

**IME Roundtable Meeting
January 11, 2024
via zoom**

<p>Staff Participants: Azadeh Farokhi, L&I Cheri Ward, L&I Cristy Miller, L&I Dane Henegar, ATG Gary Kolonja, L&I Jen Lybbert, L&I Joann Willyerd, L&I Karen Jost, L&I Knowrasa Patrick, L&I Kristen Baldwin-Boe, L&I Melissa Dunbar, L&I Micki Kohler, L&I Mindy Stokes, L&I Nancy Adams, L&I</p>	<p>Sara Nielsen, L&I Shannon Rushing, L&I Suzy Campbell, L&I Tanya Weber, L&I Teri Baughman, L&I Troy Parks, L&I</p> <p>Participants: Adam Coberly Aimee Borrego Carolyn Logue Chelsea Stockner Chris Schauble Jamie Lelone Kayla McCain Kristin McCoy</p>	<p>Mat Nguyen Rachel Faber Robert St Thomas Tracy Fochtman</p> <p>Craig Smith, MD Eugene Toomey, MD Frederick Montgomery, MD Gerald Broock, MD James Hazel, MD Luis Pary, MD S. Daniel Seltzer, MD Steven Elerding, MD Sushil Sethi, 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 stretch breaks. Stretching reduces fatigue by increasing the blood supply to muscles. It can also prevent muscle strain injuries and improves posture. Some stretches were shared.

Accountability Log Review– Troy Parks

Troy reviewed the accountability log. The pending issues will be discussed in this meeting.

Program Updates:

Firm Contact Info for Workers – Kristen Baldwin-Boe

Kristen reached out to the firms to obtain their best contact information for workers to notify of their intent to record. Each firm provided an email address for this purpose as well as phone and fax numbers. This contact information is posted online under the additional resources tab on the IME webpage. The future plan is to include firm contact information with the appointment letter that is sent to workers. Staff are hoping this helps eliminates notification letters being sent to unstaffed exam sites.

MEH Updated July 1 – Kristen Baldwin-Boe

Staff are beginning to review the *Medical Examiners’ Handbook* for July 2024 updates. Any suggestions for updates or clarification can be sent to Kristen or Melissa.

Worker Exit Survey – Troy Parks

There were some technical complications with this exit survey so the launch has been postponed.

Examiner Stats:

Exit and Retention Surveys – Troy Parks

In 2023 there were 5 responses to the examiner exit survey. The reasons examiners listed for leaving were having to maintain their board certification, the recording law, poorly staffed firms, and insufficient pay. Interpreter accessibility was also identified as a concern.

In 2023 there were 7 responses received to the examiner retention survey. The average satisfaction rating was 6.6 out of 10. Some comments received as ways to help examiners improve their score were better adjudication of worker conditions, and accept examiner MMI determinations. Other suggestions include L&I efficiencies around faster turnaround on assignment letters and getting records, removal of unnecessary documents sent to review, and better pay and aligning with other payers.

Dr. Toomey noted that the cost of board recertification has increased. Examiners have to pay yearly dues, plus pay to apply to take exam and then pay when they take the exam. This should be taken into account when looking at the pay for examiners.

Complaints YTD – Troy Parks

In 2023 there were a total of 127 IME complaints received. The top specialties to receive complaints were orthopedic, neurology, and psychiatry. This is to be expected because these are the top specialties scheduled. The types of complaints are grouped into four categories; report, examiner, exam, and firm. For reference, total complaints received represent less than 1% of all IMEs.

Quality Review, AP Project, Page Count Analysis – Tanya Weber & Azadeh Farokhi

Troy gave an update regarding the IME page count analysis. Staff looked at the data provided by Dr. Toomey as well as the billing data for code 1129M for fiscal year 2023 and code 1132M from fiscal year 2022. The data reviewed shows that around 77% of files are 400 pages or less. The total dollars paid continues to increase while the number of exams goes down. The data analysis supports maintaining the current policy of 400 pages and less being bundled into the exam fee.

The group expressed frustration because there is a lot more work that needs done when the page count goes above 200. Also when the page count is above 400 there is no increase in payment for a late cancel or no show. The pay amount doesn't change regardless of the work that was put in beforehand. This makes it hard for firms to schedule exams due to time it takes examiners to prepare before the day of the exam.

