

**IME Roundtable Meeting  
May 09, 2024  
via zoom**

<p><b>Staff Participants:</b> Azadeh Farokhi, L&amp;I Cristy Miller, L&amp;I Dane Henager, ATG Gary Kolonja, L&amp;I Joann Willyerd, L&amp;I Karen Jost, L&amp;I Kristen Baldwin-Boe, L&amp;I Melissa Dunbar, L&amp;I LaNae Lien, L&amp;I Nancy Adams, L&amp;I Sara Nielsen, L&amp;I Shannon Rushing, L&amp;I Suzy Campbell, L&amp;I Tanya Weber, L&amp;I Teri Baughman, L&amp;I Troy Parks, L&amp;I</p>	<p><b>Participants:</b> Audrey Serna Aimee Borrego Ashlie Soto Carolyn Logue Chelsea Stockner Chris Schauble Irene Suver Jeff Gosda Kayla McCain Kristin McCoy Mat Nguyen Michelle Bates Patti Claxton Rachel Faber Robert St Thomas Tracy McLeod</p>	<p>Craig Smith, MD Douglas Peffer, DC Kenneth Bayles, DO Kenneth Brait, MD Leonardo Romero, DC Meed West, DC Paul Darby, MD S. Daniel Seltzer, MD Stephen Chan, DC Todd Seidner, MD Wendelin Schaefer, MD</p>
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**Safety Message, Agenda & Accountability Log Review:**

Troy briefly discussed zoom meeting etiquette. The agenda was reviewed.

Melissa shared a safety message on camping safety. Make sure to pack, store, and cook food correctly. Avoid wild animals to keep family and pets safe. Use bug spray to avoid bug bites that can spread other parasites. Make sure to be prepared with a first aid kit, and let others know where you are going and when you expect to be back.

**Accountability Log Review– Troy Parks**

Troy reviewed the accountability log. There will be an update in this meeting about interpreter scheduling. The department hosted listening sessions this week with business, labor, and firms regarding IME recordings. There will be information on this during this meeting. There was a fee schedule analysis last year and clarification given at the May 2023 Roundtable meeting. Staff are working on a new analysis and hope to have another update at the next meeting.

**Program Updates:**

**Complaints YTD – Troy Parks**

Troy shared the number of IME complaints received so far in 2024. The average number of IMEs is about 14,000 exams. Less than 1% of IMEs have complaints. The top specialty receiving complaints is Orthopedists. Most complaints are regarding the reports.

Troy also shared the examiner pool data. The average numbers of approved examiners in the system has been about 327. Based on billing data, about 182 of those examiners are billing. The number of out-of-state examiners compared to in-state examiners was shared. The percentage has remained fairly consistent since August 2023.

Irene asked the department to look at the number of examiners that do 10 or more exams a year.

A reminder was given regarding workers bringing companions to IMEs. There have been complaints coming in from workers that they are not being allowed to have their companion attend their psych IMEs. The legislature did make a change to RCW 51.36.070 allowing the worker to bring a companion to any IME examination. Workers are not required to notify that they intend to bring a companion.

### **Quality Review – Tanya Weber**

Tanya briefly shared some addendum data. The overall rate of IMEs with an addendum request is 20%. Data was pulled based on addendum letters that CMs send. The numbers are not exact as they come from different sources. About 80% of addenda are billable and 20% are non-billable. Examiners are doing a great job meeting the required elements for an IME. Some ways to improve the rate of non-billable addendums are making sure questions are addressed with objective findings, and not answering questions that are not asked. Some reasons CMs are requesting billable addendums are having testing results that were not available at the time of the IME, not asking all the questions they need to, and asking the examiner to review an attending provider's response to the IME.

Tanya had re-run the data comparing telehealth and non-telehealth psych exams and the percentage that had opinions provided on questions/conditions that were not requested. This corrected data shows that there is only about a 1% difference in rate between the two types of psych exams. The examiners doing telehealth psych exams are doing well.

### **Interpreter Services:**

#### **Rollout Plan – Cristy Miller**

Cristy gave an update on the new interpreter services scheduling system. SOSi will be providing scheduled and on-demand interpreter services in Washington and border states. They will be able to provide telephone and video interpretation services for out of state, and telephone interpretation for out of country. ASL is not included in the contract, as well as out-of-state in person interpretation services.

Providers will be able to book a request for any interpretation services on their portal. The system will generate a zoom link for telephone and video appointments. Providers will be able to call a patient if they are not in the office with the provider. If a request submitted for an IME is not accepted by an interpreter, a coordinating team will be managing those requests. They will work on contacting interpreters in the area to see if they will accept the request. If there is no interpreter, they will offer telephonic and video interpretation.

The SOSi scheduling system, WordBridge, will rollout June 17. There will be a connection between My L&I and the SOSi system. Staff are adding a link to the scheduling system in My L&I for the firms. That should be available in a week or so.

