

Jaqueline Kurth
Medical Resource Office
Industrial Commission of Arizona
800 W. Washington Ave, Suite 305
Phoenix, AZ 85007

Dear Ms. Kurth:

I am writing to you at this time to address two issues that have come to my attention in greater extremes recently:

First, the conversion factor proposal. As it stands this proposal is only going to inhibit quality care by limiting the amount of quality surgeons that work with workers compensation patients. The necessary work that is required in the treatment of workers compensation patients is significant on all sides and at these reduced payments there is no ability for small, independent specialists to survive. Without competent surgeons it is impossible for rehabilitation specialists such as myself to return these workers to the workforce at their optimum and in the shortest amount of time, only putting additional strain on the workers compensation system. In the end those that suffer the most are the workers who have fewer quality options because providers are unable to keep practices open with such limited financial benefit.

Second, are the therapy networks. As these networks have taken advantage of the providers as well as the workers compensation system by lowering the reimbursement to a level that makes it impossible for small, quality providers to survive. Although there are some networks that are transparent in their fees and the percentage that they are receiving, most are not. With transparency on fees, at least a provider does have an option to look over the contract and decide if this is a choice that is manageable or one that will force them to close their doors in the end. With organizations that are not transparent there is no disclosure and the result is seeing payments that are as much as 50% below the fee schedule which is not a situation that can be recovered from most small businesses. As the sentence in the reform proposal that states "Under no circumstances is a network permitted to retain more than 10% of the full amount paid for provided medical treatment and/or services." I think that this does begin the conversation, however does not truly provide some of the most undervalued services, such as occupational and physical therapy, with the financial reimbursement that makes the extra work in paperwork, filing, phone calls, and billing that are still required from us worth the additional resources at times. Once again, in the end most often the people to suffer the greatest are the workers who are getting subpar care due to the fact that the payment is not great enough to allow for the best practitioners to be utilized and a more quantity based system is used.

In conclusion, I am glad that the ICA is addressing some of these issues and I appreciate the ability to have a voice in the system. Something needs to be done to aid in a return to the integrity of the health system and this is one step towards allowing for the best practitioners, on all ends of the spectrum, to return to doing what they do best, healing, instead of worrying about trying to keep the doors open each and every day. The winners will be the workers which is what we are in the end all concerned about.

Sincerely ,
Andrea Dunn, PT, DPT
Arizona Sports Physical Therapy, President