

LATE

Testimony by:
Derrick Ishihara, PT
HB 466, Workers' Compensation
LAB Committee
Tuesday, Feb. 8, 2011
Room 309, 9:00 am



Position: Support with Comment, Page 2, lines 6-8

Chair Rhoads and Members of the House LAB Committee:

I am Derrick Ishihara, P.T., a small business owner/physical therapist and member of HAPTA's Legislative Committee and member of the Hawaii Chapter – American Physical Therapy Association (HAPTA). HAPTA represents 250-300 physical therapists and physical therapist assistants employed in hospitals, nursing homes, the Armed Forces, the Department of Education and Department of Health (DOH) systems, and private clinics throughout our community. Physical therapists work with everyone, from infants to the elderly, to restore and improve function and quality of life. We are part of the spectrum of care for Hawaii, and provide rehabilitative services for infants and children, youth, adults and the elderly. Rehabilitative services are a vital part of restoring optimum function from neuromusculoskeletal injuries and impairments.

We support the primary focus of this measure, and believe that we should collaboratively focus on the mutual and fair selection of IMEs. Such a process is needed whereby injured workers and the insurer can re-assess the medical care being given and the future needs of the injured employee in a fairer manner. Currently, the examining physician is selected by the employer/insurer. This process has led to confrontation and extreme distrust between the injured worker and the insurer.

Some opposed to this measure rightly state that a claimant dissatisfied with findings of an IME can appeal the findings in a Hearing at the DLIR. As we know, this process can take months to schedule and after the Hearing, weeks to months to receive a decision. For an injured worker in pain, even a few days without needed medical treatment can seem like an eternity. Insurers also contend that a dissatisfied claimant can always obtain their own IME and appeal the insurer's IME. However, this assumes that the claimant has enough money to hire an MD when many injured workers have their income disrupted and are not receiving lost wages because of the original IME.

Discussions with treating physicians and claimant attorneys reveal that much of the conflict between injured workers and insurers exist early in the process. Some insurers have denied initial medical care and diagnostic tests "pending investigation". We understand the insurers' need for discovery and do not object to this. However we fail to see how mutually selecting a physician to perform the IME denies them this tool. At the very least, we should use mutually selected physicians for the initial IME to get the needed medical care started and as currently practiced, a mutually selected physician to do the Permanent Partial Disability IME.

We anticipate that fair and impartial IMEs will lead to quicker resolution of cases as the injured party can get necessary care in a timely manner, potentially avoiding problems associated with chronic pain and disability. The insurer can also get slowly moving cases examined and recommendations made to resolve medical issues in a faster, more efficient manner, thus minimizing indemnity costs. Employers can get experienced employees back on the job and productive in less time. Hopefully, as the antagonistic nature of treating Workers Compensation cases improves, more qualified medical providers will return to the system and access to providers will improve for injured workers.

Page 2, lines 6-8 requires the IME doctor selected "...shall examine the employee within thirty calendar days of selection or appointment." We note that this might be a problem for physicians with busy practices who are already scheduled more than 30 days in advance.

Thank you for the opportunity to provide testimony. I can be reached at (808) 593-2610 if there are any questions.

LATE

yamashita2 ----

From: Joseph Zuiker [zuikerlw@pixi.com]
Sent: Tuesday, February 08, 2011 7:57 AM
To: LABtestimony
Subject: HB 466 - Strong support for Mutual Cooperation Bill.

This bill will save thousands of dollars by getting medical treatment clarified earlier and getting workers back on their jobs. That will save thousands of dollars yearly.

Fair competent second opinions when necessary. Cooperation and less costs.

Please pass this bill.