EXHIBIT 6
DATE 2/20/2015
HB 500

To: Economic Affairs Committee
RE: Written testimony regarding selection of treating physician
Date: February 25, 2014

My name is Gary Stroop and I sustained an injury to my back and lower extremities on February 28, 2012, while carrying items up a flight of stairs. The employer was insured by the Montana State Fund (MSF). I reported the injury immediately to my employer, but was not able to treat until March 2, 2012, at the Great Falls Immediate Care where I reported three episodes of incontinence over the last four days. I asked the MSF if it would authorize follow up treatment with Dr. Galvas. MSF denied my request to be treated by Dr. Galvas.

The MSF insurer's note of April 10, 2012 indicates, "IE [injured employee] said he would like to see Galvas. I told him we would refer him to a doctor but it would not be Dr. Galvas. He said Dr. Galvas is a specialist and asked if he had to get an atty to see Dr. Galvas. I told him getting an atty was his choice. The insurer is able to direct a TOC to another physician of the insurer's choice. We would be in touch and let him know who and when."

Due to the insurer's refusal to authorize and pay for medical care, I was forced to hire an attorney. On April 16, 2012, my attorney wrote Montana State Fund advising that, "I understand you have refused to allow Gary to schedule an appointment with Dr. Galvas for ongoing medical treatment. Instead, you arranged an appointment with Dr. Luckett on April 23, 2012. Please advise of the purpose of this appointment." MSF responded by letter dated April 18, 2012: "The referral to Dr. Luckett is for evaluation and further treatment of his industrial injury pursuant to Section 39-71-1011, MCA. Dr. Luckett is being designated as the PCP and will be reimbursed at 110% of the fee schedule." Dr. Luckett is a board certified orthopedic surgeon.

I then treated with Dr. Luckett and his PA, LaTray. An MRI was performed. On April 24, 2012, Dr Luckett indicated that there were no surgical issues so his recommendation was that I follow-up with a primary care physician for addressing non-operative musculoskeletal issues and no further treatment was recommended by Dr. Luckett or PA LaTray. MSF would not authorize further treatment with a primary care provider despite its doctor's recommendation. On May 22, 2012, I was released to full duty by the insurer's doctor without further treatment.

On August 3, 2012, I had to pay out of my own pocket to see Dr. Galvas to find out if there were any additional treatment options available for me because I continued to have problems that were not being addressed by the insurer's doctor. Dr Galvas diagnosed me with:

1. Lumbosacral strain secondary to lifting injury on February 28, 2012, with permanent exacerbation of previous lumbar DDD.
2. Right sacroiliac joint dysfunction secondary to lifting injury on February 28, 2012.
3. Thoracic strain secondary to lifting injury on 10/28/12, resolving.
4. Rule out lumbosacral radiculopathy versus plexopathy secondary to lifting injury on 2/28/12. A. Bowel Incontinence.
5. Non restorative sleep.
6. Depression secondary to pain and nonrestortive sleep from 1-3.

Dr Galvas recommended an EMG/nerve conduction study of my right lower extremity and further indicated I was not at MMI. MSF refused to authorize the EMG.

On August 3, 2012, my attorney contacted PA LaTray and asked whether he agreed to defer care over to Dr. Galvas. PA LaTray agreed to the referral to Dr. Galvas. In September, I requested MSF authorize PA LaTray's referral to Dr. Galvas and authorize the requested EMG. Again, the EMG was not authorized by MSF. Nevertheless, I underwent the EMG on August 22, 2012, performed by Dr. Hinde. The EMG findings objectively documented right L5 and S1 radiculopathies never diagnosed by the insurer's doctors. On September 20, 2012, Dr. Galvas noted I continued to complain of numbness and weakness and therefore referred me for L5 and S1 nerve root blocks. MSF denied the request on September 21, 2012, because neither Dr. Galvas nor Dr. Hinde is recognized as the primary care physician on the claim. It is important to note that Dr. Galvas' recommendation for nerve root blocks would later be recommended by two additional doctors.

On September 28, 2012, my attorney again requested authorization for me to treat with Dr. Galvas noting, "As you can see, PA LaTray agrees that Gary should be referred to Dr. Galvas for further care. His response also indicates he is deferring MMI to Dr. Galvas. Please authorize this referral. Additionally, I understand Gary has nerve testing scheduled on October 4, 2012, based on Dr. Galvas' recommendations. Please authorize this testing and the referral to Dr. Galvas."

On October 2, 2012, Paula Vidrine of MSF advised:

> Montana State Fund is not authorizing a change in treating physician to Dr. Galvas nor is the testing scheduled for October 4, 2012. Our records reflect Mr. Stroop was treating with Dr. Luckett and PA Eldon LaTray at Great Falls Clinic. Based on recent reports received from Dr. Hinde and Dr. Galvas, Mr. Stroop changed treating physicians without obtaining prior authorization from our office. A referral is being made for Mr. Stroop to undergo an independent medical evaluation. Mr. Stroop and your office will be advised of the arrangements when made. If further treatment is indicated as a result of the industrial injury a treating physician will be designated by Montana State Fund.

The MSF sent me to an Insurer's Medical Evaluation (IME) with Dr. Schumpert on October 26, 2012. Dr. Schumpert conducted the examination and concluded that I was not at MMI and recommended **the same injections Dr.Galvas previously tried to get approved on September 20, 2012.** MSF refused to authorize the treatment recommended by Dr. Schumpert (and Dr. Galvas).

Still refusing to authorize Dr. Galvas as treating physician, on December 17, 2012, MSF sent my medical records to Dr. Oriente for transfer of care. On December 19, 2012, my attorney asked Dr. Oriente whether he was willing to assume the role of treating physician pursuant to §

39-71-1101 and Dr. Oriente declined to do so. MSF still refused to authorize treatment with Dr. Galvas.

On January 29, 2013, MSF sent me to Dr. Vanichkachorn. I was not able to get an appointment to see Dr. Vanichkachorn until February 2013. I had basically gone without any treatment since my injury despite Dr. Galvas' and Dr. Schumpert's recommended injections. After treating two months with Dr. Vanichkachorn, on April 24, 2013, the doctor selected by the MSF recommended trial facet injections and SI joint injections stating, **"At this time I will refer him back to Dr. Galvas for consideration of these injections."**

Although the treating physician selected by MSF referred me back to Dr. Galvas in April, by June 2013, the injections now recommended by three doctors (Dr. Galvas, Dr. Schumpert, and Dr. Vanichkachorn) were still not approved. Finally, in July 2013, I underwent the injections, ten months after they were first recommended by Dr. Galvas and a year and a half after my injury.

The delay in my care was directly related to the insurer's refusal to authorize Dr. Galvas as treating physician. This refusal by the insurer inexcusably delayed my treatment and ultimately pushed me to hire an attorney so that he could get appropriate medical care. Throughout this time, I tried to keep working at my job, but due to lack of treatment ultimately was forced to quit in July 2013. Dr. Galvas has commented that the delay in treatment may have permanently damaged my chances of recovery.

I am happy to discuss the disastrous effect of allowing the insurer to interfere with medical care and chose the treating physician and can be reached at 406-781-6753.

Gary L Stroop

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