

REVENUE: No revenue impact

FISCAL: Minimal fiscal impact, no statement issued

Action:	Do Pass as Amended and Be Printed Engrossed
Vote:	4 - 0 - 3
Yeas:	Edwards C., Rosenbaum, Smith P., Schaufler
Nays:	0
Exc.:	Berger, Esquivel, Holvey
Prepared By:	Theresa Van Winkle, Administrator
Meeting Dates:	3/28, 4/6

WHAT THE MEASURE DOES: Changes the timeframe for physician assistants, naturopaths, podiatrists, and chiropractors to provide compensable medical treatment within Oregon's workers' compensation system. Requires that prior to providing compensable medical services or authorizing temporary disability benefits, a medical service provider must certify that they have reviewed the materials issued by the DCBS regarding the workers' compensation system, including standards for authorizing temporary disability benefits, return-to-work responsibilities and programs, and rules and procedures for medical providers. Declares an emergency, effective on passage.

ISSUES DISCUSSED:

- Background behind commencing a study regarding care providers' role in the workers' compensation system
- Outcomes and findings of the care provider study
- Rationale behind changing the timeframes
- Support from stakeholders and the Management-Labor Advisory Committee (MLAC)

EFFECT OF COMMITTEE AMENDMENT: Clarifies the intent of the measure. Adds an emergency clause, effective on passage.

BACKGROUND: HB 2756 A was brought forward by the Management-Labor Advisory Committee (MLAC) as a result of a November 2006 evaluation study regarding the role of health care providers in Oregon workers' compensation system. Currently, physicians (MD), doctors of osteopathy (DO), and oral and maxillofacial surgeons can function as attending physicians. Providers who are not designated by statute as an attending physician, such as naturopaths, podiatrists, and physician assistants, can provide compensable medical services for an injured worker without the authorization for up to 30 days from the date of the occupational injury or illness or for 12 office visits, whichever comes first. Chiropractors may function as an attending physician for any 30-day or 12-visit period within the workers' initial claim, and are considered a non-attending provider once the worker exhausts the treatment limits.

HB 2756 A allows podiatrists, naturopaths, and physician assistants to function as an attending physician for a period of 60 days from the date of the first visit on the initial claim or 18 visits, whichever comes first; and modifies the timeframe for all care providers defined as an attending physician from 30 to 60 days from the date of the first visit on the initial claim, and from 12 to 18 visits, whichever comes first. A medical service provider who is not qualified to be an attending physician may provide compensable medical service for a period of 30 days from the date of the first visit on the initial claim.

Under the measure, a chiropractor that is serving as an attending physician may authorize the payment of temporary disability for a period not to exceed 30 days from the first visit on the initial claim and a qualified attending physician (i.e. physician or osteopath) that is serving as a worker's attending physician at the time of claim closure may make findings regarding the worker's impairment for the purpose of evaluating the workers' disability. It also clarifies that a qualified attending physician (i.e. physician or osteopath) that is serving as a worker's attending physician at the time of claim closure may make findings regarding the worker's impairment for the purpose of evaluating the worker's disability. To ensure that care providers understand the statutory changes that result from HB 2756 A, the measure adds a provision which requires the Department of Consumer and Business Services to develop informational materials regarding the workers' compensation system, including standards for authorizing temporary disability benefits, return-to-work responsibilities and programs, and rules and procedures for medical providers. It further requires a medical service provider to review and certify that they have reviewed the informational materials prior to providing compensable medical services or authorizing temporary disability benefits.

4/10/2007 1:31:00 PM

This summary has not been adopted or officially endorsed by action of the committee.