



2800 Tenth Avenue North  
PO Box 37000  
Billings, MT 59107-7000

August 18, 2010

The Honorable Senator Jim Keane, Chair  
Economic Affairs Interim Committee  
61<sup>st</sup> Montana Legislature  
PO Box 201706  
Helena, MT 59620-3064

RE: Labor Management Advisory Council (LMAC) Proposal

Dear Senator Keane:

Billings Clinic is the largest workers' compensation medical provider in Montana. We currently employ two board certified occupational medicine physicians with 30 years of combined experience in assessing and treating individuals with work related illness or injury, as well as medical consultative services to employers. They have been working administratively to address cost containment and expenditures in the workers' compensation system. It is our philosophy and strength to utilize medically appropriate work restrictions and if the worker is able and the employer can accommodate, to support early return to work.

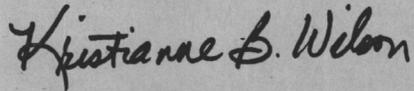
We find the LMAC proposal to be very troubling. At the heart of the Workers' Compensation system is the goal of treating injured employees and returning them to their time of injury position if possible. What this rate cut implies is that the integral services provided by physicians, physician assistants, nurse practitioners, chiropractors, and physical and occupational therapist is not a valued part of the equation. There are multiple layers of bureaucracy in the system that control and direct how we are able to practice and the tests and treatment we provide yet contribute nothing to the medical care of the patient and their well-being. We ask if these processes have been evaluated by those involved for cost containment purposes. What has been done to address expenditures in the workers' compensation system?

Dr. John Petrisko, Department Chair, Occupational Medicine at Billings Clinic has been actively involved in the development process of treatment guidelines for Workers' Compensation cases. It is the goal that these guidelines will expedite the testing and treatment procedures once criteria have been met, eliminating the need for the pre-approval process. Therefore, it takes responsibility and workload away from the insurers and places that workload on the physician to document and look-up the relevant information in the guidelines. More provider time is involved, yet should these provider rate reductions occur, less compensation would be realized. It seems counter productive to have invested valuable time to develop these treatment guidelines, which will expedite the process of patient receiving needed, evidence-based care, to then be faced with physician services reimbursement reductions approaching \$400,000 a year for Billings Clinic.

This proposal does not show that the system values the services provided to injured employees by medical providers who are the only ones able to treat injured patients. Employers pay for these services through premiums.

Billings Clinic can foresee longer wait times for treatment of Workers' Compensation claims especially in regards to specialty services. For those providers who may only see a small number of Workers' Compensation claims, we can envision them opting out of treating those patients entirely. The overall effect will be to decrease the level of service provided to those who are injured while on the job. This will lead to lost productivity and have very real economic consequences for employers in the state of Montana as well as the state's overall economy.

Sincerely,

A handwritten signature in cursive script that reads "Kristianne B. Wilson".

Kristianne B. Wilson  
Vice President  
Strategic Development