One on one training will be available if needed. SOSi is working on demo videos as well for using the system. Firms should have received an email from the interpreter mailbox. An email was sent to all the admin emails in the interpretingWorks system to confirm the information in the system is correct. Staff are working on getting all that information pre-loaded into SOSi so when they go live the firms won't have to take time setting up their profiles.

### **IME Recording Impacts:**

#### **Update & Rulemaking Effective – Karen Jost, Suzy Campbell**

Karen shared a presentation Brenda Heilman presented at the WCAC meeting in March 2024. Staff gathered data regarding the extent of delays due to the recording bill. Some data was gathered through the scheduling system and some was gathered via a manual process. The completion rate of all IMEs was shared, along with the cancellation rate for IMEs with requests to record. The cancellation rate is a lot higher than the IMEs with no request to record. The IMEs that have the highest percentage with requests to record are psych exams. There is a correlation between legal representation on a claim and requests to record.

The manual review was done on 527 IME requests. There were 194 reviewed requests that were initiated in 2022 and were randomly selected. The other 333 requests were initiated in 2023 and selected because the term record was in the referral notes. A majority of exams delayed due to requests to record are rescheduled in under 100 days. There are some improvement opportunities and some best practices identified for IME panels, and additional training for CMs. There has also been some technology enhancements for rescheduled exams, and a

letter attachment that provides contact information for workers to notify the panels of intent to record. Staff have received feedback on radio buttons recently added in the scheduling system.

The location was not tracked for claims with requests to record.

The data shared was through November 2023. Several attendees noted that some issues tracked have gotten worse after December 2023 and into 2024. Staff did not continue the manual QA, but this can be looked into.

Suzy gave an update on the rules. They have been updated and are effective April 26.

### **Claims & Scheduling Units Trends:**

#### **Claims – Nancy Adams**

Nancy discussed some updated language around addendums in the MEH. The update was made to clarify when addendums are appropriate and should be requested. Addendums should be less than 6 months from IME, and require minimal records to review. They have done all staff training along with the update in the MEH.

Nancy gave a quick overview of what happens with the claim after an IME. An examiner asked last meeting why CMs don't just take action based on the IME recommendations.

The CMs should take action within five days after the IME is received. This could be removing the confidential flag from the report, sending a letter to the attending provider for concurrence, or setting a tickler for additional action if needed. When concurrence is requested they are working to make sure responses are received in a timely manner. If the attending provider disagrees with the IME, they should provide supporting documentation for that. An addendum should not be requested until that is received. Action should be taken by the CM on recommendation within their next review date, usually within 35 days.

On occasion, the firms get addendum requests from Fraud and Investigations. Staff have worked together to make sure they are specific with what they want reviewed if they send a video review, and they work with billing to make sure that can be billed by the firm.

A firm noted having trouble with some billing addendums when there are questions about a JA. The codes they have had issues with are 1038M, 1028M, and 1104M. Examples can be sent to Nancy and staff can take a look at this issue on a case by case basis.

#### **Self-Insurance –LaNae Lien**

There was nothing to report out on, and no questions.

#### **Scheduling – Shannon Rushing**

Shannon shared some scheduling data. There were some questions on if the recording bill had an impact on the number of referrals. The number of referrals has been declining since 2018.

The new radio buttons in the scheduling system regarding intent to record all default to No on CM side. The worker is advised an exam might not continue if they record without consent from the panel. This radio button is marked by the schedulers.

There was a significant drop in referrals between 2018 and 2023. The question was asked if the number of claims dropped as well. The number of IMEs dropped due to Covid, then the legislation was put in place that affected how often and under what circumstances an IME can be requested. Most recently the recording bill went into effect. All of these have affected the number of IMEs being requested.

#### **Q&A – Open Discussion Round Robin – Group**

There is not anything for the firms to do right now to get registered for interpreter system. If they responded to the email that was sent out then there won't be anything to do until the link is added to their profile. That link should be added to their My L&I dashboard in about a week. When the user clicks on the link, they will just want to

make sure the firm information they sent matches what is in the system. There will be communication sent when the link is available and when firms can start booking requests for date of service on and after June 17.

The firms are already scheduling out to July want to make sure the new system will be able to handle the influx of referrals. SOSi has extensive billing and customer service resources to help handle the influx.

The ask was made to have an in-person Roundtable meeting in the future. Karen shared that attendance has improved using virtual meetings. Also hybrid meetings are more difficult logistically and haven't worked well for us. Staff will need to look into how in-person meetings might look for future meetings.

The fees were looked at last year and the department shows it is paying more for IMEs, but some attendees would like to have a discussion about the cost for actually doing IMEs, including COLA and increased admin work. The coalition sent cost drivers before. Does the department want dollar amounts instead? Staff can work with the fee schedule team to see what would be helpful for them to see. Will have an update at the next meeting in September.

