



Meeting Notes: May 19, 2006

Members Present: Chair; Ronald Bowman, M.D.; Vice-chair; Timothy Keenen, MD.; Brad Lorber, M.D.; Hans Carlson, MD.; Franklin Wong, M.D.; Frank Prideaux, D.C.; Gary Rischitelli, MD.; Tom Williams, P.T.; Pam DeVisser, FNP.; Chloe Oliver, City of Portland; Linda Olsen, SAIF; Maria Carraher, Injured Worker Rep.

Members Absent: None

WCD committee staff present: Debra Buchanan, Holly Mercer

Dr. Bowman called the meeting to order.

Minutes approved for March 17, 2006 meeting with edits. (In the future, draft minutes will be e-mailed to committee members as soon as completed, for review prior to the next meeting.)

**Update:** Debra Buchanan will take over the role of Medical Advisory Committee Administrator, replacing Kevin Willingham. Her contact information is (503) 947-7734, and [debra.k.buchanan@state.or.us](mailto:debra.k.buchanan@state.or.us). Kevin will still be a resource for the committee as needed.

**Introductions:** Holly Mercer, is the new WCD project manager for the Medical Quality Initiative. Holly will be working regularly with the committee on medical issues.

Medical Advisory Committee Notebooks were distributed for each member.

**Update on SB311-Independent Medical Exams:** by Wendy Stone, IME coordinator

Six physicians attended the WCD Educational Conference training class held earlier this week. WCD has received 100 applications from physicians wanting to be on the director's list of authorized IME providers. A database was created to track applications. A new vendor has applied for approval of their training. A copy of the revised brochure was provided to insurers and they were asked to destroy previous ones. The brochure will be translated into Spanish and Russian. The reading level is at an eighth grade level. A sample of the worker survey was provided. The insurer is responsible to send the survey out with the notice to the worker. The Division 010 proposed rules public hearing is at 10am Monday, May 22nd. Permanent rules will be effective July 1, 2006. Insurers that schedule an IME on or after July 1, must use the director's physician list.

**Update Medical Quality Initiative (MQI):** by Holly Mercer and Nancy Bieber, WCD. The MQI Internal Advisory Committee has completed its final report and is in the process of establishing workgroups in the following three areas: Provider Outreach and Training, Treatment Issues with a Focus on Pharmacy, and Medical Data and Reporting. The Provider Outreach and Training Project is planned to be launched in June 2006. Projects relating to treatment issues with a focus on Pharmacy, and Medical Data and Reporting should be launched in July and August, respectively.

There was some discussion about identifying “best practices” by providers in the system and what that meant. Ideally we need to balance quality medical care for injured workers with efficiencies and effectiveness in the system. Is it how to best move the worker through the system, or how to help the doctor navigate their way through the system? Holly will put together information from various perspectives: workers, doctor, insurers, etc., and bring definitions to the next meeting.

The MQI Report Group, led by Nancy Bieber, is still analyzing the data they have gathered but is nearing the completion of its final report. Questionnaires were sent to doctors and office staff (samples provided). WCD received 270 responses from each group, out of 1700.

**Autologous Chondrocyte Implantation:** The request for director review has been withdrawn, and the committee will take no further action on this issue.

#### **Artificial Disks:**

John Shilts, Administrator of WCD would like this issue reviewed by the committee. Some preliminary information was provided in the notebooks. The draft plan is to get more information to the committee for review by the next meeting (electronic if possible), then review the following meeting, and make a recommendation in the November meeting. The issue is whether this procedure should be excluded in the rules as unproven, outmoded, unscientific, etc, or, if it doesn't meet those definitions and criteria (for exclusion), if the division has the authority to give guidance to the industry on this issue. Discussion ensued regarding: If the committee makes a recommendation other than exclusion from compensability in the rule, what would the recommendation look like and what could be done with it? Generally, other than addressing whether a procedure/treatment is outmoded, unscientific, etc, the division addresses issues of liability for payment, and appropriateness of a treatment for an individual case, but not efficacy of the procedure itself or expense of a procedure. However, WCD is exploring the possibility of putting some guidance on the web for the industry on certain issues such as this, additionally, it could be a resource for the Medical Review Unit. WCD may have the Department of Justice look at WCDs authority for parts of the issue. However, currently the committee can proceed with review and recommendation. More information will be provided to the committee to review for the next meeting.

#### **Dispensing Prescription Medications From Physician Offices:**

The proposed Div. 010 rule would change the former rule which allowed physician's to dispense oral generic medications from their offices for an initial 10 day supply. The proposed rule would not have a limit of days that this could occur. A hearing is scheduled for May 22<sup>nd</sup> and the division is taking testimony until Friday, May 26<sup>th</sup>. After some discussion, the committee voted to recommend keeping the rule the way it is. Debbie will create a memo to reflect the vote of the committee and submit it as testimony in the rules process. We considered several aspects of the situation, such as, but not limited to:

- \* the lack of any data about whether there is a problem, and if so, the scope and aspects of it;
- \* worker safety regarding potentially harmful drug interactions that could occur because the prescribing physician may or may not be aware of other drugs the worker is taking;
- \* potentially and unnecessarily raising costs to the system for prescription medications due to repackaging or other potential processes that physicians could undertake;
- \* the appearance of "self-referral" and the potential appearance of conflict of interest.
- \* the recommendation of the Pharmacy Fee Task Force from several years ago to limit the supply provided to 10 days (current rule);
- \* the need for worker's to have an initial supply of antibiotics, or other urgent and acute needs of the worker to have prescription medication;

- \* the anecdotal reporting by some physicians that some of their patients do not always have the funds necessary to purchase medications, proper medication can facilitate early intervention and healing as well as early return-to-work;
- \* the potential to limit (or appearance of) where a worker can have their prescriptions filled.

**Psychosocial Factors Affecting Return-to-Work Outcome- under what circumstances would a psychological evaluation be appropriate?**

After some discussion it was decided that this subject should stay on MAC's agenda for further discussion and that we should invite a PhD to our meeting in order to get a specialist opinion. This issue will be included in the draft 1 year plan for MAC; the committee will prioritize issues in the next meeting. It was also recommended that the committee look at what other states are doing and to search for any studies that show how the psychosocial issues affect the return to work. The committee's recommendation in this matter could have an informal influence in the system.

Next Meeting: July 21, 2006

**Action Items:**

**What:** MQI Initiative: Put together bullets on all sides; workers, doctor, insurers, and definitions.

**By Whom:** Holly Mercer

**By When:** Next meeting July 21, 2006

**What:** Dispensing Prescription Meds from Physician Office: Create a memo to reflect the vote of the committee.

**By Whom:** Debbie Buchanan

**By When:** Next meeting July 21, 2006

**What:** Feedback Summary on MQI surveys

**By Whom:** Nancy Bieber

**By When:** Next meeting.