

Worker's Compensation Advisory Committee - Subcommittee on Health Care

Meeting Notes – May12, 2013, 9 am – 12:00 pm

Department of Labor & Industries - Tukwila Service Location

Participants:

Labor: Present - Ed Wood, Karen Gude, and Sofia Aragon. Absent -John Aslakson.

Business: Present - Breen Lorenz, and John Meier by telephone. Absent - Tammie Hetrick.

BIIA: Absent - Dave Threedy

L&I: Present - Janet Peterson, Bob Mootz, and Gary Franklin. Absent - Diana Drylie

Resources:

L&I: Susan Campbell, Morgan Wear, Noha Gindy and Karen Ahrens.

Guests:

Patrick Holden- Chehalis Glass; Terri Smith-Weller, Deb Fulton-Kehoe - UW;

COHEs:

Dan Hansen - EWA COHE; Jon Reynolds, Debra Milek, Megan Crenshaw – Harborview; Jaime Nephew – Renton COHE.

Brief Summary of Activities:

- Welcome; Introductions; Safety Message; Purpose of the Day and Review of Minutes – Gary Franklin
- Harborview COHE report– Jon Reynolds and Dr. Debra Milek
- Program and COHE level reporting-Morgan Wear
- COHE Expansion RFP Update-Susan Campbell
- Activity Coaching Preliminary Review-Deb Fulton Kehoe
- Self-Insured Employers and Quality Programs – Janet Peterson
- Items From Business/Labor Advisory Board
 - Renton COHE – None requested
 - EWA COHE – Requested – John Meier
- Updates on Transition– Janet Peterson
- WCAC-HC Accomplishments– Gary Franklin
 - Messages for WCAC
 - Messages for BLAB
- Parking Lot & Adjourn

Discussion:

Introduction – Gary Franklin

- Safety Message & Purpose of the day were reviewed.
- WCAC-HC meeting minutes are posted on the web. None needing approval at this meeting. See L&I webpage for minutes: <http://www.lni.wa.gov/ClaimsIns/Providers/ProjResearchComm/OHS/WcacHcMtg>

Harborview COHE report– Jon Reynolds and Dr. Debra Milek (See slides)

Jon Reynolds and Dr. Debra Milek presented slides on Harborview COHE recent accomplishments including Harborview providers and provider training and use of occupational health best practices and health services coordination. Dr. Milek included two case studies regarding Best Practice (BP) #3, provider-employer two-way communication regarding return-to-work and BP #4, “assessment and evaluation of barriers to return-to-work.”

Jon and Dr. Milek took questions regarding ongoing training of all Harborview providers to occupational health best practices to include exposure of occupational medicine and internal medicine residents to such training. Jaime Nephew added that residency training was also done at Valley occupational medicine clinic and at Group Health occupational medicine clinic. Further discussion included the synergy between health services coordinators and attending providers regarding best practices on a case by case basis and the COHE focus on bringing up low adopters of occupational health best practices to the medium to high adoption range.

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Program and COHE level Reporting – Morgan Wear (see handouts)

- Four COHE Level Performance Measures Reports:
 - Renton COHE; E WA COHE; The Everett Clinic COHE; Harborview COHE
 - Measures include:
 - Four Best Practices Measures
 - Provider Adoption of Best Practices During the Report Period Measure
 - Operational Measures for Health Services Coordination
 - Catchment Comparison for Renton, E WA, and The Everett Clinic COHEs.
 - Definitions and methods page
- COHE Program Report May 2013 (slides) – Morgan Wear
 - Current program level measures include:
 - executive summary,
 - resolution of all non-COHE & COHE claims at 6 & 18 mo.
 - time-loss days paid, all claims: non-COHE & COHE at 6 & 18 mo.
 - time-loss days paid, TL claims: non-COHE avg TL days & COHE avg TL days at 6 & 18 mo.
 - provider adoption of COHE best practices
 - estimated ultimate accident fund + medical aid fund incurred cost per claim as of 12/31/12
 - Methods summary
- One committee member requested a graph to show % of TL between COHE and non-COHE claims in the future.

COHE Expansion RFP Update – Susan Campbell

L&I is in process with contract negotiations with the apparent successful bidders. L&I cannot discuss anything about this process until contract negotiations are final. L&I hopes to make announcement about new COHE contracts to start July 2013 by June 2013.

Progressive Goal Attainment Program (PGAP)/Activity Coaching Update: - Deb Fulton-Kehoe (slides)

PGAP or activity coaching is being piloted as a ten week program to address psychosocial issues that may arise in certain cases early in a claim. Research shows that this type of intervention can be very successful in preventing long term disability. This pilot is being done by L&I and the UW to test implementation of PGAP/Activity Coaching in Washington state.

