

# Risk Insights: Senior Living & LTC

## Episode 20: Senior Living & LTC: Workers' Compensation Management

Welcome to the Risk Insights: Senior Living & LTC podcast, hosted by Tara Clayton with Marsh's Senior Living & Long-term Care Industry Practice. Each month, Tara, a former litigator and in-house attorney, speaks with industry experts about a variety of challenges and emerging risks facing the industry.

### Tara Clayton

Hello and welcome to Risk Insights, Senior Living and Long-Term Care. I'm your host, Tara Clayton, and in our podcast series we dive into topics that matter most to senior living and long-term care companies. In today's episode, we're tackling an important issue that affects companies of all sizes: workers' compensation management.

Workplace injuries can have a significant financial and operational impact, but with the right approach to loss control, companies can reduce risks to protect their employees and keep costs under control. Joining us today is Scott Bertulis, senior vice president, loss control with Marsh's senior living and long-term care industry practice. Hey, Scott, thanks for joining today.

### Scott Bertulis

Glad to join today.

### Tara Clayton

Scott is a seasoned loss control expert in our industry, and he's joined us a few times now on our podcast. Scott, I'm going to ask you, just for if we have any new listeners, to give a little brief snapshot of your experience and background in the industry.

### Scott Bertulis

Sure. So I've been working with our senior living practice pretty much since its inception, so probably over 25 years now, and really specializing in working with our senior living clients over those 25 years. And that's pretty much all I do. I'm a certified safety professional. I specialize like Tara had said on the casualty side, the workers compensation fleet.

OSHA compliance and everything in between when it comes to the non-clinical and even on some of the clinical issues that our clients are faced with, things like, let's say, resident handling, bloodborne pathogens, and things like that. There's a lot of, sometimes there's carryover between the loss control.

From the casual property and casualty and then the clinical as well. So I work with our clinical team as well, and we do a lot of collaboration to make sure our clients are well-rounded in terms of their overall risk management programs.

### Tara Clayton

Thanks, Scott. I know we keep you very busy.

Scott, as I've mentioned, you've joined us a few times now on the podcast talking about really best practices and preventing different workplace injuries. But today I wanted to change things up a little bit and approach workers' compensation from a different standpoint.

And I want to focus today on post-incident areas and areas of opportunity for senior living providers to consider to better manage when a workplace incident happens.

I mentioned I want to talk about workers compensation management. Can you just talk to us high level, what does workers' compensation management, why is that so important in the senior living and long-term care space?

### **Scott Bertulis**

Well, having a good workers' compensation management program where everyone from the community, all the managers from the community level, all the way up to the C-suite understand their roles, their responsibilities, and the protocols is really important because it's probably the most manageable insurance coverage you have, right? It's when an injury happens, it's manageable from the standpoint of how you handle that claim. How you make sure that you're staying in communication with the colleague, reducing the possibility of litigation through that good relationship you have with the colleague. So it is somewhat manageable from that perspective. Whereas if you have more, let's say, for example, the GLL claim, it's a lot less control there.

So having good policies, procedures, using valuable services like nurse triage can make all the difference in terms of the ultimate outcome of that claim. So based on that, all of my clients I encourage them to have these robust policies, procedures, and making sure that everyone involved in touching that claim really knows their responsibility and the things they can do to effectively manage and get the best outcome for that claim.

### **Tara Clayton**

Scott, you mentioned the importance of having policies. Are there certain foundational policies that when you're working with clients that? Talking about managing workers compensation incidents that you would say are pretty important or ones to really providers need to make sure they're considering as part of their program?

### **Scott Bertulis**

Yeah. Certainly. I would say like the most important policy to have is a good return to work program, return to work policy.

Fundamentally when we see that employees come back to workday one after an injury, whether that is accommodating their restrictions to the point where they're on light duty or modifying their normal job to restrict some of the activities they do or even transferring to. Another position, temporarily to get them back to work. It really has a huge impact and the length of the claim in terms of how long it is until closure and the ultimate cost of the claim. So fundamentally, return to work programs are extremely meaningful, but they need to be structured as well. It's nice to have a return-to-work program in theory.

And try to get employees back to work. But really, to facilitate that return-to-work program, there should be some protocols in place, some guidelines for those at the community level that are supervisors and directors that are going to be overseeing.

