# The Connecticut General Assembly



# Medical Record Requests and Records Fee Working Group Meeting

# **MEETING MINUTES**

Tuesday, January 2, 2024

ATTENDANCE: Representative Mike Quinn, Representative Christine Conley, Michael D'Amico, Marie Gallo-Hall, Kyle Probst, Liz McElhiney, Rachel Pattison, Carl Schiessl, Rep. O'Dea, Layne Gakos

ABSENT: Sen. Anwar, Jennifer Cox, Sen. Somers, Kim Schlottman, Kathleen Nastri, Rick Silver, , Sue Schaffman

## **Convene Meeting**

The meeting was convened at 10:01 AM by Rep. Quinn.

## Approval of minutes – December 12th

The motion was made by Michael D'Amico, seconded by Rep. Conley. The minutes were approved via voice vote.

### **Discussion on Workers' Compensation Statute**

Rep. Quinn states that the purpose today is to discuss 31-294f, which deals with records in workers' compensation cases. Rep. Quinn references subsection B to start the discussion.

Jennifer Cox states that these are medical reports filed by providers, and not medical records. She clarifies many providers have been trained to not release records that are in process because they aren't final. She states she doesn't have a solution to the problem, which she believes could cause delays.

Michael believes the statute's 30-day time period should be geared towards the date of the exam instead of the time of completion.

Kyle states they don't release records unless requested to release records. So absent a request, they wouldn't disclose it and wants to make sure that element is included in any statute updates with a penalty.

Rep. Conley states that the gender references in the statute should be updated to be gender neutral. She states she wants to look at a penalty within the administrative judge's ability to

identify when it would be necessary to apply the penalty. She states it is important to have a final report not a draft report because the final report could recommend something differently and you don't want to recommend something based off a draft report. She states the delays in the report not only prohibit individuals from getting the treatment they need but it hurts payments to these individuals as well.

Marie states there is no need for a request to get updated records as the case develops, they are supposed to be automatically sent out. It concerns her that records aren't being sent out automatically because the statute says it is supposed to be automatically sent out.

Kyle states he was trying to convey that they aren't providers, they are just 3<sup>rd</sup>-party vendors.

Rep. Quinn asks if they draw distinction between workers comp cases that are ongoing versus personal injury cases. Kyle states they do at a base level for fee applications, but ongoing requests tied back to the original request isn't tracked.

Rep. Quinn asks if their system could be set up to be in compliance with the statute. Kyle states he doesn't know off the top of his head, but that they could probably do some programming to develop it.

Jennifer states that the challenge with providers is that it still must be within the workers compensation claim. She states it is very difficult to create a report for workers compensation claims when there are two injuries to an individual but only one is related to the workers compensation claim, and that there is still a human aspect to the record. She states automation has a privacy issue. She is concerned that those final reports Rep. Conley mentioned will be less robust if they have to be done more quickly. She wonders how big of an issue the final report timeliness is. She also once again states if you expedite everything, you expedite nothing.

Rep. O'Dea asks if electronic fees have been discussed yet. Rep. Quinn says it will be at the next meeting.

Rep. Conley states that the bad apples seem to be the bigger hospitals. She states overpayment is also an issue and could be addressed by more timely reports.

Rep. Quinn asks the group if 30 days from the visit is a sufficient amount of time, and if they set up an extension of time process for certain circumstances.

Layne states that Sue Schaffman is an important voice in this conversation and unfortunately couldn't make the meeting and hopes before the group comes to a conclusion the group hears from Sue.

Michael acknowledges there may be times 30 days isn't appropriate, but that maybe the thing is to allow the commissioner to extend the time if good cause is shown and to set requirements for what good cause is. He believes the 30 days should start when the appointment happens.

Jennifer asks if the provider/3<sup>rd</sup> party would have to go to the commission, unrepresented, to ask for an extension.

Rep. Quinn thinks if the report is done, why it should take more than 30 days for the report to be sent out. He states without knowing the legislative history of why this timing was created, it's hard to really understand the rationality. He states he agrees with Michael D'Amico, and if there is going to be a penalty who should have to pay that penalty. Rep. Quinn asks Kyle if it takes the 3<sup>rd</sup>-party any additional 30 days to disseminate the report once they receive it. Kyle says it shouldn't.

Rep. Quinn states the current statute doesn't indicate whether the provider or 3<sup>rd</sup>-party is at fault. He ponders whether there should be an additional time buffer for 3<sup>rd</sup>-party providers to provide the reports once they receive them.

Kyle states he'd have to talk to his team to see what a reasonable time would be.

Liz McElhiney states that they want to get the reports out as soon as possible but there are situations where they cannot, so that a buffer would be great for the 3<sup>rd</sup>-party providers.

Michael believes that there are different buckets of reports that are being provided; employer requested examination, workers comp, and treatment. He says for the employer requested examination the employer should be penalized if it isn't timely, and if it isn't generated timely by the workers comp doctor then the person who pays the doctor there should be a reduction in the fee. He states the treatment bucket would require more thought.

Rep. Quinn he states the treating physician bucket is where most of the problems arise, Rep. Conley agrees.

Rep. Conley acknowledges that WCC is working on a new HIPAA compliant authorization, but states if there is an issue 3<sup>rd</sup>-parties experience in getting things done timely they should let the working group know so that they can solve the issue. She mentions maybe the first penalty could be a letter from the WCC, and if they continue to meet the deadlines then it goes to a higher penalty.

Marie Gallo-Hall states she wants the problem solved as well but is concerned about letters going out by the Commission because it would happen often, and it would be a lot to ask of the Commission.

Michael states he sent around an updated proposal; he made updates suggested by Kyle which are to use the term "business associate" instead of someone in "possession/control". The other change was about when the 30 days starts, if it was sent via email/fax it starts based on when that happens and if it is mailed the time starts based on a certain number of days.

### Announcement of Time and Date of Next Meeting

Tuesday, January 16<sup>th</sup>, 2024, at 10:00am

### Adjournment

The motion to adjourn was made by Michael D'Amico and seconded by Rep. Conley. The meeting was adjourned at 10:50AM.