

MEMORANDUM

June 8, 2015

To: Management-Labor Advisory Committee

From: John Shilts, Administrator

Subject: SB 533 (2013) MCO report on “come along” providers

When enrolled in a managed care organization (MCO), an injured worker may bring their own provider to the MCO if certain conditions are met. SB 533 (2013) contained MLAC’s recommendations for changes to nurse practitioner authority and added a “come along” for chiropractors. The bill required the director to provide MLAC a report about all denied “come along” provider requests.

*656.260(5)(b) The director shall adopt by rule reporting standards for managed care organizations to report denials and terminations of the authorization of primary care physicians, chiropractic physicians and nurse practitioners who are not members of the managed care organization to provide compensable medical treatment under ORS 656.245 (5) and subsection (4)(g) of this section. **The director shall annually report to the Workers' Compensation Management-Labor Advisory Committee the information reported to the director by managed care organizations under this paragraph.***

After the bill passed, the department adopted administrative rules to specify the content of the MCO report. The annual reports must include:

1. Provider type (primary care physician, chiropractic physician, or authorized nurse practitioner) reported by geographical service area (GSA).
2. The number of workers affected, reported by provider type.
3. Date of denial or termination.
4. The specific reason(s) for each denial or termination, including:
 - a. Provider failed to meet the MCO’s credentialing standards within the last 2 years;
 - b. Provider has been previously terminated from serving as an attending physician within the last 2 years;
 - c. Treatment is not in accordance with the MCO’s service utilization process;
 - d. Provider failed to comply with the MCO’s terms and conditions after being granted come along privileges; or
 - e. Other reasons as authorized by statute or rule.

The bill took effect Jan. 1, 2014, and this year marks the first full year of data reported to the department by the MCOs. There are four MCOs operating in Oregon – Kaiser, Caremark, Majoris, and Providence. Each MCO provided their report as required by the rules. Below is a summary of the reported data.

GSA summary by provider type

GSA 3 (south coast)	1 chiropractic physician
GSA 5 (Salem)	1 primary care physician 1 chiropractic physician
GSA 9 (Jackson-Josephine)	1 primary care physician
GSA 11 (north coast)	1 primary care physician (four separate instances)
GSA 12 (Klamath Falls)	1 primary care physician 1 chiropractic physician
GSA 13 (Pendleton)	1 primary care physician

Number of workers impacted by provider type

3 workers - Chiropractic physician
8 workers - Primary care physician

Reasons for denial or termination

4 – Provider failed to meet MCO credentialing standards
3 – Provider previously terminated from serving as attending physician
2 – Provider failed to comply with MCO terms and conditions after come along granted
2 – Treatment not in accordance with MCO service utilization process