Seeing that return-to-work program formalizing through transitional duty offer letters and things like that's really important to the successful management of the claim.

### **Tara Clayton**

Yeah, that was the next question I was going to ask is, just kind of the experience you've seen knowing how important a return-to-work program is. Are there any key strategies? And I think you've mentioned one or two so far, but strategies or processes that are really kind of critically important that a provider?

Not only has, but really has a structured, like you said, a structured process around to make sure that they are getting the benefit out of a return to work program or even the opposite areas where you've seen it not work quite so well, just some, maybe some tips there.

### Scott Bertulis

I really encourage my clients to come up with light duty tasks. Come up with a list too, so it's not like you have every time there's a colleague that's on light duty that those within the community have to come up with a list of things that they can do to accommodate the restrictions, right? So if you have a pre-populated list of light duty tasks, it makes it a lot easier to implement the return-to-work program. One of the things that I've done is create per department so each department, typical department within a senior living community, dining, housekeeping, maintenance, and so on.

Each have their top ten list of light duty tasks that they can perform within that department and even taking it a step further and saying what are the expected, physical demands for those tasks? Like when you're creating light duty tasks like in dining, you're folding napkins, what is the physical requirement for folding napkins? Well, they consider.

And it's a sedentary position, but it's providing that to your medical providers, those that are treating those injuries can also kind of force their hand, so to speak, to instead of giving someone time off of work and saying, yes, we can but this colleague on light duty because all of these tasks that you provided are they're capable of doing those. So, twofold. When they get the restrictions from the physician where a lot of times it's 5 lbs to the right arm or something like that. And it's really difficult. How do accommodate that?

If you give in the reverse of that, if you have this list of tasks, you can provide that to the physician. The physician.... you can almost use it as a checklist. They could do this, this, this, this, and this, and they can maybe check off the whole thing that you have because most of the tasks are sedentary type tasks, very light duty tasks and that way you're going to have more successful outcomes in terms of getting that return to work. But certainly kind of formalizing that return-to-work program, having something in writing, like I said earlier, that transitional duty offer letters are important. So the employee understands, the injured employee understands exactly what the responsibilities are to the program.

That being on work comp just doesn't give them a free ticket to take off of work, right? The expectations are they come to work and they perform their duties as described in that transitional duty offer letter in terms of the tasks that they are supposed to complete.

And also really important, make sure there's an expectation when they have physical therapy or their doctor's appointments, they're making those appointments and providing the information and updates to whoever is managing that claim in the community, whether it's the business office manager or the supervisor giving those updates so they understand.

Where they're at in their recovery and I'd like to call that return-to-work programs more like transitional duty, right? So you have transitional duty and there's like rated retransition duty, right? So maybe they start off only doing sedentary, very sedentary tasks. They can only sit down. They can only use the limited use of the hands and so on.

All the way up to the point where they come back to full duty. Maybe they're released to do more, so it makes it easier to accommodate when they can do more. And maybe it's just a slight modification of their normal job instead of designated light duty tasks, maybe they go back to the regular job, but they just can't do, let's say, resident transfers or something like that for. Let's say a caregiver, for example.

### Tara Clayton

So how, I guess this is maybe a compound question. So we can break it up. But this, the process you all of that makes sense, it sounds like we need to have preparation in advance of common incidents that we know can happen in our space, kind of having that prepared checklist and things that. We want to then also provide education. We're educating those medical providers on who we are, the things we do inside the different areas of opportunity for transitional.

How should providers be thinking about from a structured process? Because to me, one area is how are we getting alerted that the incident happened to be able to put all those steps in place and then throughout the life of that transitional duty it sounds like there's going to be different steps, right? Where eventually, we're getting them back to their full-time employment, their normal job roles. How is that claim managed? What are processes that providers need to be thinking about both when the incident happens and then kind of talk about kind of through that life of claim? What are some best practices to help manage to make sure we're, we're putting the right things in place at the right time and then drawing it to conclusion as quickly as we can.

