



OCCUPATIONAL HEALTH **BEST PRACTICES**

— Working together to keep people working —

Health Policy News for Self-Insured Employers July 7, 2016

News and Updates

Be sure to check out the web page, <http://www.lni.wa.gov/ClaimsIns/Providers/WhatsNew/NewsUpdates/> for postings about new health care policies and guidelines. The latest ones are:

Tobacco Cessation Coverage Decision

Tobacco use, when having lumbar fusion, is associated with poor surgical outcomes, so L&I has long covered and paid for tobacco cessation for workers having a lumbar fusion. The medical literature has continued to find it negatively affects most other surgical outcomes as well, so our guidelines on cervical fusion and shoulder surgeries require and strongly recommend tobacco cessation (respectively). To ensure injured workers have the best surgical outcomes, L&I now covers tobacco cessation treatment for all planned surgeries if it has not previously been paid on the claim (though an exception can be made). L&I has issued a coverage decision on this, which became effective on July 1st. Self-insured claim adjusters will receive training on this new coverage decision later this month (with a repeat session in August).

Health Technology Decisions from the WA Health Technology Clinical Committee

Novocure (rebranded as Optune) is not a covered benefit. It is a medical device worn on the head that applies alternating electrical fields to treat glioblastoma multiforme. It is FDA approved for this purpose but there is insufficient evidence to demonstrate effectiveness.

Extracorporeal Membrane Oxygen Therapy (ECMO) is a covered benefit. It is limited only to certain facilities and is used only:

- In patients with severe life-threatening, but potentially reversible, acute respiratory or cardiac dysfunction unresponsive to conventional management, or
- As a bridging therapy for patients in pulmonary failure who are on a pulmonary transplant list, or
- As a bridging therapy for patients in cardiac failure who are eligible for a ventricular assist device or cardiac transplantation.

Cardiac Stents are a covered benefit.

- One of two kinds of stents are a covered benefit when angina cannot be effectively controlled with medication and when there is objective evidence of myocardial ischemia (blood and oxygen are not getting through to the heart muscle).

Surgical Knee Guideline

This was approved the end of April and becomes effective August 1st. It covers 15 knee surgeries so is much more expansive than before. The State Fund's UR vendor, Qualis Health, has educated its nurses and physicians so they will apply the new criteria on the effective date. Self-insured claim adjusters will receive training on this new coverage decision later this month (with a repeat session in August).

Work that is Underway

Surgical Foot and Ankle Guideline

We started working on this guideline in May and we expect this will take at least a year to complete. The new IIMAC subcommittee consists of occupational medicine physicians, orthopedic surgeons, a podiatrist, and the L&I staff of physicians, nurses, and our epidemiologist. Ankle fusion and ankle joint replacement surgeries will be addressed first. The data review for state fund claims showed that volumes for all foot and ankle surgeries were pretty consistent across the last six years. Unfortunately, we identified a number of cases where the initial injury was a sprain, yet the worker ended up with an amputation. Usually, comorbidities were present such as avascular necrosis and diabetes, and sadly, sometimes unresolved chronic pain was the tipping point. If at all possible, we want to prevent this from happening, so we plan to address the need for prevention in the guideline.

Lumbar Fusion and SIMPs

The hearing on repealing the rules for Structured Intensive Multidisciplinary Pain programs (SIMPs) will be held on Friday, August 26th at L&I headquarters in room S119. Notices of the rule making were sent to WSIA and other interested persons. The same language that is in rule is already in the payment policy section of the [Medical Aid Rules and Fee Schedule](#), so the current SIMP program will remain in effect. There are no plans to change or stop covering SIMPs, but as we examine the benefits of collaborative care and community based models of pain management as part of Healthy Worker 2020, we can be more responsive to the latest evidence about what is effective if the program is not in rule.

Carpal Tunnel Syndrome Guideline

We are taking another look at how to evaluate work-relatedness of Carpal Tunnel Syndrome, especially as it relates to keyboarding, mousing, and general computer use. We have reviewed the most recent medical literature and are consulting with clinical experts. We do not anticipate changing any of the diagnostic criteria. A draft of the amended section will be presented at the [July 28th IIMAC meeting](#); we expect this to extend to the October 27th IIMAC meeting for final approval.

Provider Education

We are revamping our provider education program to improve the organization, communication, and quality of our various offerings. Examples include training our chiropractic consultants, making more web-based self-paced learning available, and helping COHE and Top Tier providers meet their training requirements. This will also help us communicate about our new or changed policies and guidelines and will support the Healthy Worker 2020 strategic plan. One of the first steps will be to redesign our provider education web pages – stay tuned!