

NOTICE OF PUBLIC MEETING

WORKERS' COMPENSATION MANAGEMENT-LABOR ADVISORY COMMITTEE

Friday, January 26, 2007

10:00 a.m. -12:00 p.m.

State Fire Marshal's Building, Mt. Hood Room

4760 Portland Road NE, Salem, Oregon

(A map is available upon request)

Committee Members Present:

Sheri Sundstrom, Hoffman Construction Company, Portland, OR
Linda Jefferson, City of Portland, Portland, OR
Mike O'Rourke, Plumbing and Steamfitters UA 290, Tualatin, OR
Tracy Brill, Port of Portland, Portland
Lon Holston, Grants Pass, OR
Bob Shiprack, Oregon Building Trades Council, Tualatin, OR
Lisa Trussell, Associated Oregon Industries, Salem, OR

Committee Member Excused:

Ellen Cutler, Harry and David, Medford, OR
Greg Miller, Gunderson LLC, Portland, OR
John Kirkpatrick, IUPAT District Council, Portland, OR
Cory Streisinger, Director, Department of Consumer and Business Services

Meeting Agenda

Approve minutes of January 5, 2007 full MLAC meeting

The minutes will be reviewed and approved at the next scheduled meeting.

Biennial Workers' Compensation Report

Mike Manley, Information Management Division

Mr. Manley gave an overview of the report, which documents change over the past 20 years. The report is a compilation of data from Oregon Safety and Health Administration, Office of Injured Workers Ombudsman, Workers' Compensation Board, Information Management Division, and Fiscal and Business Services. The report provides an overview of 11 areas of the workers' compensation system. The areas included in the report are: Safety and Health, Compensability, Claims Processing, Advocates and Advisory Groups, Medical Care and Benefits, Indemnity Benefits, Return-to-Work Assistance, Disputes, Insurance and Self-Insurance, Workers' Benefit Fund, and Workers' Compensation Premium Assessment. A copy of the Biennial Workers' Compensation Report was provided to the committee. The full report is available on the website of the Department of Consumer and Business Services.

Discussion: The committee asked for clarification on the Workers' Compensation Premium Assessment section.

Department review of Medical Advisory Committee input to MLAC

John Shilts, Workers' Compensation Division

The MLAC Care Provider Subcommittee asked for input from the Workers' Compensation Division (WCD) and the Workers' Compensation Medical Advisory Committee (MAC). WCD surveyed the members of MAC and provided a summary of the survey to the subcommittee. Mr. Shilts reviewed the process that WCD used to get input from the individual members of MAC. There was no attempt made to gain consensus among the MAC members, nor was there any attempt to gain a majority vote. The

survey results were gathered by recording individual responses from the MAC members. The recorded responses were then reviewed by the individual MAC members to ensure that the responses were recorded accurately. Mr. Shilts provided a brief summary of the results of the survey of MAC.

Mr. Shilts also gave a brief summary of the observations that the department drew based on the results of surveying the individual members of MAC.

A document titled “MLAC Care Provider Committee, Care provider authority and proposed changes from provider associations” was provided at the last meeting of the Care Provider Subcommittee. A revised document was provided to the committee and is part of the record.

Legislation

Legislative Concepts related to care providers in the workers’ compensation system:

HB 2430 Authority of chiropractic physicians to serve as attending physician in workers' compensation claims

HB 2431 Authority of licensed chiropractic doctor or physician to serve as attending physician for workers' compensation claims

HB 2432 Study of chiropractic services provided in workers' compensation claims

LC 2002 Provision of medical services by chiropractor in workers’ compensation.

LC2043 Eligibility of licensed practitioner of chiropractic to serve as the attending physician in workers’ compensation claim.

A copy of each bill, an analysis, and a fiscal impact statement was provided to the committee. The documents are part of the record.

Public Testimony:

Bob Olsen, Oregon Doctors of Chiropractic (ODOC)

Several bills have already been introduced to expand the treatment authority. ODOC believes these bills will allow the injured worker better access to the medical treatment needed. Mr. Olsen testified that ODOC is looking for feedback from the Management-Labor Advisory Committee.

Dr Saboe, Oregon Chiropractic Association

Dr. Saboe gave a general overview of each of the bills and concepts. He testified regarding suggested changes for treatment authority for chiropractors as well as expanding the number of visits and the duration of treatment for chiropractors. He also testified that HB 2432 was introduced in the 2005 legislative session as HB 2588 and gave a general overview of the bill. The Oregon Chiropractic Association is seeking feedback from the Management-Labor Advisory Committee regarding these bills.

SB 352 Physician assistant services for workers' compensation claims

Public Testimony:

Marshall Coba, Oregon Society of Physician Assistants

Mr. Coba clarified the position of the physician assistants. Physician assistants are not seeking to remove the requirement to be supervised by an attending physician.

Ben Johnson, Oregon Society of Physician Assistants

Mr. Johnson gave general testimony about the bill and clarification on the changes sought by the physician assistants.

Committee discussion: Members asked for a clarification on the differences between the proposed process and the current process. The committee also asked for clarification on how often the supervising physician reviews the case.

John Shilts, Workers' Compensation Division

Mr. Shilts clarified that the current process requires an attending physician to examine and re-refer the worker every 30 days while under the care of an physician assistant.

Committee Discussion: The committee reviewed the changes that were agreed to from the recommendations of the MLAC Care Provider Subcommittee. The full MLAC committee agreed that all provider groups should be brought in alignment to so that medical treatment begins from the date of first visit. A bill will be drafted and reviewed by the committee to confirm that it meets with the agreement of the committee. The committee also agreed that the worker should be notified of their rights regarding selection of a care provider. The department is working on updating the worker notification.

John Shilts, Workers' Compensation Division

Mr. Shilts gave an overview of the Manage Care Organization requirements in the current statute.

Public Testimony:

Phil Donovan, Oregon Association of Naturopathic Physicians

Mr. Donovan provided written testimony which is part of the record. He testified in response to the care provider study. The Association of Naturopathic Physicians has requested a draft bill that will allow the worker to bring their naturopathic physician with them into the MCO if there is a prior history of treatment, for 60 days of treatment and provide 30 days of time loss authority.

Tom Barrows, Oregon Podiatric Medical Association

Mr. Barrows provided written testimony which is part of the record. He testified in response to the care provider study. The podiatrists are looking for support to add podiatrists to the list of providers who can act as an attending physician within the scope of their practice.

Ramona St. George, Providence MCO

Ms. St. George provided written testimony which is part of the record. She testified in response to proposed changes in SB 352 and in HB 2432 and provided comments on behalf of Oregon Health Systems, Providence MCO, and Kaiser On-the Job. In addition, she provided testimony regarding the MCO come-along provision and the changes needed for the MCOs she is representing to support the provision. She also provided clarification of the MCO's criteria for credentialing and the criteria for exclusion.

John Shilts, Workers' Compensation Division

Mr. Shilts clarified the current system for the MCO come-along system and the differences for the different provider types.

Work Session:

The committee discussed the change agreed to at the last meeting regarding commencing medical treatment from the date of first visit for all provider groups. The committee also discussed the length of treatment time and number of visits. The committee requested any information regarding possible Social Security guidelines that may have been used to set the 12 visits in 30 days limitation. The Department agreed to come back to the committee with that information. In addition, the committee discussed the concept of a come along provision.

Meeting adjourned at 12:40 pm