### Scott Bertulis

Sure. Yeah, I guess to take a step back from the return to work, like you're talking about. So when an incident happens, there needs to be clear protocols and this is usually, it's typical of when you hire a new colleague or you part of the orientation is saying, hey, here's what you do. If you're injured on the job, you need to report directly to your supervisor the claim. And then from there, then you can actively manage that claim and the expectation is as soon as possible, no matter how minor the incident is. If you feel pain, if something you did at work causes you to have pain or injury or even illness, you need to report. It as soon as possible. That's important, at least within the first 24 hours of the incident. Those are the normal guidelines. So that's first and foremost. I really like when our clients have options for nurse triage that are embedded with either the TPA or the carrier. Nurse triage is a very helpful tool because it takes the decision-making away from the supervisor or the director in terms of how they're going to treat that colleague if they need to send them to the clinic. Certainly if it's an emergency situation, there's no question there, right? If someone feels like they're having a heart attack, they're bleeding, bleeding profusely, whatever. There's no fooling around. You call 911, but most of the incidents that occur, it's musculoskeletal in nature and it's difficult to assess to determine what the need is by using a nurse triage program that oftentimes is embedded into your TPA services and / or your carrier services. The process is basically they report the injury to the supervisor, then the supervisor picks up the phone, calls the nurse triage line hands the phone over to the employee, then the employee talks to the nurse independently, privately, and they go through an algorithm to determine does this need to be treated at a clinic or another facility or can it be self-treated through first aid and it stays away from being a medical-only claim and you manage that process and I see very good outcomes with the use of nurse triage and the statistics across the board are pretty much a 40% reduction in medical-only claims. So when you look at a high frequency of not only claims, there's a big opportunity there. So as much as possible, I want my clients to take advantage of those nurse triage programs.

Secondarily, that's one part of the process, getting those procedures down for the initial claim report, what else do you do? Certainly, accident investigation. You need to understand what's happening, right? If you understand the details of the incident, what happened? What are the possible changes? When you look at the chain of events that occurred, you know what went wrong? Why was this person injured? Is it a process? Is it a procedure? Is it a piece of equipment? Is it the environment that we're looking at in terms of slip and fall exposure we see? A lot of slips and falls right, resident handling and lifting injuries. Musculoskeletal pretty much dominates the frequency when you look at workers compensation loss runs for a typical senior living provider. So really understanding how these incidents and injuries occur and investigating them to again adjust policy procedures, safety policy training, things like that. When you get down to those root causes of why these incidents happen, you can effectively reduce or prevent the injuries from happening again, so certainly accident investigation being part of that protocols for reporting on the front end and I'm not sure how far you want me to go, but when you know now when you have the colleague, let's say that goes to the clinic for treatment and let's say we do have restrictions, then the process begins of managing that claim. So who is the individual? And I definitely recommend someone at

the community business office manager, HR representative, someone of that nature, to actively manage that claim.

And when I say actively manage that claim, it's at least a weekly check-in with that employee, at least to see general questions like how are you doing, how are your appointments going? Do you have any updates for me in terms of what the doctor are you, are you how are you doing with your return to work? Are you having issues? How are your treatments? Going at the physical therapist or physical therapist or whoever is treating them in that process so that.

Again, adjustments can be made if there are issues. On the flip side, if they're not going to appointments and not making those appointments, that's certainly going to affect the outcome of that case. And then we can look into advocacy in terms of the carrier on the carrier side and the broker side. So who are those claim advocates? They're going to help you to manage that.

So you can raise the red flag when things happen where the colleague is not making any of their appointments. They're not going to physical therapy.

Perhaps in certain situations you might want to get nurse case management involved to actively help in managing that claim to make sure they're going to appointments and to hopefully get that person to full recovery so we can get them back to full duty as soon as possible.

### **Tara Clayton**

Talk to me a little bit more about the nurse case management, Scott. What's the role that they have in being able to help facilitate making those appointments?

### **Scott Bertulis**

So, nurse case managers are going to either come from the TPA and or the carrier. And it's kind of a higher, sometimes it's a third party, but they're there to help the employees, the injured employee manage their care, right, and to provide updates to you as to what's going on with that case, right? So like I said, the employee is having difficulty making appointments or whatever, whatever the circumstances are, the role of that nurse case manager is to make sure that they are.

Going to those appointments, making those appointments and then providing updates so that when you have, let's say, claim reviews and jumping ahead here, but when there's a claim review, we're getting real-time updates as to the status of the claim what's going on with the care of the employee, the updates, the updated doctor's reports.

Physicians reports in terms of their status, if there's complications, if you know, let's say if there was a test that was done like an MRI and what are the results of that and so on.

