

Can I have my permanent impairment re-assessed?

Yes. When there is a medically documented change in a worker's medical condition, and it has been at least sixteen months since the last impairment assessment, the worker may apply to the Workers Compensation Board to review the degree of impairment.

Does an impairment entitle me to additional services?

Workers with an impairment and a loss of earning capacity may be eligible for the Workers Compensation Board's vocational rehabilitation (VR) services.

Workers who qualify for an impairment award may also be eligible for medical services and extended wage loss benefits.

For more information, please contact your case worker.



Impairment Assessment Guide

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For more information, please contact:

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Impairment Assessment

The purpose of this brochure is to provide workers and employers with information related to an impairment assessment.

What is an impairment?

In some situations, a worker may not fully recover after a work-related injury. In this situation, the Workers Compensation Board will determine whether an "impairment" has resulted from the injury.

An "impairment" means a medically measurable permanent anatomical loss or disfigurement and includes:

- Amputation
- Loss of vision
- Loss of hearing
- Impaired nerve function
- Scarring, causing disfigurement
- Joint ankylosis or
- Joint fusion from surgery

How is an impairment determined?

The determination regarding whether an impairment has resulted from a work related injury is made by the Workers Compensation Board's Medical Consultant, who is an external physician contracted by the Workers Compensation Board. The Medical Consultant has specific training in this type of assessment as well as in the use and interpretation of the *AMA Guides to the Evaluation of Permanent Impairment (AMA Guides)*.

What are the AMA Guides?

The *American Medical Association Guides to the Evaluation of Permanent Impairment* is an internationally recognized assessment framework established by the American Medical Association. The Workers Compensation Board is legislated to use the AMA Guides.

When is a referral made for an impairment assessment?

Once it is determined that a worker's injury has reached a plateau in medical recovery, the WCB determines whether a referral for an impairment assessment is appropriate. If appropriate, the worker will be referred for an assessment by the WCB Medical Consultant, and an appointment will be arranged by the WCB.

How will I be compensated for an impairment?

If a worker's injury date is on or after January 1, 1995, and the worker has a impairment, the worker is eligible for an impairment award. (If your injury is prior to January 1, 1995, please contact your case worker to discuss how you may be compensated.)

The impairment award is a payment which is based on a percentage of total body impairment, as determined by the Medical Consultant.

The amount of the impairment award is equal to 1/100 of the maximum annual earnings in effect on the date of the injury for each one per cent of total

body impairment. The minimum award amount is \$500 and the maximum is the maximum annual earnings in effect on the date of the injury.

Example: If a worker has a five (5) % total body impairment for an injury that occurred in 2005, the impairment award would be calculated as follows:

$$5\% \times \$42,300 \text{ (maximum earnings in effect for 2005)} = \$2115$$

The worker will be paid this amount in a lump sum payment.

How long does it take before an impairment assessment can take place?

An assessment may occur after a plateau in medical recovery is reached, which means that the worker is no longer in active treatment and further medical recovery is not anticipated. Please contact your case worker for further information.