E-Poster

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Effectiveness of a Multimodal Strategy to Enhance Rehabilitation Utilization in Individuals at Risk of Receiving a Disability Pension: Results From a Randomized Controlled Trial

Topic: Rehabilitation Across the Continuum of Care

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BACKGROUND

German social law offers various services to help maintain or restore work ability. However, people with health issues often need clear information to make informed choices and access these services. A lack of clarity often leads to underutilization. To address this, we developed a multimodal strategy for individuals at higher risk of receiving a disability pension. It includes four modules: screening and postal contact, telephone consultation, a face-to-face interview, and case management. A key objective was to provide guidance on rehabilitation services and promote their use to support sustained work participation.

METHODS

We evaluated the effectiveness of this strategy in a randomized controlled trial (DRKS00024648). The study included 10,600 individuals aged 18 to 65 years from Schleswig-Holstein and Mecklenburg-Western Pomerania. Each participant had a risk score of at least 60 points, derived from administrative data of the German Pension Insurance North. A score of 60 or higher is associated with a significantly increased risk of receiving a disability pension within the next five years. Participants were randomly assigned to either the intervention or control group. The 5,300 individuals in the intervention group were contacted by the German Pension Insurance North and informed about the case management intervention. The control group was not initially informed about the new strategy. The primary outcome was rehabilitation service utilization, with data provided by the German Pension Insurance North one year after random assignment. Secondary outcomes included additional administrative data, such as disability pension status. Additionally, all study participants received a postal questionnaire one year after allocation to assess various patient-reported outcomes as tertiary measures.

RESULTS

In the intervention group, the probability of being approved for rehabilitation measures increased significantly by approximately 30%, from 5.4% to 6.9% within one year (HR = 1.28, 95% CI: 1.10-1.50). The risk of receiving a disability pension was comparable in both groups. A total of 2,363 participants completed the 12-month follow-up questionnaire, with 1,137 in the intervention group and 1,226 in the control group. The questionnaire results indicated a higher level of awareness about rehabilitation services among those who were contacted.

CONCLUSION

By applying a risk score based on administrative data, we identified individuals at increased risk of receiving a disability pension and provided them with targeted support. Case management enabled tailored assistance, improving access to appropriate support services. This was reflected in a significant increase in utilization of rehabilitation services.

Statement of Disclosures

None

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