## Health Care Provider Advisory Committee Meeting Minutes Aurora Medical Center in Summit January 18, 2019

Members Present: John Bartell, RN; Mary Jo Capodice, DO; Andrew Floren, MD; Amanda Gilliland, RN; Richard Goldberg, MD; Barb Janusiak, RN; Jim O'Malley (Acting Chair); Steve Peters (Chair); Jennifer Seidl, PT; Kelly G. Von-Schilling Worth, DC; and Timothy Wakefield, DC.

Excused: Ted Gertel, MD and Maja Jurisic, MD.

Staff Present: John Dipko, Kelly McCormick and Frank Salvi, MD.

- 1. Call to Order/ Introductions: Mr. O'Malley convened the Health Care Provider Advisory Committee (HCPAC) meeting at approximately 9:15 a.m., in accordance with Wisconsin's open meetings law. Steve Peters was introduced as the new Division Administrator and John Dipko was introduced as the new Deputy Division Administrator of the Worker's Compensation Division (WCD). Dr. Wakefield announced that he is now with NorthLakes Community Clinics, a federally qualified health center (FQHC). Dr. Capodice advised that her medical group merged and is now Advocate Aurora Health. The members of the HCPAC and WCD staff introduced themselves.
- 2. Acceptance of the October 12, 2018 meeting minutes: Dr. Goldberg made a motion to accept the minutes of the October 12, 2018 meeting. The motion was seconded by Dr. Floren. The minutes were unanimously approved without correction.
- 3. Future meeting dates: The HCPAC members agreed to schedule the next meetings on May 17, 2019 and August 2, 2019. A tentative meeting date of October 18, 2019 was also selected. Mr. O'Malley indicated that several members' terms will officially end on April 30, 2019. If a member wishes to continue on the committee, an email with a current resume and statement of interest should be sent to Mr. Peters and Mr. O'Malley. Mr. O'Malley also advised there are currently three vacant physician-member positions on the HCPAC.
- 4. Review of survey of practitioners to update minimum PPD ratings in s. DWD 80.32 of the Wisconsin Administrative Code: Mr. O'Malley and Dr. Salvi resumed summation of the results of the practitioners' survey regarding minimum permanent partial disability (PPD) ratings contained in s. DWD 80.32, Wisconsin Administrative Code, that apply based on certain types of conditions and surgical procedures. Thorough discussion of the survey responses by the HCPAC members resulted in the following recommendations:
  - a. Increase the minimum rating for spinal fusion from 5% to 7% PPD per level; a discectomy/ decompression plus fusion would be 12% per level.
  - b. Increase the minimum rating for implantation of an artificial disc from 7.5% to 10% PPD per level.

- c. Add a minimum 2% PPD rating for a confirmed disc herniation that is directly related to the mechanism of trauma and treated conservatively.
- d. Add a minimum rating of 2% PPD for the implantation of a spinal cord stimulator or intrathecal pain pump.
- e. Add a minimum rating of 7% PPD for a sacroiliac (SI) joint fusion.
- f. Do not add a rating specific to a burst fracture because the treatment almost always involves a fusion procedure which already has a statutory minimum rating.
- g. Add a minimum 5% PPD rating for a coccyx fracture that causes permanent disability.
- h. Add a minimum 10% PPD rating for separation of the symphysis pubis or pelvic fractures causing permanent disability.
- i. For fusion of the proximal joint of the thumb (MCP) joint only, maintain 15% PPD rating at mid-position and increase from 20% to 25% PPD rating at complete extension.
- j. Fusion of a finger at middle joint (PIP) only, decrease the rating at mid-position from 75% to 70% PPD.
- k. Add a minimum 40% PPD rating for a thumb or finger joint prosthesis.
- I. Add a minimum rating of 40% PPD for total wrist prosthesis and 35% PPD for partial wrist prosthesis.
- m. Increase the minimum rating from 5% to 10% PPD for the loss of one kidney. If the loss is of the only remaining kidney, the minimum rating should be 20% PPD and there should be no statute of limitations for additional claims of benefits.
- n. Increase minimum rating for total loss of smell from 2.5 to 5% PPD.
- o. Increase the number of weeks in s. 102.52 (12), Wis. Stats., for total loss of a foot at the ankle from 250 to 300 weeks.
- **5.** Review of ch. DWD 81 of the Wisconsin Administrative Code: This was deferred until the next meeting of the HCPAC.
- 6. New Business: None.
- **7. Adjournment:** Dr. Goldberg made a motion to adjourn, which was seconded by Ms. Gilliland. The motion passed unanimously. The meeting was adjourned at approximately 2:00 p.m. The next meeting is scheduled for May 17, 2019.