

WORKERS' COMPENSATION
MEDICAL ADVISORY COMMITTEE

April 19, 2019
9 a.m. – 11:30 a.m.

MAC Committee Members Present: Ronald Bowman, MD; Brad Lorber, MD, Julio Ordonez, MD; Susan Strom, DC; Ryan Weeks (Employer Representative), Tom Williams, PT, Lon Holston (Worker Representative)

DCBS Staff Present: Cara Filsinger, Juerg Kunz, Jeffrey Roddy-Warburton

MAC Committee Members Absent: Gary Rischitelli, MD, Timothy Craven MD (MCO Representative), Constantine Gean, MD (Insurer Representative)

Agenda Item	Discussion
Welcome, Introductions (0:00:00)*	Dr. Bowman called the meeting to order at 8:58 a.m.
Administrative discussion (0:00:26)*	Review and approve minutes for October 19, 2018 MAC Meeting Dr. Bowman moved to approve the minutes. The minutes were approved as drafted.
Technology Review: Platelet Rich Plasma (PRP) (0:01:04)*	Cara Filsinger states that no one signed up for public testimony and nothing was received in writing for PRP. Juerg Kunz states that the next steps are to make a final recommendation to the Workers' Compensation Division (WCD) administrator. Since there was no new information brought to the table the final recommendation from the last meeting stands. Committee discussion included: <ul style="list-style-type: none">- Insurer may override it if they want, i.e. they can pay for PRP injections if they so choose.- Payment for treatment of unwanted side effects won't be required.- The landscape for PRP investigations is very wide.- Dr. Lorber states PRP should be relooked at in a year because of how it changes.- The biggest benefit of PRP is the treatment for arthritis, which is not compensable.
(0:05:58)	Dr. Lorber moves and Lon Holston seconds the motion to forward recommendation to the WCD administrator. Committee unanimously votes yes on recommendation.
Opioid Prescribing (0:07:00)	Juerg Kunz moves discussion on to the review of the attachments on Oregon Acute Opioid Prescribing Guidelines and the review of the MAC short term opioid practice tips attachment . The guidelines are non-binding and are not

mandatory for providers to use; they are just a recommendation. Committee discussion included:

- Dr. Lorber has concerns with OHA not having an anesthesia pain specialist on their Oregon Opioid Taper Guidelines Taskforce.
- Pill usage needs to be stopped in the acute opioid stage so that it does not turn into chronic opioid pill usage.
- Concerns regarding the last paragraph on page 6 of the Oregon Acute Opioid Prescribing Guidelines and physician report cards and will be interested to see how they follow through on that.
- WCD Short-Term Opioid Use Practice Tips, under the Provider Tool “MEDs for Commonly Prescribed Opioids 10 mg of Morphine Corresponds to” does not have correct information on Methadone and the recommended dose is controversial. Dr. Lorber recommends using the Washington guideline for Methadone
- Significant issue with opioid use amongst injured workers.
- The demographics of the OHA guidelines presented are different than the demographics of workers compensation that the committee members deal with. The committee is willing to publish documents that they have control over and have published themselves. They don’t have control over what OHA publishes.
- **The committee is not endorsing the OHA Oregon Acute Opioid Prescribing Guidelines**

Administrative discussions
(0:27:40)*

Juerg Kunz provides updates on new rules that took affect on April 1, 2019. Committee discussion included:

- One of the major changes was office visit fees were raised by an average of 5%. This could lead to a potential increase in providers willing to take workers compensation.
- Some members thought that fees for surgical procedures and ancillary services, in particular physical therapy, have decreased.
- The Rules Advisory Committee lacks the voice of providers and their input would be very helpful.
- In the past 20 years, physicians have not have a cost of living increase in their overall income.
- Employer premium costs are decreasing, and the number of injuries is going down as well. Juerg Kunz is unsure if the decrease in the premium is due to the decreased injury rate or a more efficient medical system.
- How are Claims Disposition Agreements taken into consideration for the decrease in injuries.
- OHA All Payer/All Claim data base and Fee Schedule
- Workers’ compensation compared to general health
- Legislation discussing universal healthcare and how that will impact workers’ compensation insurance and well as drugs and prescriptions.
- Access issues for providers will be discussed at June 21, 2019 meeting
- Bill that may open up diagnostics for patients

(0:49:06)

Dr. Bowman adjourned the meeting at 9:46 a.m.

The next MAC meeting will be held on June 21, 2019.

*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>