Tanya shared the addendum data she has reviewed. The non-billable addendums for orthopedists was compared to the non-billable addendum data for other specialties. The orthopedists were slightly higher. This is due to many different reasons including the complexity of the exams. The billable addendum data for self-insured IMEs was also reviewed.

Tanya also presented the billable addendum data comparing orthopedists and all other specialties. The amounts paid and numbers completed for orthopedists was slightly higher than the other specialties, similar to the non-billable addendums.

The question was asked if the page count for addendums been addressed. Several comments were made about addendums with large amounts of records being sent. Some attendees have had several requests that contained 200+ pages plus a new imaging to review. Some suggested these addendums should really be more of a record review instead of just an addendum. In most of these cases the records were not available at the time of the IME. This happens more with SI claims than with State Fund.

If you receive an inappropriate request for state fund, you may contact Nancy Adams to take a look at and address. Claim managers are trained not to request and addendum after 6 months post IME.

Interpreter Services

Update & User Testers – Cristy Miller

Cristy gave an update regarding the pending interpreter contract solicitation that is in process. Some of the system improvements include on-demand and prescheduled in-person, over-the-phone, and video interpretation services all in the same contract. There will be hands-on oversight of interpretation services, customer service, and technical assistance. The procurement process is not complete so they are not able to share any specifics yet. Questions can be sent to Cristy.

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.

All issues, complaints, and feedback are still being tracked. Please contact Cristy with current issues.

There were changes made to the contract which include response times. The entire interpreter scheduling platform will be changing. More information will be shared once the contract has been signed. The current contractor is still being used and any issues that arise will be worked through.

The hope with the new system is to have more interpreters available.

IME Recording Impacts

Update, Rulemaking Timeline, Examiner Pool Update – Nancy Adams, Jen Lybbert, Troy Parks

There is about four months of data since implementation of SHB 1068. The number of reschedules has remained stable. There has been only a small amount of requests to record. These requests are mainly for psychiatry and hand surgery exams. IMEs with requests to record have a high cancellation rate of around 50%.

A chart was shared comparing the total IMEs requested and the percent of IMEs canceled. The lowest rate was about 6% with the high being about 9%. The highest fluctuation was in July 2023 when the recording bill went into effect. This data is for state fund exams only.

IMEs with a request to record do have a higher cancel rate however it is not just the request to record that causes a cancellation. It is usually in addition to the denial of co-recording.

Psychiatry and hand surgeon specialties have the highest cancellation rate. Hand surgery rates could be skewed due to a smaller number of those exams requested. Orthopedic and neurology are the most typical based on usage.

It's not considered 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 still be recorded 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.

Suzy went over the current timeline for the rulemaking timeline. A public hearing is scheduled for February 6. This will be a hybrid meeting. The projected adoption and effective dates were also shared.

Troy shared the examiner pool data. The top specialties have increased slightly. There has been a slight fluctuation in the total number of approved examiners. There had been 356 approved examiners at end of 2022. Now there are 332 approved examiners.

Karen wanted to acknowledge the firms work on recruiting and training new examiners to increase the examiner pool.

Claims & Scheduling Units Trends:

Claims – Nancy Adams

Nancy gave a quick update from claims. They are working on getting Claim Managers trained regarding the recording bill. Firms should send any inappropriate addendum requests to Nancy.

Self-Insurance –LaNae Lien

If there are any issues on SI claims, firms can contact LaNae Lien. Firms should first try to work with the employer.

Scheduling – Shannon Rushing

Shannon shared some scheduling data. The number of referrals per fiscal year 2022-2024. The number of referrals have stayed fairly consistent. The number of referrals that the schedulers work was also shared.

There currently is no way to track or display which examiners are willing to be recorded.

Q&A – Open Discussion Round Robin – Group

One examiner asked about the reasoning for having multiple specialties for an exam when one can answer all the questions. This depends on the accepted conditions and the questions being asked. If there are questions or concerns about the specialties being requested, you can contact Troy or Nancy.

Most exams should have the different specialties examine the worker together whenever possible. If there is a disagreement between the examiners they can work with the firm. There is a section in the MEH about what to do if examiners disagree.

If there are questions or concerns about a panel exam, you can reach out to the Claim Manager or the Scheduling unit for clarification.

