SENATE BILL REPORT SB 5418

As of February 9, 2015

Title: An act relating to creating a pilot program to improve care for catastrophically injured workers.

Brief Description: Creating a pilot program to improve care for catastrophically injured workers.

Sponsors: Senators Keiser, Braun, Parlette, McAuliffe, Benton and Conway.

Brief History:

Committee Activity: Commerce & Labor: 1/30/15.

SENATE COMMITTEE ON COMMERCE & LABOR

Staff: Mac Nicholson (786-7445)

Background: The state Industrial Insurance Program provides medical and other benefits to workers who suffer a work-related injury or develop an occupational disease. Under the state's industrial insurance laws, employers must insure through the State Fund administered by the Department of Labor and Industries (L&I) or, if qualified, may self-insure. An injured worker can receive treatment for a work place injury from any qualified medical professional who is part of L&I's medical provider network.

L&I developed a catastrophic injury coordination plan to respond to catastrophically injured workers. Catastrophic injuries include burns, spinal cord injuries, amputations, brain injuries, and multiple trauma injuries. L&I conducted a gap analysis of catastrophic claims and released a report in September 2014, that included a discussion of the current health care delivery system for catastrophic injures, a review of gaps identified or perceived by staff and health care providers, and a set of potential countermeasures for consideration.

Summary of Bill: L&I must create a pilot program under which the department partners with a medical management firm for the treatment and medical management of catastrophically injured workers.

The medical firm selected by L&I must have at least ten years of experience in handling catastrophic workers compensation cases. The firm must develop a treatment plan and contract for each injured worker which identifies and guarantees an outcome for a guaranteed

Senate Bill Report - 1 - SB 5418

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price. If L&I agrees to the contract, the firm assumes responsibility for medical management and the payment of all medical costs until the outcome has been achieved. The firm must make regular status reports to L&I and work with L&I to develop and report on criteria to evaluate the pilot program.

L&I must contract with the firm for at least ten cases in 2015, and an additional ten cases per year in 2016 and 2017, unless L&I demonstrates that doing so would be harmful to the injured worker. L&I retains the authority to approve or deny any particular treatment; may establish minimum qualifications for the firm and case managers supporting the firm; and must ensure the firm has adequate providers and a network of facilities.

Injured workers in the pilot program retain the right to receive care from providers of their choice within L&I's medical provider network, and may choose to receive care from medical providers and specialists outside the network based on recommendations of the firm.

A report on the pilot program is due each December through 2017.

Appropriation: None.

Fiscal Note: Available.

Committee/Commission/Task Force Created: No.

Effective Date: Ninety days after adjournment of session in which bill is passed.

Staff Summary of Public Testimony: PRO: This bill is about improving care and outcomes for catastrophically injured workers. This will also lower costs in the system. The bill is about thoughtful innovation that has worked in a number of other states. The bill is about appropriate partnerships in the worker compensation system and accountability. This is a low-risk approach with a high probability of success.

CON: There is a general concern about the approach of the legislation. L&I currently has the flexibility to get input and other experts to provide these types of services. This bill may undercut some of the 2011 reforms with respect to Centers for Occupational Health and Medicine (COHEs), particularly the Harborview COHE. This may take some opportunity away from that organization to develop and demonstrate lessons that can be applied throughout the system.

OTHER: Improved care for catastrophically injured workers is a shared concern and goal. L&I is implementing solutions to issues identified in a gap analysis. The pilot approach needs to be transparent and should have a robust evaluation process. The bill shouldn't get in the way of what's going on at Harborview, which is a national model. There should be more clarity and definition in the bill.

Persons Testifying: PRO: Senator Keiser, prime sponsor: Jonathan Seib, Scott Goll, Bill Baker, Paradigm Outcomes, SVP.

CON: Joe Kendo, WA State Labor Council, AFL-CIO.

OTHER: Vickie Kennedy, L&I; Michael Temple, WA State Assn. for Justice.

Senate Bill Report - 3 - SB 5418