

TESTIMONY

Date: February 22, 2010

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

From: Ronald L. Barozzi, PhD, PsyD

RE: HB 2637: Medical and Rehabilitation Benefits

LATE TESTIMONY

Honorable Chair and Members of the Health Committee:

My name is Ron Barozzi. I am a licensed clinical psychologist and have specialized in rehabilitation psychology for Hawaii's injured workers for the past 20 years. I am also a member of the Hawaii Injured Workers Alliance.

I urge you to support the measure before you today and any other bills that expedite patient care for Hawaii's injured workers. Delays and denials by insurer's have become a common practice in Hawaii Workers Compensation, and needlessly prolong pain and suffering, often adding another layer of injury physically and psychologically to the original injury. I often enter the life of the injured worker because these delays and denials create a secondary psychological injury that makes physical rehabilitation that much more difficult and costly in terms of both money and human suffering.

The injured worker often feels like they are placed in a position of begging for crumbs from a table of benefits that is actually their right as injured workers. Consequently their integrity suffers, they get depressed, and sometimes give up on themselves because they are not given the care they need in a timely manner. They get the message very quickly that now that they are injured their value as people has been diminished.

Hawaii injured workers should not have to endure these insults to their integrity, and should not have to beg for what is rightly theirs by state law. Somehow Hawaii insurers have gotten away with too many delays and denials at the tragic expense of our Hawaii worker's.

HB 2637 is a step in the right direction. It would be great if fewer injured workers had to see me because of depression and anxiety brought on by delays and denials of medically necessary treatment. They would also be back to work much sooner and happier.

The Hawaii injured workers who I have treated over the years would certainly appreciate your support of HB 2637.

Thank you in advance for your support.

Respectfully,
Ronald L. Barozzi, PhD, PsyD

LINDA LINGLE
GOVERNOR



DARWIN L.D. CHING
DIRECTOR

COLLEEN Y. LaCLAIR
DEPUTY DIRECTOR

**STATE OF HAWAII
DEPARTMENT OF LABOR AND INDUSTRIAL RELATIONS**

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LATE TESTIMONY

February 22, 2010

To: The Honorable Marcus Oshiro, Chair
and Members of the House Committee on Labor and Public Employment

Date: February 22, 2010
Time: 9:00 a.m.
Place: Conference Room 309, State Capitol

From: Darwin L.D. Ching, Director
Department of Labor and Industrial Relations

Testimony in OPPOSITION

to

H.B. 2637 – Relating to Medical and Rehabilitation Benefits

I. OVERVIEW OF CURRENT PROPOSED LEGISLATION

House Bill 2637 proposes to amend Section 386-21(b), HRS, by clarifying that a physician or surgeon may conduct diagnostic testing or engage in a one-time consultation for a subspecialty diagnostic evaluation and treatment recommendations from a board certified or licensed specialist, without prior approval from the insurer or employer.

II. CURRENT LAW

The current law allows an injured employee to select any physician or surgeon who is practicing on the island where the injury was incurred to render medical care. The current Workers' Compensation Medical Fee Schedule Administrative Rules (WCMFS) allows for Consultations under Section 12-15-42 when additional medical opinions and treatment is warranted.

Under Section 12-15-42, WCMFS, Consultations may be requested by the attending physician, the injured employee, the employer, or the director whenever another physician with expertise and experience on the subject may be required. Consultation referrals must be authorized by the employer/insurance carrier (hereafter "employer") or granted upon order of the director. The employer, upon receipt of a consultation request, shall respond within seven calendar days after postmark of such request, giving authorization

or stating in writing the reason for refusal to the attending physician, the injured employee, and the director. If the employer denies the consult, the attending physician or the injured employee may request the director to review the employer's denial and a hearing will be held to approve or deny the request for consultation based on the evidence presented.

III. HOUSE BILL

The Department of Labor and Industrial Relations (Department) believes its administrative rules that allow for consultations are fair and adequate. Currently, the attending physician usually refers the injured worker for diagnostic testing and consultations when they feel it is reasonable and necessary as the injury requires. And because not all workers' compensation injuries are so severe and complex to require diagnostic testing and consultations, the Department does not feel that "a blanket approval" for diagnostic testing and a one-time consult should be allowed. Each case should be determined on a case by case basis which the current administrative rules provide. The Department, therefore, opposes the proposed amendment for the reasons cited above.

FINTestimony

From: mailinglist@capitol.hawaii.gov
Sent: Monday, February 22, 2010 3:31 PM
To: FINTestimony
Cc: standmanmasui@yahoo.com
Subject: Testimony for HB2637 on 2/22/2010 1:00:00 PM

Testimony for FIN 2/22/2010 1:00:00 PM HB2637

Conference room: 308
Testifier position: support
Testifier will be present: No
Submitted by: Stanford H. Masui
Organization: Individual
Address: 500 Ala Moana Blvd 7-400 Honolulu, HI
Phone: 782-1684
E-mail: standmanmasui@yahoo.com
Submitted on: 2/22/2010

Comments:

The current workers compensation rules allow non-medical insurance adjusters automatic veto power over treating providers requests for all matters. This bill provides a necessary referral method that ensures that there will be no undue delay in treatment. This bill will also permit some leeway for a medical doctor to immediately initiate treatment protocols. The present regulations are tilted greatly in favor of non-medical adjusters making unilateral medical decisions to the detriment of the injured worker. This bill will provide a balance to the current regulations.

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