There are not many IMEs that are getting recording requests, but they do take longer and can end up cancelled. Right now there is no requirement for the recording to be done by third party. The department is not able to add any penalty for worker posting videos in a disparaging manner. That would need to be addressed in legislation.

Right now April 16 is when current contract ends for current interpreter scheduling system. Hoping to complete user acceptance testing in March. Then beginning in April have training and start booking exams once the training is complete.

There were concerns mentioned about making sure everyone in the exam room gives consent to be recorded including interpreters and chaperones. There is a note in the interpreting scheduling system stating that by accepting a referral the interpreter agrees to being recorded. If the firm knows the exam will be recorded, they should put that comment in the interpreter system to notify the interpreter.

Issue Tracking:

Provider Concerns:	Department Updates / Outcomes:
Interpreter scheduling issues	<p><u>1/12/23</u>: Department will be soliciting Requests for Quotations and Qualifications (RFQQ) for interpreter services as existing contract expires in 2024. Experiencing delays due to collective bargaining appeals.</p> <ul style="list-style-type: none"> • L&I Interpreter Services staff are more than willing to provide technical assistance for those IME firms having issues scheduling interpreters. • interpreterservices@Lni.wa.gov <p><u>5/4/23</u>: There is a shortage of interpreters nationwide. It is possible to schedule more than one appointment for the same interpreter if the appts are one after the other. This may provide incentive for an interpreter to travel to areas where there are no interpreters nearby.</p> <p><u>9/14/23</u>: The RFQQ deadline for bids is 9/25/23. Firms</p>

Provider Concerns:	Department Updates / Outcomes:
	<p>should continue to report any issues to the mailbox above. The un-fulfillment rate for scheduling interpreters is about 6% right now.</p> <p>1/11/24: 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>Legislative Bill that allowed recording of IMEs</p>	<p><u>1/12/23</u>: Department testified at hearing, expressed concerns with the bill. L&I provided a thorough bill analysis including concerns that we might lose examiners. However, we have no control over how this will end with the legislature.</p> <p><u>5/4/23</u>: Update given at May meeting. Bill passed allowing workers to record IMEs. Department has a project started to update resources with new information and to write a rule describing worker notification process. More updates coming.</p> <p>9/14.23: 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&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>1/11/24: Shared first four months of data. There have been relatively small amount of requests to record. These requests are mainly for psychiatry and hand surgery exams. IMEs with requests to record have a high</p>

Provider Concerns:	Department Updates / Outcomes:
	<p>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>Several Fee increase requests:</p> <ul style="list-style-type: none"> • File page count should be reduced to 200 pages • Pay examiner travel to remote locations in-state. • Increase fee for additional claims in an IME • Pay more for hand impairment ratings. These take as much time as the psychiatrists do with the worker. • The Coalition would like to bring back the administrative fee codes. <ul style="list-style-type: none"> • Examiners do not get paid for all their prep work if the exam is cancelled, now that the admin fees are rolled into the exam fee. 	<p><u>1/12/23</u>: IME Fee schedule was analyzed and updated in 2022.</p> <ul style="list-style-type: none"> • Fee team to re-evaluate the new IME fee policy after 6 months – analyze results of July changes in February • Testimony fees doubled effective 2023 • Examining reducing administrative burden – firm site visits scheduled <p><u>4/3/23</u>: Update will be given at May meeting.</p> <p><u>5/4/23</u>: Update</p> <ul style="list-style-type: none"> • 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. • There will not be any more fee updates in the July MARFS other than the COLA increase. • 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. <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 MARFS under updates and corrections. Dr. Farokhi is working on a project to determine file size and time spent reviewing</p>

Provider Concerns:	Department Updates / Outcomes:
	<p>files. She gave an update at this meeting.</p> <p>1/11/24: 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>High rate of IME reschedules, what is the root cause?</p>	<p><u>1/12/23</u>: Stuart has taken a new job assignment for a year. Scheduling data may be delayed until his replacement is hired.</p> <ul style="list-style-type: none"> • IME Steering Committee to evaluate this request <p><u>4/3/23</u>: Update: Submitted to IME Steering Committee as new issue.</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> <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>1/11/24: No new update</p>

NEXT IME ROUNDTABLE MEETINGS

Thursday, May 09, 2024 – 9:30 am – noon – Location: TBD

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

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