

TESTIMONY

Date: February 8, 2010

To: Chairman Robert Herkes, Committee on Consumer Protection and Commerce and fellow committee members

From: Scott McCaffrey, MD

Re: HB 2637 relating to medical and rehabilitation benefits

Honorable Chair and Members of the ^{QPC}Health Committee:

My name is Scott McCaffrey and I serve as Chief of Staff of the Hawaii Medical Center-West. However, today I come to you as a member of the Board of Advisors of the Hawaii Injured Workers Alliance. My specialty is Emergency, Occupational and Rehabilitative Medicine with over 24 years of clinical experience.

I urge you to support the measure before you today and any other bills this session that impact patient access to care and our island's physicians' ability to practice the skills they have been trained so thoroughly to provide.

The ability to expediently and accurately an injury or illness should be an incontrovertible right of all licensed physicians. However, in this state that ability is frequently thwarted by payers who undermine treating doctor's efforts using tactics such as "denial pending investigation", "denial pending IME" and sometimes simply silence and non-response to doctors' efforts to clarify an injured workers condition.

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Though done in the name of “cost control” and “utilization management” these efforts put the patient in a state of medicolegal “limbo” by undermining the treating doctors’ abilities to clarify the patient’s condition and efficiently focus available treatments on the etiology of the condition. Delaying the treating Primary Care Providers’ (PCP) diagnostic workup is detrimental to care efficiency causing delays in targeted treatment of the disorder often allowing the disease or injury to deteriorate, forces the patient to seek legal council leading to costly litigation, and, most importantly, adds a additional psychological burden and stress to legitimately injured citizens already suffering from pain, loss of function and financial setback.

These negative consequences, aside from being morally at question, are antithetic to effective care and undermine the WC System efficiencies we, at the Hawaii Injured Workers Alliance, seek to restore. They also serve as deterrents to many of our community's physicians who are currently boycotting our workers compensation system by simply refusing to see or treat anyone who gets hurt at or ill from employment. This raises addition practical and moral question regarding access to care for Hawaii’s citizens since, most adult’s who experience significant injury do so at the places they are most active—the work place.

By passing the measure before you will be sending a message to both doctor and injured workers that they will be better protected and cared for by safety-net the Hawaii Workers Compensation System was designed to be.

Mahalo nui loa,

Scott McCaffrey, MD
Emergency, Occupational and Rehabilitative Medicine