

Industrial Insurance Chiropractic Advisory Committee (IICAC) Meeting Minutes
Date: November 18, 2010 from 8:30 a.m. to 1:30 p.m.



Final

Present: Robert Baker, DC
Clay Bartness, DC
Michael Dowling, DC, Chair
Lissa Grannis, DC
Carole Horrell
Jay Lawhead, DC
Bill Pratt, DC, Vice Chair
Ron Wilcox, DC
Bob Mootz, DC
Reshma Kearney
Joanne McDaniel
Jason McGill

Absent: Janet Blume
Linda DeGroot, DC
La Vonda McCandless

Guests: Mike Neeley, DC

General Business

9/16/2010 IICAC minutes

Moved, Seconded, Carried (MSC): Minutes were approved as written.

Membership

Roger Coleman, DC, resigned from the IICAC last month for health reasons. IICAC members expressed their great thanks for Roger's years of IICAC participation and appreciation of his extensive research, writing, and continuing education skills and knowledge. He is missed.

PEO Subcommittee Report

Ron Wilcox, DC, Chair, shared draft policies on Chiropractic Consultants' continuing education requirements and advertising/marketing.

(MSC): The IICAC approved both policies with changes noted. The policies should be discussed at CE seminars and implemented on Chiropractic Consultant:

- performance agreements,
- attestation letters
- sample marketing letter

Next, the PEO will develop:

- continuing education questions for the wrist and shoulder resource and practice aids to become online tests for doctors who want to receive contact hours.
- List serv for Chiropractic Consultants to improve communications and provide updates on policies, procedures, laws, rules, and similar.

PPQ Subcommittee Report.

At the next IICAC meeting, the IICAC will review the draft "Physical Medicine Practice Aid and Summary of Research". Consultants to the project include:

- Craig Liebensen, DC
- Judy Turner, PhD
- A representative from the Industrial Insurance Medical Advisory Committee (IIMAC)

Bob Mootz, DC, will also ask Mark Sutton, DC to be a reviewer. Mike Dowling, DC and Ron Wilcox, DC will help with the literature reviews.

The Subcommittee is also working to recruit a new IICAC member to fill Roger Coleman, DC's position on this team.

Chronic Pain Policy

The IIMAC Chronic Pain Subcommittee formed recently to begin the mammoth work to develop a comprehensive policy on preventing and treating chronic pain. This will take many months of dedicated work.

Strategic Planning

Jason McGill, JD reported 8% of the claims in the workers' compensation system cost 87% of the expenditures. 43% of these are resolved within 6 months after injury. This is a national trend, not limited to Washington state, made worse by the recession.

Consequently, workers' compensation premiums are increasing at a time when employers are hit hardest, particularly construction and others where most costly injuries occur. Their premium increases may be as much as 30-40% higher than average.

Why is the national trend of longer claims so hard to resolve? Key factors are:

- Obesity
- Aging population
- Washington's workers' comp. program provides good benefits

L&I is using the Lean process in all parts of the Industrial Insurance Division to identify ways to provide quality care that leads to return to work as soon as possible after injury. Efforts include:

- COHEs: Currently have two full COHEs and two seeds in institutions. In 2013, there will be two additional community COHEs. These expand by 2015 to catchment areas throughout the state so all workers will have access to COHEs.
- Focus on early intervention with employers to keep the worker employed after injury
- Functional Recovery Questionnaire to identify early which workers may develop long term disability
- Case tracking tool used at the point of service
- Prevent and treat chronic pain: Considering creation of a center of excellence for pain management in several communities across WA
- Early Claim Solutions Project claim managers contact employers and providers within the first few days after L&I receives the report of accident to discuss RTW options
- L&I is seeking funding for more nurses to do case management
- Internal Consultants are spending more hands on time working with claim managers.

Department Updates

Bob Mootz, DC reported on several changes:

- Physical Medicine: Staff are doing very thorough data collection, chart and literature reviews to

analyze physical medicine issues. This includes trend data and some chart audits. In general, the cost issues related to Physical therapy (PT) are from different types of treatment:

- Condition driven care
- Work conditioning using different types of PT modalities and approaches
- Work hardening, a 4-6 week program

L&I caps PT at 24 visits; utilization review is required to obtain authorization to continue care.

Early study results show activation leads to better results than work hardening or training to do activities using proper body mechanics or ergonomics. Cognitive issues are equal or more important for recovery than physical issues. They are the big issues that must be addressed.

Info from this project will be used in future department decisions on how to purchase rehabilitation services.

- MRI Utilization Review rule changes were published recently. Fewer situations require prior authorization now. Review the list serv notice or the L&I website for full details.
- Health Technology Assessment Workgroup is prioritizing their next topics to address.
- IICAC and IIMAC will report their work products to the legislature in 2011. IIMAC had 6 practice aids; currently working on CRPPS. IICAC needs to determine which practice resources would be most useful, as we can produce approximately two per year. The Physical Medicine practice resource should be available in spring 2011 and knee and neck rehabilitation will be completed by the end of 2011.
- IICAC is looking at ways to target problem areas raised by COHE mentors. Recently, one mentor pointed out that some patients may have better outcomes if their attending doctors referred their shoulder conditions to orthopedic surgeons earlier. IICAC will prepare a training on this topic to share through COHEs and at seminars.

Planning 2/17/2011 IICAC Meeting Agenda:

- PPQ Subcommittee: Active Rehab project status (possible draft)
- PEO Subcommittee: Two CE self assessment test drafts; Chiropractic Consultant advertising policy
- Department updates
- IICAC Strategic Planning
- Other

Next Meeting:

The full IICAC meet reconvene on Thursday, February 17, 2011 from 8:00 a.m. to 1:30 p.m. with:

- PEO subcommittee meeting from 8:00 to 9:30 a.m.
- PPQ subcommittee meeting from 11:30 a.m. to 1:30 pm.