

WORKERS' COMPENSATION
MEDICAL ADVISORY COMMITTEE

April 20, 2018
9 a.m. – 11:30 a.m.

MAC Committee Members Present: Ronald Bowman, MD; Timothy Craven MD (MCO Representative); Constantine Gean, MD (Insurer Representative), Julio Ordonez, MD; Susan Strom, DC, Lon Holston (Worker Representative); Ryan Weeks (Employer Representative).

DCBS Staff Present: Cara Filsinger, Juerg Kunz, Lou Savage

MAC Committee Members Absent: Gary Rischitelli, MD, Brad Lorber, MD; Tom Williams, PT

Agenda Item	Discussion
Welcome, Introductions (0:00:00)*	Dr. Bowman called the meeting to order at 9:02 a.m.
Administrative discussion (0:00:26)*	Review and approve minutes for Feb. 16, 2018 MAC Meeting Dr. Strom moved to approve the minutes and Lon Holston seconded. The minutes were approved as drafted.
Administrative discussion (0:01:04)*	Juerg Kunz provided an update about the committee's prior discussion about the cost of a blood test to detect concussions. The only information he could find is that it costs about \$150. Dr. Gean asked if there is any data about how many head injuries there are in workers' compensation system. He provided an update about the use of the blood test and it was just recently approved by the FDA. Juerg commented that on some patients it would be used instead of CAT-scans as the first diagnostic test. Dr. Gean said it would be part of the panel of tests and that it might become part of the standard of care going forward. Juerg commented the test has a limited window for effectiveness.
Technology Review: Platelet Rich Plasma (PRP) Subcommittee update (0:04:16)*	Dr. Bowman said the subcommittee has not yet completed the literature review for the PRP studies. They are trying to sort studies so that they compare similar things, for example there are proprietary PRP formulas and some studies focus on specific types of use. The subcommittee hopes to have a report at next meeting, likely in August.
Technology Review: Low Dosage Irradiation (0:05:42)	Juerg Kunz reviewed the memo provided to the committee at the last meeting that summarized the request of the committee and the one study on the topic. Under the committee's study grading guidelines , it would be considered a Level 4 study. Dr. Bowman gave an update about the purpose of the treatment. Juerg reviewed the criteria for the committee's review. The committee had discussion and asked clarifying questions about: <ul style="list-style-type: none">• the committee's review steps, decision required, and whether the one study is

sufficient

- the type and nature of the treatment and when it is used
- the infrequent nature of the condition leading to this treatment method
- potential side effects of low dosage irradiation
- the one provider we know of that does this treatment is located in Chicago
- other studies about using low dosage irradiation for other areas of the body

There was opportunity for public testimony on this topic. No testimony was offered.

Lon Holston moved and Dr. Gean seconded that the committee table the review for one year. All members present agreed. Juerg will follow up with the requestor of the MAC review. Juerg will also expand search for additional studies that review low dosage irradiation for other areas of the body. These studies will be provided to the committee at their future review. At a future meeting, Dr. Bowman requested at that time the committee also get testimony from a radiation oncologist and from Dr. North, an Oregon orthopedic surgeon.

General discussion – medical issues roundtable discussion
(0:31:45)

The committee had a general discussion about current and potential future medical issues for possible MAC consideration. The topics discussed are summarized below.

Dr. Gean discussed a [Providence Express](#) clinic he saw at Portland International Airport. It is a private telemedicine kiosk available to the public. He showed pictures of the clinic and the process to access the telemedicine services. He asked the staff whether they treat workers' compensation cases; at this time not yet, but some of the employees use it for minor problems. The visits cost \$45 and presumably the person gets reimbursed by their insurance company. The committee and audience members discussed the application of this type of services in workers' compensation system:

- The usage would depend on the population surrounding the kiosk (e.g. large employers may offer similar services)
- Questions about the location of the doctors/providers providing the services
- Questions about the process for filing a form 827 report
- Types of services that should be covered by kiosks or via telemedicine generally (e.g., physical therapy)
- Current usage of telemedicine by Kaiser Permanente in general health and workers' compensation claims
- Fee schedule for telemedicine services, CPT codes for phone visits, costs of providing services
- Use of technology by workers

The committee briefly revisited the PRP discussion from earlier in the meeting.

Dr. Gean mentioned that the Federal Drug Administration has issued guidelines about use of cervical epidural steroid injections and potential side effects. In California they are rejecting the use of the treatment. This may be of interest to Dr. Lorber in a future discussion.

Dr. Craven asked for the status of artificial disc. Dr. Bowman summarized the current rules. The committee has this for review in several years pending new studies.

Dr. Craven asked about developing guidelines for lumbar fusions. Washington State

has recently issued guidelines that do not completely exclude the treatment but there are specific indications where it should be used. Juerg reminded the committee that in Oregon guidelines are generally the purview of MCOs.

Dr. Craven mentioned the use of trigger point injections. Dr. Gean said Liberty Mutual is looking at this issue related to treatment of specific types of conditions and is considering guidelines. Dr. Strom said some chiropractors treat myofascial issues and refer some of their patients to physiatrists for injections. Dr. Craven indicated that it may be more a specific situation question rather than a general issue.

Dr. Gean said he is hearing issues with “sports hernias” intramural tears that do not cause a protrusion. He asked whether members are seeing this issue and questioned whether there are guidelines about whether surgery is recommended. Dr. Craven and Dr. Bowman have heard of the issue but it is not a large number.

Lou Savage, Administrator of the Workers’ Compensation Division, updated the committee about the division’s upcoming medical access project. Based on stakeholder input, access to care is still an issue statewide and in particular Eastern and Southern Oregon. The division is working on identifying the various ways that workers’ compensation is not of interest to providers. When the division has a framework for discussion they will bring it to MAC for discussion and input.

Dr. Gean asked what share of providers do not take workers’ compensation patients. Lou responded it is a high percentage. Dr. Craven asked if the division has reviewed the Washington State Centers for Occupational Health Excellence model. Lou said that we have in the past but not recently. Dr. Bowman cited prior work on hassle factors should be considered, for example the concern expressed by rural doctors who treat the whole family so don’t want to make adverse decisions. Lon Holston said this has come up in the past and the effort to expand the type of providers who can provide treatment, but those efforts have not helped. Ryan Weeks commented that they don’t expect workers to learn all the terms, but doctors have to learn the workers’ compensation “lingo” which they’re not experts in. Chris Kafka (Kaiser MCO) said many practitioners do not want to learn the terminology or system. Dr. Gean commented that the administrative burden is different than in general medicine, but that the fees for workers’ compensation are more generous to compensate for that. Lou commented that the problem is more than just workers’ compensation, but we are looking for ways we can directly impact access to care.

Adjournment

Dr. Bowman adjourned the meeting at 10:33 a.m.

The next MAC meeting will be held on August 17, 2018

*The audio files for the meeting minutes and public testimony (both written and audio) can be found here: <http://wcd.oregon.gov/medical/mac/Pages/mac-meetings.aspx>