

July 20, 2017

Idaho Industrial Commission
700 S. Clearwater Lane
PO Box 83720
Boise, ID 83720 – 0041

RE: Medical Fee Rulemaking

Dear Commissioners:

Thank you for allowing me the opportunity to comment on the above-mentioned Medical Fee Rulemaking. In addition to my testimony on July 10, 2017, we are providing you with a follow-up letter for your reference.

Our recommendation regarding the medical fee schedules is to remain as is. We believe that the reimbursement is not the issue in the rising cost of health care. We believe that a campaign to lower the cost of care should be the focus. Below I have outlined ways to work towards this campaign;

1. Drive patients to lower cost/high-quality options by sharing data with employers on which providers are lower cost/high quality for certain procedures. Employers can then educate the employees on these provider options through a work-place campaign. This would also apply to generic vs brand drugs, durable medical equipment and other ancillary services.
2. Drive patients to the place of best care the gets them back to work quicker. This includes lower cost options for surgical procedures being performed in an ASC vs. Hospital outpatient setting.
3. Claims submission should be handled electronically rather than paper. Paper transmission is an added administrative expense and a delay in payments.
4. Increase education to patients on properly filling out the necessary documents for claims to be processed and not denied. Denials create a lot of administrative time to remedy.

5. Look at your internal processes, like the pre-authorization process. Is the process cumbersome? Does it require more administrative time than commercial carriers. Why is this? What other internal processes are administrative burdens?
6. Look at ways to incentivize the patient to return to work sooner. Currently workers comp pays for one-hundred percent (100%) of the employee cost. Why is this? Why doesn't the employee have a cost share, even if it is ten percent (10%)? If everything is covered at one-hundred percent (100%) are we incentivizing the employee to obtain medical services that may not be necessary or causing them to be off work longer?
7. Come up with a campaign that encourages patients and providers through a gain sharing arrangement to save costs. Give a bonus to the employers and the providers who generate high quality and cost savings. This is a focus with the commercial payers and the State of Idaho's Medicaid program is also working towards this.

While I understand that what we presented above is a new way of looking at medical fee reimbursements and it is not a change that can take place overnight, I am very willing to work collaboratively with the appropriate Committee to help develop a campaign to implement change.

We greatly appreciate your willingness to consider our input. Please feel free to direct any questions to me by email seyral@lewistonortho.com or by phone 208-298-1035.

Thank you,

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