Again, once when, when sometimes claims do get complicated and when they get complicated, it's really important to utilize all those possible resources that you have and sometimes just for the sake of not knowing that those resources are there, you don't use them.

So, a nurse case manager can certainly help with managing that claim

Does add expense to the claim, but it's one of those that you're going to get a return on investment from.

### **Tara Clayton**

It's not something, there's multiple stages. It sounds like a claim, right? There's hopefully the front-end work to try to minimize those that turn into that more complicated claim. But you will have those complicated claims where, to your point, working with your workers' compensation claim advocate to make decisions of when's the right time. Maybe to bring in a nurse case manager and you mentioned claim reviews. Talk a little bit for those who maybe haven't been through. You know that more complicated workers compensation claim where claim review is happening? What is a claim review in this

then the workers compensation world and kind of what's the cadence, what happens at those claim reviews, what's the benefit that the senior living provider is getting from participating in those?

### Scott Bertulis

Well, the claim reviews should be set up on the front end as part of the contract, so to speak, with your insurance carrier, and that really is dependent upon claim volume. So when you have a lot of claims, you're probably going to want to have more frequent claim reviews. I see for a lot of my larger providers quarterly claim reviews to kind of keep track of what's going on with each of the claims and what typically happens in these claim reviews is. So the adjusters that are handling the claims will be on those calls and a lot of times the way that the protocol is for those calls is you have the adjuster that handles so many claims, we're going to handle those first and they're going to go through each of those cases. It is, I think it's really important and I see the most successful outcomes when there are also representatives from either the community level or the C-suite, like risk managers on those calls as well.

So that there is feedback going back and forth between the provider and the insurance carrier in terms of the adjuster to get real-time updates. So when you're updating the claim and you're staying on top of it, you can make the best decisions to affect the outcome of that claim. And the ultimate goal is closure, right? We want these claims to be closed. We want to have good outcomes. The earlier the claim is closed, the better outcome.

Typically... you're going to see in terms of those particular workers compensation claims. So the claim review process really helps to make sure you're staying on top of those.

If you, let's say you did two claim reviews, what happens to claims when they get complicated, they become litigated and there's no real-time updates. I'll see some claims that are two to three years old and that's not to say that they're not being managed. But the ones certainly that aren't being managed and you let go. They're going to escalate in terms of the time it takes to get to closure, oftentimes they become litigated because then no one's watching what's going on. No one's managing the claim, and those are the real difficult claims to try to settle.

Claim reviews certainly help to manage those litigated claims, but they also help to resolve the claims before they get to litigation and trying to get as early closure as you can on those particular claims and manage them properly. Again, when we, a lot of times the discussion about nurse case management comes into play during those claims.

Right. We're just not having any success. We know this colleague has made three appointments for an MRI. They haven't done any three of those. OK, well, maybe we need to get a nurse case manager on this particular claim to make sure that the colleague is, going to their appointments and things like that.

### Tara Clayton

I think in the claim world, obviously the quicker you can resolve and bring that claim to closure, to your point, the least expensive those claims are going to be and we know any time attorneys get involved, right, costs are automatically going to start going up, even on having to defend, right? You'll have your defense costs as well as the plaintiffs attorney, the employees' attorney costs.

Anytime I think about litigation and claims, I start thinking about documentation and I know you've talked about the importance of that community check-in weekly with the employee to see how things are going and having these claim reviews to give those updates and kind of see where the claim is going, but, that's all kind of verbal. What about from the documentation standpoint, how important is documentation and when to document in these workers' compensation claims?

### Scott Bertulis

So as I mentioned earlier when you intake the full and there's their new claim, right, that happens and you got your first report of injury, the information that is collected on that first report of injury is really, really important and that's why you want to get it as soon as possible. You want to do an investigation as soon



as possible to get the details of the incident. And that's one of the reasons I love nurse triage because you have a nurse that's taking this information down, that is recording this information. The calls oftentimes are recorded, so you can refer to them later if there's any question as to body part that was affected. So maybe the initial report in terms of that call when they report the incident was I'm only having an issue with my left elbow and then later on it becomes left elbow, left shoulder, back, and clearly, let's say on the call, it's just my elbow, bump my elbow or something like that, right? So that could be very valuable. And in terms of documenting if you're not using a nurse triage program, it's just really important that the first report of injury that you're filling out is complete, right. You're not leaving any empty fields within that first report of injury. Trying to get as much detail as possible.

