

Expert Panel Meeting Summary

WEST VIRGINIA HEALTH CARE AUTHORITY QUALITY UTILIZATION ADVISORY GROUP EXPERT PANEL MEETING SUMMARY TOPIC: LOW BACK INJURY THURSDAY, FEBRUARY 17, 2000 9:00 A.M. TO 12 NOON

WELCOME AND INTRODUCTION

Louie Paterno, Board Member of the Health Care Authority, called the meeting to order at 9:05 a.m. Mr. Paterno explained that Parker Haddix, Chairman of the Health Care Authority and Chairman of the Quality Utilization Advisory Group, would be joining the meeting a little later in the morning. Introductions were completed and Mr. Paterno provided the group with a review of the QUAG Mission and Plan, and highlights of the QUAG's 1999 activities.

PRESENT

Cathy Chadwell, Dr. Jim Collins, Dr. Frank Crast, Dr. Ed Doyle, Dr. Mary Emmett, John Grey, D. Parker Haddix, Sallie Hunt, Sam Kapourales, Kenna Levendosky, Mike Madelena, Dr. Sandra Magnetti, Greg Morris, Louie Paterno, Linda Sovine, Dr. Girija Syamlal, Nancy Tolliver

Nancy Tolliver, meeting facilitator, informed the group that the meeting objectives were to educate the Health Care Authority/QUAG regarding Low Back Injury quality initiatives, to assist the Authority in identifying potential members to assist the HCA in coordinating program structure, and to identify other publicly available reports and outcome data.

Nancy Tolliver shared with the group the QUAG Implementation Plan and indicated that the meeting today would fulfill the actions identified in Phase One of the Implementation Plan.

Dr. Frank Crast, Medical Director, Workers Compensation, and Dr. Ed Doyle provided an overview of the Research Project, BACK INJURY OUTCOMES AND UTILIZATION REVIEW. Dr. Crast explained the project involves the Bureau of Employment Programs, the Office of Medical Services, Workers Compensation Division, and the West Virginia University Institute of Occupational and Environmental Health. Dr. Crast reported that WV leads in the risk factors for LBI (Low Back Injury). These risk factors include smoking, obesity, degree of lifting, socioeconomic status and sedentary lifestyle. Dr. Crast stated that 85% of workers 15 – 64 years of age will have a back injury at some time. Dr. Crast explained to the group that West Virginia Worker's Compensation through its legislatively mandated Health Care Advisory Panel developed Practice Guidelines for low back sprains and herniated lumbar discs and the

Guidelines have been distributed to Acute and Chronic Care Providers throughout the state. Dr. Crast indicated that the projects' goals are: 1) to provide the Bureau of Employment Programs and its Workers Compensation Division with information that will enable them to provide medical treatment to produce effective and cost-efficient outcomes for injured workers; 2) obtain information needed to fine-tune the application of their Treatment Guidelines; and, 3) identify optimum treatment pathways to functionally restore injured workers in the minimum amount of time.

Dr. James Collins with the National Institute of Occupational Safety and Health (NIOSH) Morgantown, WV provided an overview of the quality initiative "Best Practices Back Injury Prevention Program" in Nursing Homes. Dr. Collins stated that the purpose of the study is to measure the effectiveness of a back injury prevention program in six nursing homes. The project involves Barnes Jewish Christian Health Systems' six long-term care facilities in Missouri and Illinois. The occupation targeted for the project is Certified Nursing Assistants. Dr. Collins stated that this occupation has a high injury and illness rate that continues to rise steadily. The project utilizes an injury prevention program based on "state of the art" mechanical lifting equipment, to assist the nursing staff when transferring residents who cannot stand or walk and a training program which educates nursing staff about the use of mechanical lifting equipment and the use of proper body mechanics and assistive devices for residents who only require limited assistance. Dr. Collins stated the final report for the project is due in June 2001.

Dr. Mary Emmett, Camcare Institute's Center for Health Services and Outcomes Research, Charleston, WV discussed their initiative to improve the process of care, within an integrated delivery system, for workers with a low back injury/pain. Dr. Emmett stated the project developed and utilized a protocol of care with a common assessment tool and incorporated the Corporate Health, LBP, SF- 36 Health Status Survey.

Mike Madelena with Madelena Consulting provided an overview of CHRIS, the HCA's client centered database, which contains claims data from Worker's Comp, PEIA and Medicaid. Mr. Madelena described the data as being line item level detail for claims, containing eligibility files, history and prescription claims. He emphasized that the data are not clinical and the system supports the design to add new data.

Dr. Sandra Magnetti with the WVU Department of Community Medicine, Morgantown, WV spoke of her involvement with the BACK INJURY OUTCOMES AND UTILIZATION REVIEW project described by Dr. Crast and Dr. Doyle above. She further explained that she has access to the PEIA Wellsource data and will be using it to match to claims data, and cardiovascular and cancer risk scores taken from pre and post questionnaires. She stated they will look at PEIA and ICD-9 codes for back injury and link to the Wellsource data over a five-year scope.

Nancy Tolliver apologized to the group regarding the plan for Robert Coffield, Assistant General Counsel, West Virginia Health Care Authority, to provide an overview of the HCA's position on the PROPOSED PRIVACY RULES under the HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY ACT OF 1996 and explained that this had been inadvertently overlooked.

Ms. Tolliver directed the group to refer to their handout for this information.

Nancy Tolliver asked the group to recommend experts to assist the QUAG with Phases II through VI of the QUAG Implementation Plan in the LBI area.

ADJOURNMENT: 11:45 A.M.