

**MINUTES OF THE ILLINOIS WORKERS' COMPENSATION COMMISSION  
MEDICAL FEE ADVISORY BOARD MEETING  
JAMES R. THOMPSON CENTER, 100 WEST RANDOLPH STREET – ROOM 9-034  
HELD ON MARCH 13, 2013 at 1:00 PM**

**Present at the meeting were:**

Chairman Mitch Weisz  
Mr. Bill McAndrew, Illinois Hospital Association  
Dr. Avi Bernstein, The Spine Center  
Ms. Barb Molloy, Molloy Consulting

**Participating via telephone were:**

Ms. Kimberly Moreland, Rising Medical Solutions  
Mr. Jason Keller, Illinois AFL-CIO  
Dr. Michael Vender, Hand Surgery Associates

**Not present at the meeting were:**

Mr. John Smolk, United Airlines  
Ms. Dianne McGuire, College of DuPage Board of Trustees

**IWCC staff present were:**

Mr. Ron Rascia, General Counsel  
Mr. Nicholas Velazquez, Executive Assistant  
Ms. Susan Piha, Manager of Research and Education  
Ms. Kim Janas, Secretary of the Commission (via phone)  
Mr. Glen Boyle, Project Manager (via phone)

**Also present at the meeting were:**

Ms. Erin Cox, Rockford Orthopaedic  
Mr. David Menchetti, Cullen Haskins  
Mr. Rober Azcui, CorVel  
Dr. Andrew Engel  
Ms. Megan Karlic, Concentra  
Mr. Matt Hillison, Concentra  
Mr. Adam Haight, IWIRC  
Mr. Peter Duvendack, IWIRC  
Mr. Michael C. Davis, IWIRC  
Ms. Elizabeth Kerr, HFN

Chairman Mitch Weisz called the meeting order and noted that a quorum was present. Chairman Weisz asked for a motion to approve the minutes of the December 5, 2012 meeting. There was motion by Mr. McAndrew, seconded by Dr. Vender, and unanimously carried.

Chairman Weisz started the meeting by providing a Commission update. He noted Commission staff was working on the relocation of the file room to ensure that all open files are kept at the Commission instead of off-site storage facilities. The Commission has recently streamlined the procedure for cases involving the Injured Workers' Benefit Fund by eliminating the requirement that a "certification" be prepared by the Insurance

Compliance Division. Finally, Chairman Weisz shared with the Board that that the Commission was looking into partnering with the University of Illinois-Chicago to improve the Commission's Accident Reporting system.

Next, Kim Janas provide an update on the Commission's rules. She informed the Board members that there were no updates on the Commission's rules, but that she was monitoring two rules from the Department of Insurance, the rules governing the Preferred Provider Programs and also the rules implementing the electronic billing requirements set forth in Public Act 97-18. The Preferred Provider rules received a Certificate of No Objection from the Joint Committee on Administrative Rules. The final version of this rule and its effective date has not yet been published in the Illinois Register. The electronic billing rules have not yet been placed on the agenda for consideration by the Joint Committee.

Glen Boyle presented information related to his efforts to reduce the frequency of codes appearing as the "default" reimbursement on the Commission's medical fee schedule. Mr. Boyle then covered different methods for establishing these reimbursements and answered the questions of the Board members. Chairman Weisz concluded the conversation by noting that the Commission would disseminate Mr. Boyle's final conclusions and recommendations for this process and would be happy to arrange a special meeting of the Board in order to move this project along to its completion.

The next item on the agenda for consideration by the Board was a presentation by Mr. Michael Davis and Mr. Peter Duvendack of IWIRC, which is an occupational medicine provider located in Central Illinois. Mr. Davis and Mr. Duvendack presented the Board with data showing that the reimbursement levels for the codes most frequently billed by IWIRC were below Medicare reimbursement levels, thus posing a negative impact for their business. The Board members asked Mr. Davis and Mr. Duvendack several questions and discussed potential options for adjusting medical reimbursements in the medical fee schedule in the event the reimbursement levels created an access-to-care issue. Chairman Weisz stated that the Commission would continue to monitor this situation and thanked Mr. Davis and Mr. Duvendack for their presentation to the Board.

Chairman Weisz asked the Board members for any new business to be discussed. Dr. Vender noted that he had recently noticed inconsistencies and discrepancies associated with the reimbursement for the care provided at his ambulatory center. He inquired as to whether there was any recourse for providers who receive reimbursements lower than the amount listed in the Commission's medical fee schedule. The Board discussed potential causes of these billing discrepancies and ways to address this situation, including a legislative or administrative mandate for an Explanation of Benefits to be sent out for medical care provided in workers' compensation cases. Chairman Weisz also suggested working with the Department of Insurance and offered to reach out to the Department to see if there is anything to be done to address these billing issues.

There was a motion to adjourn by Dr. Bernstein, seconded by Dr. Vender, and unanimously carried.