One of the big errors that I see is handing over the report to the colleague and say, hey....fill this out. You're going to get minimal information and a lot of the information is not going to be helpful at all. So what I would rather like to see, and what I coach my clients to do, is to interview the employee first before.

Writing down and they can, and when they're interviewing, let's say the business office manager, HR person, supervisor, whoever is talking to the colleague about the incident and how it happened, what their nature of injury is and so on.

They're having a conversation and the start of that conversation is we take all injuries seriously. We want to make sure you're cared for again, expressing that community relationship you have with the colleague, making them feel at ease. But when you take down that initial report, it's an interview process. The supervisor takes notes.

And then you can ask questions to fill in gaps based on the first report of injury. If they didn't share any information on, let's say, body part, the time that the incident happened, who they were working with in terms of possible witnesses and so on? You can ask those questions to fill in gaps and then you get a really good complete first report of injury that the supervisor fills out and then I also like to see something in writing from the employee, right? The employees' report of the incident is just as important and the expectation after having that interview is I would like you to write down what you just told me in that detail. If you just put a piece of paper in front of them and say, how did it happen? I slipped and fell. That's it. If there's a conversation about how they slipped and fell, what time the incident happened, who they were working with, was there something on the floor? All of those details, it's more than likely that the employee is going to write out their statement and you're going to ask them to do with the detail that they provided in that conversation and that could be very meaningful on the front end in terms of managing a claim that it does go to litigation, having that information on the front end is really, really important.

So yeah, that the documentation getting really good, clear, concise information on those reports can certainly be very helpful to managing any claim that you.

### **Tara Clayton**

Scott, I like that practice of really just talking with the colleague first. I think we've got to be mindful a lot of times, the caregivers we're working with could have concerns about being fired or concerns about, I'm going to get in trouble or who knows where their head's going. And so the last thing you want is giving them a piece of paper because they're in defensive mode, right? And they're going to write who knows what or not write a ton of things that we need to know. So I think giving them that that space to talk and have them feel comfortable, letting them get that voiced out and then the guidance of, OK, now I need you to write down the incident of what happened. Right? They give me the factual things. I think that's a really strong practice.

### **Scott Bertulis**

Yeah. And more to that too is in terms of making sure that that colleague feels comfortable, I do recommend it's a one-on-one process. It's not an interview by committee. You don't have three or the supervisor or the HR person, the executive director there. That changes the whole feel of that process, right? That colleague is going to feel very defensive. Three people talking to them about their incident or one-on-one is much more comfortable. And again, you want to feel uncomfortable with you do want to

explain. Like I said earlier here's the purpose. This is why we do this. We want to figure out what happened to make sure that it doesn't happen again. Here's the process and explaining that process is really important as well because most employees have no idea what's going to happen. They don't know what the protocols are for getting treatment for their injuries, how? What's going to happen to their work status, and so on. So kind of explaining on the phone, like, hey, we want you back to work tomorrow. You've gone to that clinic here. We want you to come back to work tomorrow. But the doctor released you on restrictions. We're going to accommodate those restrictions. So all of that is very meaningful in terms of how do you manage that.

### **Tara Clayton**

Yeah, that's a great point, putting yourself in that employee's shoes, they hopefully have not experienced a workplace injury before, right? So they don't understand that process like those who are handling and on the other side see it all the time, right? And they understand what's going to happen. Taking away some of those fears that they may have, but to your point too, being careful on what we're committing to until we know all the information as well. So, creating that safe space and letting them know the purpose is to figure out how we can best help get you back.

### **Scott Bertulis**

And one of the things I wanted to have on the flip side, right, when we have someone that seems to be very familiar with the process and they're saying things that indicate that they don't want to come back to work, they want to be off, and so on. These are certainly red flags or there's inconsistencies in their story about when it happened. And they come into work. Somebody saw them limping, coming into work, and now all of a sudden, they're saying it happened at 7:00 AM when they started their shift.

Anytime you have inconsistencies with the injured employee's story or just things that are making the red flags are going off in your head as to is this legitimate? Those are certainly things issues you want to raise with the adjuster as well and when you report the claim, you may want to say this one.

I question, like this didn't feel right. I don't think this happened here.

