Potential Designated Doctor Program Improvements

October 27, 2021

Joe McElrath, Deputy Commissioner of Business Process Mary Landrum, Director of Designated Doctor Operations

Review of designated doctor program

- Examined various areas for possible improvement to the program.
- Received initial input from designated doctors during certification training.
- Seeking additional input from all system participants for ways to improve the program.

Goals:

- Increase physician participation.
- Maintain doctor of chiropractic participation.
- Decrease administrative burden for participation in the program.

DWC Sunset Bill, House Bill 2506, 2011

- Changed selection criteria for DDs from the injured body part and the medical treatment the injured employee received to the injured body part and diagnoses.
- Required DWC to define DD qualifications, certification, training, and testing requirements and actively monitor the quality of decisions.
- DWC adopted rules in the fall of 2012.

2018 Rule Updates

- Added DD selection methodology.
- Adjusted selection process to provide a more equitable balance of musculoskeletal exam offers to physicians.
- Make minor changes to DD qualifications.

Improvements to the DD program:

- Improved quality and frequency of training.
- New certification test.
- Communicating regularly with DDs when reports can't be used at a contested case hearing (CCH).
- New performance review process.
- Sample test questions.

Survey of designated doctors at certification training

Top five areas to improve

- Reimbursement
- Testing required too often
- Training required too often
- Hassle and confusion of creating multiple certifications of maximum medical improvement (MMI) and impairment rating (IR)
- Test too difficult

Issues for Discussion

- Certification training and testing requirements
- DD qualifications
- Administrative burdens
- Billing and reimbursement

Certification Training and Testing Requirements Issues

- Travel and expense to attend required training
- Testing requirement frequency
- Complexity and length of test

Certification Training

Possible improvements: Offer comprehensive online training so doctors:

- can receive immediate feedback on their understanding of the material, and
- receive continuing medical education credit for all online courses.

Certification Testing Requirements Possible improvements:

- Decrease frequency of testing.
- Decrease length of test.
- Ensure that the test measures knowledge required for a new DD.

DD Qualifications

Issue: Lack of board-certified DDs to examine injured employees with traumatic brain injury (TBI).

- About 1,000 exams a year for 13 doctors.
- Board-certified doctor available for TBI exams less than 75% of the time.

DD Qualifications

Possible improvement:

 Evaluate whether other board-certified specialties should be able to examine injured employees with TBI.

Administrative Burdens Issues:

- Complexity of reporting may negatively impact participation in the program.
- Current reporting requirements create confusion for system participants.

Administrative Burdens

Possible improvements:

Remove the requirement for multiple certifications of MMI and IR when exam addresses MMI, IR, and extent in a single examination.

Most reports with multiple certifications are not used at a benefit review conference (BRC) or CCH because:

- o a BRC or CCH was never held; or
- o a Presiding Officer's Directive (POD) issued to obtain certification.

Administrative Burdens

Possible improvements:

- Discontinue the DWC Form-068, DD Examination Data Report.
 - Data about extent of injury not as useful as hoped, possibly due to information about accepted injuries on the DWC Form-032, Request for DD Examination
- Simplify the DWC Form-032, Request for DD Examination

Billing and Reimbursement

Issues:

- Reimbursement is the number one issue for DDs.
- Billing methodology and reimbursement amounts do not:
 - reflect the complexity of the body areas or diagnoses involved in an exam; and
 - recognize the increased effort for producing quality extentof-injury reports.
- Billing methodology:
 - could be simplified; and
 - does not clarify payment requirements for referral doctors and referrals for testing to providers not in the same workers' compensation health care network.

Billing and Reimbursement Possible improvements:

- Examine the billing methodology to reduce complexity.
- Review reimbursement rates for exams to ensure they reflect the level of effort required.

Other issues or opportunities for improvement

Virtual focus group meetings

Focus Group	Date	Time
Insurance carriers	Tuesday, November 9	1-2 p.m.
Health care providers, including DDs	Wednesday, November 10	10-11 a.m.
Injured employee representatives and OIEC	Wednesday, November 10	1-2 p.m.

For more information, send an email to:

DWCExternalRelations@tdi.texas.gov