

Open Meeting  
October 22, 2013  
11:08 – 11:40 am

Commission Personnel Attending:

Sherrie Hayashi, Commissioner  
Jaceson Maughan, Deputy Commissioner  
Ron Dressler, Industrial Accidents, Division Director  
Dr. Alan Colledge, Industrial Accidents, Medical Director  
Tanya Gallego, Industrial Accidents, Deputy Director  
Sara Danielson, Administration

Public in Attendance:

Jim Knight	Paul Watts
Tim Algood	Dell Felix
Lene O'Dell	Steve Verhauner
James Zielinski	Julie Clark
Jennifer Kocour	Glenn Wright
Steve Fisher	Darren Coe
Lee Whitehead	Mark Anderson
Georgia Wily	Dawn Atkin
Dan Mills	Dennis V. Lloyd
Lance Dougher	Charles Pugh
Stu Sondrup	Maggie Karpuk by telephone
Chad Taylor	

**Open Meeting Convened:**

Commissioner Hayashi welcomed everyone.

(Slight delay – Ron Dressler not in room)

**Business Items:**

**R612-300 Workers Compensation Rules – Medical Care**

Ron Dressler provided the presentation of the rule change. He stated that this rule is simply an integration of the Medical Fee Guide/Standards and the existing rule. The Medical Fee Standards has previously been a separate document incorporated by reference into the rule. The Commission has undertaken a consolidation and harmonization of the standards and the rule and a clean-up of duplicative language in this rule change.

Ron explained that this rule change is taking place a bit out of order, in the sense that the proposed rule has already been submitted to Division of Administrative Rules, so as to meet a December 1, deadline for effective date, for the NCCI and Dept of Insurance loss cost filings. At this time, any nonsubstantive changes will be submitted

immediately, however, substantive changes will be considered by the Division and the Medical Committee and made at a later date is deemed appropriate.

Mark Anderson commented on R612-300-5G the electrophysiologic diagnostic procedures section. He stated that anyone not legal authorized to diagnose with this procedure, should not be doing the test. Ron Dressler explained that this is not a change from the current rule, because the Medical Fee Standards are incorporated into the rule by reference at this time. Dr. Colledge explained that DOPL allows for persons not legally authorized to diagnose, to perform the tests. Ron Dressler requested that this concern be submitted to him to consider.

Darren Coe commented on the section regarding a non PPO provider and the rate of pay. Dr. Colledge explained the make-up of the medical committee and stated that concerns regarding payment should be brought to their committee representative and the issue would then be brought to the committee. Ron requested this be submitted for consideration of a substantive change.

Darren Coe commented on the section regarding paying for only 1 drug screen. He stated that if the situation involves DOT; DOT requires a 5 panel drug screen and the Employer may require a 12 panel, the provider has to choose which one to perform to get paid. There should not be a change in the current process for drug screenings. Ron Dressler stated this section will be changed to be more directive in an upcoming substantive change.

Dan Mills commented R612-300-2-4 PPO 300-7B on the section regarding down coding. Ron Dressler explained that providers must be a party to a contract to be subject to the contract. (Contract law) Only the initial treatment visit can be paid at the PPO price if a non PPO provider is used when a PPO provider is required for the initial treatment.

Lene with Sedgwick requested that the authorization response times be made more consistent if possible. R300-2-4 has a 2 day, R300-5-8a has a 10 day, and R300-11B has a 5 day response time. Ron Dressler asked that this question be sent to him in an email. Dawn Atkin brought up that means of communication need to include email which is now the most prevalent means of communication used.

Dr. Anderson commented on R300-3-A2 where a non physician who fills out a 123 must have the form signed by a physician. This seems to be in conflict with the definition of physician set out previously in the rule. He suggested that a change in wording might be appropriate. Dawn Atkin stated that this came about because the definition was not originally in the rule; it was added previously to this rule.

Dr. Knight brought up that in the definitions do not include Chiropractors. Ron Dressler stated that it was the intent of the Commission to have included Chiropractors all along and that would be how the Commission interprets this section. This change would be included in the first substantive change to the rule.

Dr. Anderson commented on R300-5-A regarding payment of trigger point injections for only 3 muscles at a visit. He raised the concern that this would create a situation of multiple visits to get paid for more than 3 injections.

Ron Dressler provided his email address [rdressler@utah.gov](mailto:rdressler@utah.gov) and this phone number 801-530-6841. He requested that any comments or concerns regarding substantive changes be sent to him. He also requested that possible solutions also be provided in the change request.

The Commission has gone ahead with the rule making process. The proposed rule is anticipated to become effective November 24, 2013.

**Meeting Adjourned at 11:40 a.m.**