That were and may need further investigation and sometimes when you raise those red flags, the carrier may get involved to the point where they're going to have, they'll make a phone call to the employee and take down a statement, reported statement, if that's needed, if when you have those kind of contentious claims or again, those that might be playing the system to benefit them in terms of time off of work or anything like that.

### **Tara Clayton**

I just want to kind of circle back on really quick. You've talked a couple of times now about the nurse triage program and really how that can provide a number of benefits early in that initial post-incident claims management piece knowing kind of where you've seen it be successful. Do you have any practice pointers about like here's some things that will help you be successful with it. Or even here are some things that will almost guarantee it's not success for you that you'd want to share with the audience.

Sure, certainly, having training. Yeah, having your supervisors and directors go through training on the process and how it works is really important. And it's not a huge training. It's pretty simple. It's here's the process and the colleague reports an injury to you. Here is the phone number that you call. Here's the process and how it works. You're going to hand the phone over to the employee. They talk privately at the end of that conversation, the employee hands the phone receiver back to you and the nurse on the line will tell you what the outcome of that call was. You need to send them to this clinic. Or this is they need to self-treat, first aid, ibuprofen. They should be fine. That kind of thing. But that's ultimately how the process works. What I do recommend, to make it successful, is to make sure that again you do have a training program for your supervisors and directors. And even maybe recording that training if you will if again you can record, let's say like a webinar or something like that and put it on your learning management system. So when you do have turnover at positions, that new colleague can be trained the



same way, or at least putting protocol like the one sheet protocol. Here's what happens. I also like wallet cards. Wallet cards are really just laminated wallet cards on the process because let's face it, if you have a well-managed community, workers compensation claims don't happen all the time and you know you may get the training, a supervisor may get the training initially when they're hired and they don't ever go through this process and maybe it's a year, maybe it's two years before they have to go through the process. And they don't remember what was supposed to happen. So having a wallet card or a one-page reminder sheet of the process. Here's the phone number. Here is the prescription medication instructions for workers' compensation that could be very helpful to your or the network of clinics that you can send them to if they have to go to the clinic that we recommend. Here's the designated one that we like. That's another thing too, is to not just pick one clinic and just go with it. You want to work with those clinics and I recommend occupational clinics, occupational med clinics. They specify in occupational medicine if you can find them.

But you don't want to just take it on face value because they are an occupational clinic, that they're going to help you in terms of managing your claim and be on the same page with you, with return to work and so on. So the proof is in the pudding. How they manage your claims in terms of getting you good paperwork, working with you and your return to work program and not always writing.

One week, two weeks off, right from the doctor's notes and so on. That's another thing that you should be actively managing or at least evaluate your local clinics to see. You certainly don't want to use emergency rooms. Unless it's there. It's an emergent care situation.

You don't want to use them because you're just going to have to send them to the clinic to follow up the next day or a couple days later anyway. That's going to be the ultimate outcome of that visit is OK, go to see this physician or whatever for follow-up. So it turns into two visits instead of one, and that emergency room visit is going to be quite pricey. Thousands of dollars for something that That could have been covered in a \$200 visit to your occupational clinic.

### **Tara Clayton**

Scott. As always, you have a tremendous amount of helpful information and as expected, some really great insights on some best practice pointers and things to have to ensure you've got a pretty robust workers' compensation management program to manage those claims for better outcomes. So Scott, I really appreciate you joining us today.

### **Scott Bertulis**

I want to thank you for inviting me and I really appreciate that. And as much information as we can get out to our clients or those within the senior living industry the better I just like to share this information to help manage these claims and make sure we get the best outcomes across the board.

### **Tara Clayton**

Yeah, absolutely. That's the safety of our employees so they're able to care for our residents is the primary objective all around. Scott, thank you. And for our listeners, as an FYI, Scott recently joined Marsh's Workers Compensation Center of Excellence colleagues in discussing recent trends and updates in workers compensation for senior living and long-term care providers.

You can find a link to visit the replay of that webinar in our show notes.

Be sure to subscribe so you don't miss any future episodes. You can find us on your favorite podcast platforms, including Apple and Spotify. As always, I would love to hear from you if you have any topics you'd like to have addressed on future episodes of the podcast, please e-mail us your ideas at the e-mail address provided in the show notes.

And as always, thank you so much for tuning in and I hope you'll join us for our next risk insight.