

WORKERS' COMPENSATION  
MEDICAL ADVISORY COMMITTEE

October 31, 2025  
1 p.m. – 3:30 p.m.

*MAC Committee Members Present: Ronald Bowman, Brad Lorber, Raymond Brumbaugh, Lon Holston, Ryan Weeks, Eric Hubbs, Tom Williams, Constantine Gean, Emily Nguyen*

*DCBS Staff Present: Juerg Kunz, Matt West, Angela Blake, and Baaba Ampah*

*MAC Committee Members Absent: Jennifer Lawlor*

<b>Agenda Item</b>	<b>Discussion</b>
<b>Welcome, Introductions</b> (0:00:20)*	Dr. Bowman called the meeting to order at 1p.m.
<b>Review and approve 10/18/24 MAC minutes</b> (00:00:23)*	The committee reviewed the April 25, 2025 meeting minutes. Dr. Bowman moved to approve the minutes and Dr. Lorber seconded the motion. The motion passed unanimously.
<b>Member updates</b> (00:00:55)*	The newest MAC member, Emily Nguyen, MD, Orthopedic & Sports Medicine introduced herself to the committee.
<b>Rules update, including telehealth and PRP recommendation</b> (00:01:57)*	Juerg Kunz informed the committee about the upcoming rules advisory committee meeting and gave a couple of examples of what would be discussed. (Fee schedule amount for PRP injections and worker reimbursement for out of pocket payments made by workers for medical services prior to claim acceptance.)
<b>Addendum to Majoris MCO Perspective on Medical Care Access in State of Oregon white paper</b> (00:13:55)*	Ann Kein, President, Majoris Health Systems Oregon, Inc. shared an addendum to: " <a href="#">An MCO's Perspective on Access to Care in the State of Oregon</a> " that Majoris published last year. <ul style="list-style-type: none"><li>• Oregon is facing a medical provider shortage regardless of payer.</li><li>• The shortages and drivers of those shortages vary depending on the area of the state, the licensure specialty, and individual patient care needs.</li><li>• The provider shortage is not unique to Oregon, and the national shortage is forecasted to increase in the next 10 years.</li><li>• The Oregon workers' compensation system remains one of the highest performing in the nation and many workers are accessing the care they need.</li></ul>
(00:27:32)	Steve Schonefield, claimants' attorney, opines that in regard to access to care, the issues are driven by family doctors clinics either not understanding or wanting to abide by Majoris' guidelines. Majoris has more stringent treatment guidelines than the State of Oregon. Steve would like to know why guidelines are not shared with workers.
(00:30:13)	Ann Kein addressed Steve concerning Majoris guidelines. Majoris considers them peer review activities are sensitive and effects how we release treatment information. She is hoping to engage in discussion to troubleshoot through the feedback and insight share.

**Form 3245 Return to Work Status**  
(00:37:43)\*

Dr. Brumbaugh states that he reviewed Work Status forms from other states. He revised the Oregon form to make it easier to fill out, yet provide needed information.

(00:39:20)

Dr. Bowman finds the proposed form less busy and more attainable.

(00:39:36)

Dr. Lorber agreed that it is a better version than what we've been using.

(00:40:35)

The committee discusses specific fields on the form as well as some issues related to a worker's work status.

Dr. Brumbaugh states that he will make some changes and bring a revised version to the next meeting.

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**Insurance Authorization update (Tentative) Action: Update on insurance authorizations as it relates to physical therapy treatments.**  
(00:57:48)\*

Tom Williams shares the last time we discussed this topic, it was on the ways prior authorization was delaying therapy care. Tom reviewed charts and found out of 20 work comp auth charts, 3 were delayed, mainly due to waiting on chart notes from referring doctor. Tom finds that clean authorizations generally take 2-5 days. Is there a way to accelerate the process, especially when it comes to hand injury that can scar within days. Dr. Bowman points out the issues of authorizations sometimes expiring before the therapy even starts. Tom agrees that this is something he sees quite often. Tom explained as a physical therapist he's often able to get chart notes from the referring provider faster than the insurer can, yet some insurers refuse those chart notes when they are sent via the physical therapist, which then causes a delay in authorization.

(01:02:44)

The MAC members discussed some of the problems they see with preauthorization/precertification, in particular that it may create a delay in treatment and that sometime treatment doesn't start until past the initial preauthorization time, i.e., the pre-certified treatment time is cut short. One MCO noted that they made some changes to their process that should help with that.

(01:03:00)

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**Form subcommittee for review of lumbar artificial disc replacement**  
(01:10:50)\*

Juerg Kunz would like to create a subcommittee for the lumbar artificial disc replacement. We will need three volunteers. They will review studies provided to them by Juerg and make recommendations to present to the whole committee. The appointed subcommittee members are: Drs. Nguen, Lorber, and Gean.

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**[Access to Care-Retain Providers](#)**  
(01:18:47)\*

Lon Holston presents "Access to Care-Retain Providers." Provided background on MLAC and suggested we create some kind of retirement stipend system based on number of injured workers they see in their practice. Looking for approval of the concept to take it to legislative counsel to see it in bill form. Presented to MLAC's Access to Care subcommittee. MLAC may not do anything with it. As a concept, it's always changing and Lon wants to work with this committee to approve the concept. Would like to work with other stakeholders to fine tune and move forward. Pushing for 2026, but may get pushed out to 2027 depending on who is on board.

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The meeting adjourned at 1:46 PM.

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The next MAC meeting is scheduled for January 23, 2026.

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