

Industrial Insurance Medical Advisory Committee Meeting

Quarterly Meeting Minutes for **01/27/2022**

Prepared by: Molly Dutton, ONC

IIMAC Members Present

Andrew Friedman (Chair)
Kirk Harmon (Vice-chair)
Jiho Bryson
Greg Carter
Mike Codsi
Laurie Gwerder
Monica Haines
Robert (Bob) Lang
Jean-Christophe (JC) Leveque
Linda Seaman
Stephen Thielke

IIMAC Members Absent

Chris Howe
Louis Lim

L&I Staff and Presenters

Suzyn Daniel- L&I
Diana Drylie- L&I
Jason Fodeman- L&I
Deb Fulton-Kehoe- UW
Lee Glass- L&I
Zach Gray- L&I
Jennine Griffo- L&I
Karen Jost- L&I
Vickie Kennedy- L&I
Megon Lemon- L&I
Joel McCullough- L&I

Jason McGrew- L&I
Tiffany Meeks- L&I
Shannon Pitts- L&I
Emily Stinson- L&I
Kim Wallace- L&I
Cheri Ward- L&I
Morgan Young- L&I

Public Attendees

Tricia Daniel- WSIA Medical Rep
Sheryl Divina
Dr. Harris- PRC
Bobbi Meins
Regine Neiders
M. Sanders
Terri Smith-Weller

I. Welcome, Ask for Public Comments, and Introductions (Andrew Friedman)

*Call to order at 1:00 pm

^^Quorum present

II. Safety Tips (Andrew Friedman)

Winter travel safety review: To prevent freezing in cold weather, it's important to use four season wiper fluid.

III. Approve Minutes (Andrew Friedman) From 10/27/2021

*First motion: Stephen Thielke

*Second motion: JC Leveque

^^No opposed/all approved

IV. Summary from ACHIEv (Kim Wallace)

Summary:

ACHIEv highlights reviewed. See formal minutes for more detail.

V. MLT Pilot (Zach Gray, Morgan Young)

Summary:

L&I has discontinued utilization review in the MLT pilot. Important points:

- 16 behavioral health visit maximum per claim
- No prior authorization for MLT visits is required
- No Utilization Review is required

This change is intended to reduce delays in care and improve access to ongoing services. Utilization of mental health providers went up significantly in 2020-2021 from the previous biennium. Access to MLTs appears to have increased visits in rural areas. Telehealth services became more widely available due to the COVID pandemic. Telehealth service trends increased significantly in 2020; the 2021 trend decreased slightly. Future research will include reviewing barriers and soliciting feedback from participants. Findings and recommendations (current and future) will be used to improve enrollment and participation of both workers and MLTs.

VI. Clinical Foundations of Workers' Compensation (Jason Fodeman)

Summary:

The program is designed to provide providers with clinical background and education on workers' compensation. Currently, scoping sessions are underway to review the assumptions/parameters for the project, determine the emphasized content areas, and ensure alignment and coordination with other L&I services. Vision and mission focus on safety, occupational best practices, and numerous strategic objectives pertaining to patient safety, outcomes, staff satisfaction, and work resources/support. Next steps involve choosing content areas, best delivery mechanism, and how to raise awareness about this and other offerings. Suggestions include: 1) IIMAC members contribute to existing resources (e.g. PowerPoint® presentations) to create a compendium of resource information for the community, 2) considering CME topics for a fee vs. free, and 3) consider resources specifically designed for new workers' compensation providers, potentially to help entice new providers into the field.

VII. Telehealth Update (Megan Lemon)

Summary:

The telehealth policy drafts are finalized; internal review is pending. Audio-only visits will not be addressed in this update (a policy does already exist). Weight loss management maintains an in-person requirement. Provider-to-provider and “store-and-forward [ability to send pictures]” is under review this year. Policies coming soon: PT, OT, chiropractic, SLP, naturopaths, APFs, ROA, 60 day and 120 day reports, brain injury rehabilitation, and SIMP. Mental health policy will also be updated and will include decisions about audio-only visits.

VIII. Telehealth Evaluation (Deborah Fulton-Kehoe)

Summary:

Telehealth for L&I refers to two-way video visits. Previous and current data claim were analyzed for trends in telehealth usage and patient care impact. Prior to the COVID pandemic, video and phone visits were <1% of all visits. An abrupt increase started immediately after the pandemic, then slowly tapered down, and now remains stable. This was most notable with psychotherapy – telehealth visits went from ~1% to ~80%. Trend data revealed a significant difference between telehealth usage and type of claim (medical-only versus time loss). Gender was a factor. More female patients utilized telehealth than males. Patients with dependents used twice as many telehealth visits than those with no dependents. Type of injury was a factor as was initial versus follow-up visit. About 64% of workers surveyed had previous in-person visits with their providers; 6% of telehealth bills were for new visits. Use of telehealth was positively related to wage; as wage increases so does use of telehealth. A county’s lack of broadband reduced use of telehealth. There were so many variables related to cost of care and use of telehealth, it is not recommended to compare. The vast majority of injured workers were satisfied with telehealth (80-90%). Females indicated wanting telehealth visits to continue after the pandemic more so than males. Patient satisfaction in regards to telehealth was largely popular across all variables. Satisfaction rates increased with increased levels of education.

Providers were also very satisfied. Most providers planned to continue using telehealth after pandemic restrictions ease. Technical issues were usually minor and easy to work around. More data analysis of variables (gender, age, race, level of education, etc.) is ongoing.

IX. Updates:

COVID-19 (Cheri Ward)

COVID claims through December 2021 totaled >10,000 with state fund being >6000. Cases are currently increasing, consistent with the newest variant trends. The majority of the new cases are frontline healthcare workers, covered under the “Presumptive Coverage” statute. This coverage may also be part of the increased rate. The majority of claims are either for “time-loss during quarantine” or medical-only. Long-COVID cases are handled individually by agency staff due to complexity -- the overall number is currently very low.

Legislative Update (Karen Jost)

- SB 5784- Psychologists as attending providers on mental-health only claims.



- HB 1763 and SB 5627 are companion bills that are related to IMEs.
 - Workers would be allowed to record their IME and would be allowed to bring in a second person to the exam that is >18 years of age.
- HB 1821 applies to health plans/carriers and allows for audio-only telemedicine.
- HB 1683 authorizes prescriptive authority for clinical psychologists (PsyD) after doing training.
- SB 5808 and HB 2004 are related to interpreter services and direct reimbursement for interpretive services if the interpreter fails to show up to the appointment.

Plans for Pain Psychologist in OMD (Kim Wallace)

The Office of the Medical Director is hoping to recruit a full-time pain psychologist (PhD). There are details to work through. We will keep the committee apprised of our progress.

Provider Education CME/CE Platform (Suzyn Daniel)

L&I has transitioned to a new learning management system with the Department of Enterprise Services for many of our provider Continuing Medical Education (CME) and Continuing Education (CE) modules. There is a new registration process. Instructions are available on the public website.

X. Farewell to Joel McCullough and Lyn McClendon

Summary:

Dr. McCullough has taken a new position out-of-state and this is his last week. He was integral in the L&I IME program. Lyn McClendon is also moving out-of-state; she was previously the manager of the Occupational Nurse Consultant unit. Her role and responsibility was significant, too.

XI. Reflections and Farewell: Honoring Vickie Kennedy

Summary:

Vickie Kennedy is retiring from her position as the Insurance Services Assistant Director after fifty years of L&I service. She will work through March 2022. Vickie's legacy includes many tremendous achievements.

Meeting adjourned at **4:46 pm**