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May 2, 2017

Dear Ms. Kurth:

It has come to my attention that there is a proposal before the Industrial Commission of Arizona to change the 2017/2018 Physicians' and Pharmaceutical fee schedule. Please consider this letter as comments and documentation in opposition of this proposal.

Being involved in the conversations around controlling health care costs for years, the general agreement is that access to quality care is a priority for all parties involved. No one wants to admit that limiting access to care, or providing bad care, although less expensive, is a solution. Third party administrators and messenger-model networks get involved, and everyone is clamoring for their piece of the pie in this complex value chain of health services. Yet, moreover, when the ink hits the paper, more and more we see that those who suffer from reform the most are patients and providers. Providers can't financially support their practices, and drop out of contract. Patients have fewer options, and are relegated to low-cost, volume-based care, even if it means they have to travel beyond reason to get it.

It appears that in pursuing a fee schedule reduction, you are merely punishing the entire chain, rather than solving the root cause of the cost problem. So-called cost-containment networks, third party administrators, and anyone who comes in between payers and providers are always going to get "their share" without regard to true outcomes (return to work, patient function, etc.) that high quality providers can attain. These entities do not have the end result in mind that truly matters in returning a worker back to production—economic progress. These entities are furthering the struggle of a provider to balance their own rising costs with the provision of great, effective, and valuable care. Hamstringing the clinical community (physicians, surgeons, and all providers) with a pay cut is short sighted and does not make economic sense.

If you need to control costs, think big, and think what is best for the State of Arizona in a strong economy. Support the providers—the physicians and surgeons, and all who are clinically involved in returning each injured worker back to the workforce. Do not cut the fee schedule. Allow the physicians to have a voice in the market so that non-value added entities can be naturally forced out. Let them compete on the value of service they provide. A thriving community of healthcare providers means options and better outcomes for all.

Sincerely,

*Julianne Brandt, PT, MBA*

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