

## Meeting minutes: Medical Service Review Board

Date: Jan. 18, 2024

Minutes prepared by: Katrina Namad

Location: Hybrid – Minnesota Room at the Department of Labor and Industry, 443 Lafayette Road N., St. Paul, MN and via Webex.

### Members present

- Elizabeth Alm, chair
- Beth Baker (remotely)
- Tammy Bredahl, alternate (remotely)
- Laura Breeher, alternate (remotely)
- Kate Daly, assistant commissioner (remotely)
- Russell Gelfman (remotely)
- Chad Griffith (remotely)
- Natalie Haefner
- Lisa Hanselman
- Arnes Huskic, alternate (remotely)
- Ceil Jung, alternate
- Chris Kramer (remotely)
- Erica Kuhlmann (remotely)
- Kimberly Olson (remotely)
- Robin Saunders Ryan (remotely)

### Members absent

- Clyde Markon
- Courtney Mitchell
- Matthew Monsein
- Mark Schulz
- Deborah Zurcher

### DLI staff members present

- April DelCastillo
- Bretta Hines
- Denise Holmes
- Chris Leifeld
- Ethan Landy
- Katrina Namad
- Emily Streier (remote)
- Lisa Wichterman

### Visitors present

- None

## Agenda items

1. **Call to order** – Chair Dr. Elizabeth Alm called the meeting to order at 4:10 p.m. Roll call was started by Katrina Namad and finished by Chris Leifeld; a quorum was met.
2. **Approval of agenda** – a motion to approve the Jan. 18 agenda as presented was made by Kim Olson and seconded by Chad Griffith. A roll call vote was taken and the motion carried.
3. **Approval of previous meeting minutes** – a motion to approve the Oct. 12 meeting minutes as presented was made by Olson and seconded by Griffith. A roll call vote was taken and the motion carried.
4. **Department of Labor and Industry (DLI) updates – Kate Daly**
  - Staff member introductions were made. Introducing themselves were April DelCastillo, Bretta Hines, Denise Holmes, Namad and Emily Streier.
  - Kate Daly said negotiations broke down between DLI and a potential medical consultant candidate, so DLI has to repost the position.
  - Daly then announced she will be leaving DLI as of Feb. 9 and said it has been an honor for her to serve as assistant commissioner at the department. She is moving to SFM as corporate counsel. She said the department is working quickly to fill the role of assistant commissioner; by the next meeting in April, there should be a new person in the role of assistant commissioner.
  - Griffith commented about the medical consultant, saying he heard the problem was malpractice insurance. He asked if the department had ever considered making this role an employee, so the malpractice insurance would then go under the state’s general budget. Daly said she could bring it up to the DLI commissioner.
5. **Post-traumatic stress disorder (PTSD) legislative study – Emily Streier**
  - Streier informed the board she is the legal analyst for the legislative PTSD study. She presented some information about the PTSD study and shared its webpage address. Legislation requires DLI to conduct a study about work-related PTSD claims and to identify systemic or regulatory changes in the workers’ compensation system to improve the experiences and outcomes of employees with work-related PTSD. It is a large-scale study that covers many aspects of PTSD. It will take several years to complete. The study report is due to the Legislature by Aug. 1, 2025.
  - The study is required to identify evidence-based methods and best practices for the early detection and treatment of PTSD. The research will include review of models for delivering mental health wellness training and employee assistance programs, treatments for PTSD and benefits related to PTSD. This includes looking at outcomes and cost considerations and identifying any programs in other jurisdictions with effective prevention and effective medical intervention for work-related PTSD. It will look at jurisdictions with a high return-to-work rate for employees with PTSD. Also, it will review the definition of PTSD in Minnesota Statutes and compare that to the definitions used in other states and jurisdictions. And

finally, it will consider the list of occupations subject to the rebuttable presumption in Minnesota Statutes.

- The study is not going to directly affect the current PTSD treatment parameters. However, based on what the study says, it may require a reexamination of those treatment parameters in the future. DLI has contracted with the Midwest Center for Occupational Health and Safety at the University of Minnesota to complete the study. The university has a great team of researchers on this project, including a consulting physician, Dr. Zeke McKinney, who is an occupational medicine physician, and also has a consulting research investigator on the mental health side, Stephanie Hooker.
- DLI is seeking feedback about the study; there is a link to the feedback form on the study webpage, which can be accessed on DLI's website. Organizations, treatment providers and individuals can submit feedback there. That feedback will be provided to the research team in the future and may be considered for purposes of the study.
- The university is working on ways to involve stakeholders in the PTSD study. They are just starting to look at the data about PTSD in Minnesota and other jurisdictions. Streier offered to come back at a later date to do an updated presentation about the study.

#### **6. Treatment parameter discussion – Lisa Wichterman**

- Lisa Wichterman started the discussion about treatment parameter review. Despite not having a medical consultant, DLI feels a need to move forward with updating the treatment parameters. One option would be to continue the work on the low back and another option is injections.
- Spinal cord stimulators were brought up by Beth Baker, who said they are outdated and not very helpful at all. Wichterman said they fall under low back treatment parameters and were last updated in 2013.
- Ethan Landy mentioned the language regarding injections is the same for the low back as other parts of the back, so if the low back is addressed, the injections would be addressed as well. Russell Gelfman said he agreed with Landy, injections are the same no matter which part of the back you do them in. Gelfman questioned whether it would be best to rewrite and join those sections, or to put limits on injections.
- Olson wanted to discuss what "improvement" means – subjective, objective and functional – and to give them better definitions. Olson also requested to define what "functional status" really means; several members agreed. Gelfman then brought up the difference between the chronic and acute stages, and Robin Saunders Ryan added there's a difference between a subjective report of how the patient is functioning versus a functional test that a provider does. Olson said we need to deal with the acute objective, subjective and functional, and then the chronic objective, subjective and functional, because they are two different areas.
- In the end, Wichterman agreed the board needs to start with the low back. Gelfman said the board might think of things in a chronological order, acute first, then chronic, and might have to reorganize things. The final consensus was the low back parameters should be what is focused on.

## 7. Future agenda items – Alm and board

- Natalie Haefner described the importance of developing traumatic brain injury (TBI) parameters. Wichterman said this is important, but without having a medical consultant, it would be hard to accomplish. DLI needs to focus on something that could get done without a medical consultant. Landy added that TBI has been brought up before and it is something that is so different for each case that there may not be a good way to accomplish treatment parameters. Haefner added that other states have done it, so it is not impossible. Wichterman then thanked Haefner for her input but said they would stick with the low back for 2024. Haefner said that is fine and she just wanted to put this on everyone’s mind.
- Wichterman thanked everyone for their input. She said she knows it is tough deciding what to do. Alm then said it was great to meet the new folks and thanked Assistant Commissioner Daly for all her work with the board.

## Adjournment

- A motion to adjourn the meeting was made by Haefner and seconded by Lisa Hanselman. A roll call vote was taken and motion carried. The meeting was adjourned at 5:18 p.m.