**Issue Tracking:**

<b>Provider Concerns:</b>	<b>Department Updates / Outcomes:</b>
Interpreter scheduling issues	<p><u>5/9/24:</u> SOSi is the new interpreter services provider and will roll out June 17. See details in above notes and presentation.</p> <p><u>1/11/24:</u> The interpreter scheduling platform will be changing. More information will be shared once the contract has been signed. During the user acceptance testing we are inviting two representatives from two firms to participate. This will take place in mid-February to March. Anyone interested in volunteering please send Cristy an email.</p> <p><u>9/14/23:</u> The RFQQ deadline for bids is 9/25/23. Firms should continue to report any issues to the mailbox above. The un-fulfillment rate for scheduling interpreters is about 6% right now.</p>
Legislative Bill that allowed recording of IMEs	<p><u>5/9/24:</u> The department is tracking impacts and conducted listening sessions this week for Labor, Business, and IME Providers. Update given by Karen Jost, see presentation and notes above.</p> <p><u>1/11/24:</u> Shared first four months of data. There have been relatively small amount of requests to record. These requests are mainly for</p>

Provider Concerns:	Department Updates / Outcomes:
	<p>psychiatry and hand surgery exams. IMEs with requests to record have a high cancellation rate of around 50%. This is usually due to the denial of co-recording.</p> <p>It is not non co-op when a worker declines to be co-recorded based on the way the legislation is currently written. If a worker does not give notice of intent to record until the exam, and the doctor agrees to allow recording only if they can co-record but the worker declines, then it can be considered non co-op because the notification process was not followed.</p> <p>Shared timeline for the rulemaking. A public hearing is scheduled for February 6.</p> <p><u>9/14.23</u>: Discussion on the impacts of workers recording IMEs. See 9/14/23 meeting notes. See also the FAQ document online that will be updated as new issues develop. Many workers are refusing to allow firms to co-record. The legislation was silent on this. L&amp;I staff are tracking cancellations and reschedules due to recording requests. Firms should notify workers as early as possible if it is their policy to co-record. This will reduce last minute cancellations and workers traveling or flying in only to have the exam cancelled.</p>
<p>Several Fee increase requests:</p> <ul style="list-style-type: none"> <li>• File page count should be reduced to 200 pages</li> <li>• Pay examiner travel to remote locations in-state.</li> <li>• Increase fee for additional claims in an IME</li> <li>• Pay more for hand impairment ratings. These take as much time as the psychiatrists do with the worker.</li> <li>• The Coalition would like to bring back the administrative fee codes. <ul style="list-style-type: none"> <li>• Examiners do not get paid for all their prep work if the exam is cancelled, now that the admin fees are rolled</li> </ul> </li> </ul>	<p><u>5/9/24</u>: HPPM will update their analysis and present at Sept 19 Roundtable meeting.</p> <p><u>1/11/24</u>: Troy presented department analysis of IME reimbursement since the fee updates in 2022. The data reviewed shows that around 77% of files are 400 pages or less. The total dollars paid for IMEs continues to increase while the number of exams goes down. The data analysis supports maintaining the current policy of 400 pages or less being bundled into the exam fee. See presentation slides</p> <p><u>9/14/23</u>: There is a new code, Q3014 that can be billed with telemedicine in some cases. See explanation above under Telemed or in</p>

Provider Concerns:	Department Updates / Outcomes:
<p>into the exam fee.</p>	<p>MARFS under updates and corrections. Dr. Farokhi is working on a project to determine file size and time spent reviewing files. She gave an update at this meeting.</p> <p><u>5/4/23</u>: Update</p> <ul style="list-style-type: none"> <li>• HPPM shared the findings of their review showing the department paid more money for fewer IMEs since the July, 2022 fee schedule updates. Dr. Farokhi will look at the page count issue and make a recommendation to Karen.</li> <li>• There will not be any more fee updates in the July MARFS other than the COLA increase.</li> <li>• There are no added fees related to the IME recording legislation. The worker is responsible for the cost of recording and they can use their phone to record.</li> </ul>
<p>High rate of IME reschedules, what is the root cause?</p>	<p><u>5/9/24</u>: Karen presented impact analysis of recording rule including rescheduling data which showed higher reschedule rates for exams where recording is requested.</p> <p><u>9/14/23</u>: The scheduling unit is continuing to manually track reasons for reschedules. Also, new reasons were added to the scheduling system, so we can better track and share data in the future.</p> <p><u>5/4/23</u>: Scheduling unit is beginning to track reasons for reschedules but it is a manual process. They will share data once it is available.</p>

**NEXT IME ROUNDTABLE MEETINGS**

**Thursday, September 19, 2024 – 9:30 am – noon – Location: TBD**

**Thursday, January 16, 2025 – 9:30 am – noon – Location: TBD**