

Medical Advisory Committee

November 9, 2017

Tennessee Room
220 French Landing Drive
Nashville, TN. 37243

Members:

Rob Behnke, Cracker Barrel
Misty D. Williams, Travelers
Lisa Hartman, RN, AFL-CIO
Ginny Howard, Zurich
David Tutor, MD, Occupational Medicine
Chair
John Brophy, MD, Neurosurgery
James G. Kyser, MD, Psychiatry
James Talmage, MD, Assistant Medical Director
Jeff Hazlewood, MD, PM&R, Pain Management
Lisa Bellner, MD, PM&R Pain Management
Cerisia Cummings, DO, Bridgestone
Robert Snyder, MD, Medical Director
Richard Murrell, JD, BWC
Chris Acuff, PhD, BWC
Suzy Douglas, RN, BWC
Jennifer Schneider, BWC
Jasmine Martin, BWC
Suzanne Gaines, BWC

Guests:

Yarnell Beatty, Tennessee Medical Association
Lou Alsobrooks, Smith Harris Carr
Adam Jaynes, MNA GR
Desiree Anderson, Schmidt Government Solutions
Everett Sinor, Brentwood Services
David Dipietro, Purdue
David Price, Prium
Judy Bobbitt, Tennessee Orthopedic Alliance

Via telephone:

Ken Eichler, VP, ODG-MCG
Sushil Mankani, MD, Liberty Mutual
Tina Lane, Mitchell

Call to Order

The meeting was called to order at 1:05 PM by the Chair, Dr. Tutor.

Quorum

A quorum was confirmed as present (1/3 of the members needed, 12/16 members present).

Approval of Minutes

Minutes of 8/24/2017 meeting accepted and approved. Later Lisa Hartman added her name to the attendee list.

Old Business

SFSG: The Supplemental Formulary Study Group Advisory draft that was presented at the last meeting was reviewed. No changes made to the document but there was discussion of the problems patients with chronic pain had with the 30 day law when they ran out of their medication on a holiday or weekend. Dr. Snyder is going to research specifics and report at the next meeting.

Dr. Tutor motioned to present it to Abbie Hudgens. This motion was seconded and approved by unanimous vote.

RED: Dr. Snyder gave the Requests for Expedited Determination since its inception in September 1, 2016 to March 1, 2017: 4 ordered, 4 closed. For March 1, 2017 to November 1, 2017: 6 ordered, 4 closed. He reviewed the findings and the difficulties that have been experienced.

Amended Rules: Dr. Snyder discussed the "Protz" case from Pennsylvania and its potential impact on Tennessee. Raised in that case was the issue of the 6th Edition to the Guides®. Our legislature has adequately addressed that. Another issue raised was whether there was adequate review of delegated rules or statutes to outside (private) entities. To provide review of updates, two amendments (0800-02-25-.03, Treatment Guidelines and 0800-02-25-.04, Drug Formulary) were sent to the Attorney General's Office. These were approved and will on the consent calendar for the Gov/Ops Committee for January, 2018. They do not require a public hearing. The amendments task the Medical Director to bring updates to the treatment guidelines and to the formulary to the Medical Advisory Committee for their review and recommendation to the Administrator annually or semi-annually if necessary. The first presentation of those will be at the January meeting.

Announcements:

Relief retreats will be coming in approximately March of 2018. They will cost \$20,000 per patient. There has been success with these programs in maintaining functional gains and staying off opioids. Patients are selected for this treatment based on the likelihood of successfully completing program. Dr. Hazlewood pointed out that it depended a lot on the environment to which the patient would be returning. The doctor cannot rehabilitate the patient's entire world; the family also needs to be included in the process. The insurers commented on their processes and the importance of patient selection. Measuring effectiveness and relapses remain an issue.

The price of genetic testing for medication metabolism has gone down. The testing can tell if the medication will be effective and suggest alternatives. Genetic testing shows promise in functional improvement of patient. Success of genetic testing was discussed but is not yet universally recommended for opioids.

Further Discussion:

The search for drug-free treatments alternative treatments continues. Dangers are possible in using the alternative remedies, but may compare favorably to medications. Acupuncture has been successful in treating back pain. Insurance companies are supporting this treatment. It is observed that it usually takes about four visits to see results and the relief may be long term. Caution should be used for more than twelve, unless the results can be judged by functional improvement and/or reduction in other treatments. Medical research has documented the success of acupuncture therapy.

New Business

Lumbar Fusions: The Ohio rules and pamphlet on lumbar fusions were distributed so that the committee can consider whether to strengthen our present advisory on this treatment at the next meeting.

Access to Medical Care: Dr. Snyder introduced questions for the committee going forward. How does Tennessee compare with other states concerning access to medical care? It is known that certain specialties' in some areas are very difficult to find. There may be many measures such as the insurer's ability to create a "panel", the timeliness of a first non-emergency appointment, and the patient's perception of the overall value. He asked the committee to ponder this for the next meeting.

Next Meeting:

The date was agreed: January 30, 2018, 1:00 PM

Adjournment:

The meeting was adjourned at 2:20 PM.