



Meeting Summary of June 22, 2001

Members Present: J. Eusterman, M.D., T. Keenen, M.D., C. Olson (Safeco), F. Prideaux, D.C., D. Silver, M.D., M. Sorum (Jeld-Wen), T. Williams, P.T.

WCD Staff present: Janis Checchia,

Others present: Cathy Ostrand-Ponsioen, Carol Helton, and Carla McCanna.

Absent: Nancy Bieber, Randy Sanne (Weyerhaeuser Corporation), T. Arthur, D.O., F. Wong, M.D. (CareMark),

I Form 827 Survey: Fred Bruyns, Forms Coordinator of Workers' Compensation Division (WCD), referenced the Physician's Guide for Reporting Oregon On-the-job Injuries (revised edition September 2000). WCD conducted a survey to assess the effectiveness of new medical forms and publications. Surveys were mailed to 2,014 stakeholders on November 15, 2000, and 332 responses were received. Physicians' response was excellent with lower returns from insurers and attorneys.

The Workers' Compensation Division will begin to sort through hundreds of comments regarding f827. WCD will begin to act on results and wherever possible accommodate the recommendations made.

Regarding the recommendation to add an "aggravation" check box to the physician's section of f827, the Medical Advisory Committee initially felt it made more sense to have the physician state whether or not the injured worker is filing an aggravation. However, the statute requires the claimant to file for aggravation benefits in a form designated by the Director. Therefore, committee generally determined that the insurer should be the entity to sort out whether the injured worker's claim for aggravation is supported by objective findings provided by the physician. And the form meets the statutory needs.

II IDET: Cathy Ostrand-Ponsioen of the Policy Review Unit provided MAC with copies of testimony received at the public hearing on June 19, 2001. No new testimony was received since June 19. Question to MAC: Would testimony change your original recommendation?

Decision: MAC will review transcript of the testimony and written material submitted at the hearing and come back to this issue at their July 27 meeting.

III Definitions of Statutory Terms—Outmoded, Experimental, Unscientific, Unproven:

- Experimental: in the process of applying the scientific method to a procedure.
Stated another way: Procedure has not been proven and the testing along the lines of the scientific method is in progress.

Experimental: is a treatment not in common current practice that is going through the scientific method and this process is not yet concluded.

- Unproven: the scientific method was used to conduct a review of the procedure and is completed with no efficacy demonstrated. Or no scientific method applied.

Unproven: unscientific procedure or the scientific method has been applied without efficacy demonstrated. Either it has not been studied or the study showed it did not work.

- Unscientific: The procedure was never tested by applying the scientific method. Or you tested it; it failed tests, and you are doing it anyway.

Unscientific: the process of the scientific method was not applied to this procedure.

- Outmoded means outside the current standard of practice of medical care.

NIH guidelines for the Conduct of Research defines the scientific method as follows:

Formulation and testing of hypotheses, controlled observations or experiments, analysis and interpretation of data, and oral and written presentation of all of these components to scientific colleagues for discussion and further conclusions.

(Detailed application may differ in different scientific disciplines and in varying circumstances.)

Decision: The members of the committee will continue to work on definitions at the July meeting.

IV WCD Update:

- ◆ Senate Bill 485: The list of amendments was distributed. The discussion around #5 (interim medical benefits) raised issues around the implementation with reference to “pre-authorization” clause of some HMO’s and ARISA issues.

Next Meeting: July 27, 2001
8:30 AM – 11:00 AM
Labor and Industries Building
Salem, OR