 OCT 2017
- Continued monitoring and reporting of the injured worker within the hospital, during medical consultation, and throughout the recovery process. All is going well.
- The insured contractor called Ever Bright to report the injured worker worker's direct employer had not arrange periodical payment for over a month, and the injured worker had filed a complaint with the Labour Department. // JAN 2018
- Ever Bright suggested the contractor issue a Periodical Payment to the worker instead.
- Due to administrative procedure, the contractor was unable to issue Periodical Payment — the issue was still unresolved
- Seeking a proactive solution Ever Bright immediately began discussion with the insurer, recommending a Direct Settlement with the injured worker.
- Contacting the injured worker, Ever Bright proposed the Direct Settlement resolution, explained the suggested resolution.
- The injured worked accepted the Direct Settlement and the case was closed. // JAN 2018

Accident Occurred
14 SEP 2017

Case Began
25 SEP 2017

1st Meeting with the Injured Worker
6 OCT 2017

Issues Reported
JAN 2018

Ever Bright sought a proactive solution

Problem solved. Case Closed.
JAN 2018

Analysis

By first establishing direct contact with the injured worker, quickly after the incident, Ever Bright was able to build a positive and trusting relationship. This also resulted in conclusive knowledge of that worker's health and physical condition, so accurate medical treatment could be verified.

When it was made aware that Periodical Payment had not been received, Ever Bright quickly gathered information on the situation, and suggested a Direct Settlement to the insurer to mitigate further costs with the case. Because of the positive and trusted relationship between the injured worker and Ever Bright, the worker did not doubt or question the Direct Settlement proposal.

CASE TWO

A 59-year-old worker sustained a fracture on his left index finger while moving steel on a construction site. // 3 JAN 2017

- The insurer contacted Ever Bright and requested they follow up with the claim. // 20 March 2017
- Three days later Ever Bright conducted their 1st interview with the injured worker to assess their physical condition and obtain more information about the case.
- At this time the worker informed Ever Bright he was not taking the prescribed pain killers to ease the pain, as the medication upset his stomach.
- The worker acknowledged he would have to tolerate the pain, and anticipated the recovery process would be slow.
- Ever Bright reported this new information directly to the insurer, and suggested to arrange a private doctor to analyze the injury and see if further effective treatment could be provided.
- Private medical consultation was arranged on 24 April, which included X-Rays. At this point it was documented that the fracture had been healed, and the worker should be fully recovered in the next three months. One month of sick leave was granted.
- In the following months, the injured worker continued to visit the public hospital seeking medical consultation, physical therapy, and obtaining documentation for sick leave.
- Ever Bright stepped in, citing that the private doctor had estimated this type of injury would require three months to recover fully and immediately proposed a Direct Settlement to close the case and save costs.
- The injured worker accepted the Direct Settlement and the claim was closed in August.

Accident Occurred
3 JAN 2017

Case Began
20 MAR 2017

1st Meeting with the Injured Worker
23 MAR 2017

Issues Reported
23 MAR 2017

Ever Bright sought a proactive solution

Problem solved. Case Closed.
AUG 2017

Analysis

The injured worker reported that he greatly appreciated Ever Bright's arrangement for the consultation with a private doctor— this allowed for a clear picture of the injury, and accurate assessment of the recovery time. The worker also expressed relief after the direct settlement, as he was then not required to continuously visit the public hospital to obtain sick leave certificates to receive Periodical Payment from his employer.

As the case was closed within eight months, the insurer was fully satisfied no further costs would be incurred.

CASE THREE

21 year old worker was injured by an iron pipe when operating a drilling machine, and suffered a fracture in his left foot.

- Ever Bright was requested to follow up on the claim at the end of March 2017
- On March 31st the first interview was conducted with the injured worker, discovering he was unable to walk but was mobile using a wheel chair.
- A consultation with medical professionals was conducted a month later, reporting the injured worker was able to walk without aid and began physical therapy twice a week.
- In July Ever Bright noticed that the worker's medical condition was stabilized, but he was still visiting physical therapy; and became aware the worker was considering to arrange MAB with the Labour Department
- Should the worker follow through with MAB the case could go on for a further five months
- Ever Bright proposed a Direct Settlement to close the case.
- The injured worker initially rejected the Direct Settlement and wished to close the claim via MAB.
- Ever Bright stepped in to discuss the advantages of Direct Settlement with the worker, and he eventually agreed; closing the case in February 2018.



Analysis

Because Ever Bright had kept a close monitor of the case as it progressed, certain elements which could have lead to increased claim duration and costs were immediately discovered — allowing proactive measures to be taken.

The case was closed in 13 months by Direct Settlement, which was satisfactory to the insurer. Due to the young age of the injured worker, should the case had gone to legislation it would have resulted in exponentially increased legal costs and possibility of a large compensation to the worker.

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