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The Honorable Darcia Grayber  
House Committee on Labor and Workplace Standards  
900 Court Street NE  
Salem, Oregon 97301  
RE: Oppose HB 3374

Dear Chair Grayber and members of the Committee,

HB 3374 gives an opportunity to address key questions pertaining to the treatment of injured workers in Oregon:

- 1) Is it the purpose of the laws in Oregon managing the care of injured workers to provide the timely quality care to assist an injured worker in recovering as fast as possible and thus to return to work as fast as possible as well as reducing costs?
- 2) In regard to the evaluation, treatment and management of musculoskeletal injuries not requiring surgical intervention, would it not be reasonable for the profession best trained and qualified to be the primary choice for such service?
- 3) Is it the intention to provide fast and easy access to the evaluation and treatment of injuries for those injured on-the-job in Oregon?

If your answer to these questions is affirmative, then it is a no brainer to vote no on HB 3374. The present system is broken. It has deteriorated since chiropractic physicians have been relegated to provide limited access for Injured workers. Since this has occurred, there has been an ongoing attempt to manage the care of injured workers thru managed care organizations (MCOs) that limit the availability of care due to a limited number of participating doctors (closed

panels) from which to choose. Many, if not most, M.D. and D.O. physicians refuse to accept work comp patients, in part due to the administrative hassles in handling and getting paid and in part due to not specializing in the treatment of musculoskeletal injuries. In addition, if a medical doctor is a primary care physician (PCP) for an injured worker and the PCP is willing to refer the injured worker to a chiropractic physician, the Providence Healthcare system overrides the PCP and refers and routes the injured worker to an MCO occupational clinic. This is common procedure in the Providence Health care system.

Hence, the intention and mandate of the legislature to provide access of an injured worker to their PCP is circumvented by such procedures that Providence, if not other insurers, has implanted/implemented. Due to the overload of the system, an injured worker then has to wait an extended period of time to receive treatment, which significantly interferes with their recovery and their options for a non-drug/pharmaceutical treatment.

In regard to what profession is most qualified to evaluate, treat, and manage musculoskeletal injuries that do not require surgical intervention, the overwhelming clear choice is by chiropractic physicians. The training and skill sets acquired over experience in the evaluation, treatment and management of spinal as well as extremity injuries, is a primary focus of chiropractic physicians. It is not acquired in the training and curriculum of primary care medical doctors, nurse practitioners, and physician's assistants, whose training is oriented toward drug/pharmaceutical interventions for pain but offer nothing for correction of underlying musculoskeletal problems to restore function. Hence, these practitioners routinely and reflexively prescribe drugs and/or refer to physical therapist. That is the limit of their skill set.

My father and brother are both medical physicians. I had a discussion with my brother regarding his training in the evaluation and treatment of musculoskeletal injuries in medical school. He told me that he had one quarter of his curriculum dedicated to this training, and it was not a focus of his training nor skill set. My brother is not the exception but the norm.

So, if the purpose of treating patients who have neck and back and extremity injuries from work-related injuries that do not require surgical interventions is to reduce pain, restore function, enhance recovery and reduce costs to the system, Oregon Workers' Compensation System must to be revamped. Not by adding yet another managed care organizations but rather, by once again designating chiropractic physicians as "attending physicians" for the life of an injured worker's claim.

Indeed, the standards for labor and workplace need to be re-evaluated to provide injured workers better access and choices for treatment for musculoskeletal injuries that do not require surgical treatment. In the case of those injuries requiring surgical treatment, chiropractic physicians can more readily determine and access referral for this need than a primary care physician, nurse practitioner, or physician's assistant. That has been my experience over the 40+ years of my practice.

A consideration for further discussion is the ravaging effects on injured workers who have been prescribed and become dependent/addicted on drugs/pharmaceuticals as the only alternative of treatment by Occupational Treatment clinics who routinely offer only drugs and/or referral for physical therapy. When the physical therapy does not resolve their pain, then drugs are the only alternative offered. Is this how you would want to be treated with only these two options?

I trust, perhaps optimistically, that all representing our citizens of Oregon do want the best outcomes and choices for injured workers in our beloved state. Thank you for your sincere consideration of that which I have presented to you.

Appreciatively,

John Helton, D.C.