Parameters include:

- Referral of injured worker to Activity Coaching
 - Between 5 weeks to 20 weeks of time lost from work
 - After 20 weeks of lost time, on a case by case basis
- Activity Coaching itself is a 10 week program that can be prescribed concurrently with physical therapy or other medical treatment.
- Findings of the pilot to date included no decreased pain but:
 - Increase in patient function and less sense of disability
 - Less depression
 - Less fatigue
 - Less sense of injustice and less catastrophizing
 - Less fear of re-injury

Self-Insured Employer and Quality Programs – Janet Peterson (slides)

Discussion of L&I's different Occupational Health Services (OHS) quality projects and pilots that currently or potentially will in the future impact Self-Insured Employers (SIE). All occupational health best practices pilots will be supported by the Occupational Health Management System (OHMS) which was part of the recent legislative reform package.

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Next L&I and SIE colloquium is June 7, 2013 at Bell Harbor conference center in Seattle.

- Quality Programs include:
 - COHE expansion
 - Orthopedic/Neurological surgeon's pilot
 - Functional Recovery pilot
 - Activity Coaching (PGAP)
 - Surgical Best Practices
 - Additional or emerging new best practices
 - Top Tier of the Medical Provider Network, which encompasses provider demonstrated use of best practices
- Occupational Health Management System (OHMS) will support L&I's quality programs
- Lessons learned for SIE and quality pilots
 - SIEs want to see proof of positive results before participating
 - L&I has extensive claim-specific data for state fund employers whereas each SIE has unique and multiple sets of data resources
 - Participation for both SIEs and medical providers can be resource intensive and challenging on a variety of levels.

Items from Business/Labor Advisory Board

Renton COHE – none

EWA COHE – John Meier/Ed Wood (Ed Wood deferred to John Meier this time)

- John Meier expressed his concern regarding the amount of time the COHE's are being asked to work specific claims rather than working directly with medical providers on the COHE best practices and training. He is concerned that under the current and prospective contracts the direction of COHE is more of a claims management enhancement project than a project to enhance the occupational medicine practices of participating providers.
- Communicating up: Based on the new structure approved for the upcoming COHE regional Business and Labor Advisory Boards (BLABs) and the likely smaller subgroup of business/labor representatives at the individual COHE level,
 - Subcommittee is asking what will be the reporting structure -
 - From the COHE level subgroup to the regional BLAB?
 - E WA COHE is likely to adopt a COHE subgroup structure of two business and two labor members subgroup at the COHE level
 - E WA COHE wants to suggest other COHEs consider this organization as well
 - From the regional level BLAB to the larger advisory committee to L&I?
 - Larger advisory committee to L&I yet to be organized
 - Likely a blend of the current Provider Network Advisory Group
 - Blend of undetermined number of business and labor representatives
 1. Who will appoint the business and labor representatives to this group?
 2. Will L&I consider including at least one business and one labor appointee who had formally served on the WCAC-HC committee?
 - Subcommittee member is asking whether regional BLAB by-laws will be part of new COHE contracts? Answer was that requirement of regional BLABs is in the contract but a charter will be developed at first few meetings by regional advisory board itself.

Communication Agreements – Gary Franklin

- Messages for WCAC: Sofia Aragon is new to WCAC. She request that L&I report more often to WCAC about health outcome information because it is lacking at that advisory board level.
- Messages for COHE BLABs: none

Update on Transition – Janet Peterson

Workers' Compensation Advisory Committee (WCAC) established the Workers' Compensation Advisory Committee-health

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Care subcommittee (WCAC-HC) which oversaw the creation of Centers of Occupational Health and Education (COHE) pilots to program.

- WCAC → WCAC-HC
- Statute → PNAG
- WCAC → consolidate PNAG to include business and labor

L&I will:

1. Bring new organizational model for advisory committee to blend former PNAG with business and labor representatives back to WCAC for approval
 - Design of newly modeled advisory committee
 - Scope of advisory committee to include all occupational health quality projects at L&I
 - Members to include provider, business and labor representatives
 - Names of members
2. No date for this WCAC meeting yet
 - Fall/winter 2013
 - Winter/spring 2014
3. All WCAC-HC members will be invited to attend 1st meeting (of newly organized advisory committee - see #1 above)
 - No date yet for joint meeting of new advisory committee and WCAC-HC former members
 - Knowledge transfer to newly formed group

Ed Wood suggested that L&I consider or make formal request of WCAC to appoint one business and one labor representative from WCAC-HC to this newly formed group.

WCAC-HC Accomplishments – Gary Franklin (slides)

Gary thanked members for their accomplishments, participation and hard work over the years.

Gary and Janet mentioned that the WCAC-HC members will be invited to a joint meeting in the late fall/winter 2013 to winter 2014 when the new advisory group is organized to be a blend of the former Provider Network Advisory Group and business and labor representatives. That first meeting will be a joint meeting to include all WCAC-HC members. No date has been set for that meeting yet.

Subcommittee member, Karen Gude, asked that Gary's slides be used to document the history of the WCAC-HC committee and to start the new blended group to include the former PNAG and business and labor representatives at the future joint meeting.

Parking Lot & Adjourn

No items. Last meeting of the WCAC-HC.