

Sunset Public Hearing Questions for  
**MEDICAL CARE AND COST CONTAINMENT COMMITTEE**  
**MEDICAL PAYMENT COMMITTEE**  
Created by Section 50-6-125, *Tennessee Code Annotated*  
(Sunset termination June 2015)  
**(ANSWERS IN BOLD)**

*Questions Pertaining to the Medical Care and Cost Containment Committee*

1. Section 50-6-125, *Tennessee Code Annotated*, created the Medical Care and Cost Containment Committee. The provisions of Section 50-6-125 related to this committee were applicable to injuries occurring prior to July 1, 2014. Please provide a brief statement about the Medical Care and Cost Containment Committee, including information about its purpose, statutory duties, staff, and administrative attachments.

**As part of the 1992 workers' compensation reform act, the Medical Care and Cost Containment Committee was established under T.C.A. § 50-6-125 to advise the commissioner per the commissioner's request on issues relating to medical care and cost containment as well as to approve rules and regulations relating to excessive charges.**

**Initially, the committee consisted of nine members (three from TMA, one from THA, one from TAB, two from the AFL-CIO, one from the Associated Builders and Contractors, and the workers' compensation medical director who serves as a non-voting ex officio member). The committee reviewed complaints against health care providers accused of imposing excessive charges; the committee had authority to impose penalties against a health care provider found guilty. During the mid-nineties the committee advised the commissioner on issues such as the appropriate number of pain management visits to the amount for depositions and forms completed by physicians. The committee's role changed from reviewing complaints of potential excessive charges to reviewing complaints of potential underpayments. Prior to the adoption of the medical fee schedule, the committee consulted with private medical bill review companies to determine the prevailing fee in a community.**

**The committee was expanded in 2004 when legislation passed which created a medical fee schedule to cap medical costs. Two hospital, one AFL-CIO, one TCCI (formerly TN Association of Business), one pharmacist, and one health insurance representatives were added, effective July 2005. The last edition to the committee was added in May of 2005 representing the chiropractic association. During the medical fee schedule rule making process the committee scheduled numerous meetings to listen to different providers and their opinions on what it might take to keep them in the workers' compensation system while cutting the overall medical cost to the system. Recommendations were made to the commissioner.**

After the medical fee schedule was established, attendance by the members declined. Though a quorum was always present, there was an audit finding in 2009. Letters were sent to members requesting commitment or resignation. Vacant positions were filled. By-laws had already been established creating proxies and teleconferencing options. Follow-up meetings with the Government Operations Commerce, Labor & Transportation Joint Subcommittee ensued. All members now serve four year terms. Dr. Mary Yarbrough and Mr. Wink Neal were the committee co-chairs.

The committee is charged with resolving disputes between medical providers and carriers regarding the correct fee schedule amount. Approximately 30 cases are reviewed at each meeting. The average cost of holding a meeting is between \$200-\$500, depending on the number of attendees. Travel and meal costs (when lunch is provided) for committee members.

Annually, the committee consults with the commissioner (usually via email) regarding any recommended changes to the medical fee schedule.

2. Provide a list of committee members who served in fiscal years 2013 and 2014. For each member, please indicate who appointed the member and how the member's presence on the Medical Care and Cost Containment Committee complied with Section 50-7-606(a), *Tennessee Code Annotated*. Please note any vacancies on the committee during fiscal years 2013 and 2014.

### Medical Care and Cost Containment Committee

**Ms. Lisa Hartman RN**  
Tennessee AFL-CIO State  
Labor Council

**Mr. Everett Sinor, Esq**  
Health Insurance Industry

**Mr. Jeff Ford**  
Tennessee Chamber of  
Commerce and Industry

**Dr. Keith Graves**  
Tennessee Chiropractic  
Association

**Dr. John D. Brophy**  
Tennessee Medical Association

State Medical Director  
Division of Workers'  
Compensation

**Mr. Frank E. "Wink" Neal III**  
Associated Builders &  
Contractors, Inc

**Mr. Gary Perrizo**  
Tennessee Hospital  
Association

**Mr. Jim McBride, Pharm. D**  
Tennessee Pharmacists  
Association

**Dr. Robert Snyder**  
Tennessee Medical  
Association

**Mr. A. J. Starling**  
Tennessee AFL-CIO State  
Labor Council

**Ms. Mary Layne Van Cleave**  
Tennessee Hospital  
Association

**Ms. Angelia L. Wright**  
Tennessee Hospital Association

**Dr. Mary Yarbrough**  
Tennessee Medical  
Association

**Ms. Jenifer Pianpiano**  
Tennessee AFL-CIO State  
Labor Council

Vacancy: Tennessee Chamber  
of Commerce and Industry

3. How many times did the Medical Care and Cost Containment Committee meet in fiscal year 2013? **Once on December 10, 2013.** Fiscal year 2014? **Once on April 3, 2014.** How many committee members were present at each meeting? **On 12/10/2013 there were eleven (11) members present. On April 3, 2014 there were ten (10) members present.**
4. Did committee members receive per diem or travel reimbursements? If yes, how much was paid to committee members during fiscal years 2013 and 2014? **Travel expenses for the December 2013<sup>th</sup> meeting equaled five hundred twenty-seven dollars and thirty-four cents (\$527.34). Travel expenses for the April 2014<sup>th</sup> meeting equaled six hundred forty-one dollars and sixty-four cents (\$641.64). Lunch was provided at the April 2014<sup>th</sup> meeting at a cost of approximately two hundred dollars (\$200.00).**
5. What were the Medical Care and Cost Containment Committees revenues (by source) and expenditures (by object) for fiscal years 2013 and 2014? **There were no revenues.** Was a fund balance carried, if so, provide the total of that fund balance? **There is no separate fund.** If expenditures exceeded revenues, and a fund balance was not carried, what was the source of the revenue for the excess expenditures? **The expenses were paid from the general state fund.**
6. If the Medical Care and Cost Containment Committee operated under a formal conflict of interest policy, please attach a copy of that policy. **See attached Exhibit 1 for conflict of interest policy.**
7. Provide information regarding the Medical Care and Cost Containment Committee's activities during fiscal years 2013 and 2014. **See attached Exhibit 2 for bylaws and minutes of meetings.**

*Questions pertaining to the Medical Payment Committee*

8. According to Section 50-6-125, *Tennessee Code Annotated*, the provisions pertaining to the Medical Payment Committee are applicable to injuries occurring on and after July 1, 2014. Please provide a brief introduction to the Medical Payment Committee, including information about its creation, purpose, statutory duties, staff

and administrative attachments. **Section 50-6-125 provides that the administrator shall appoint a medical payment committee to hear disputes on medical bill payments between medical providers and insurance carriers. The committee will advise the administrator on issues concerning cost containment in the workers' compensation system. The committee has the authority to render a decision regarding disputed medical bills. The committee has the authority to make a referral to the division's penalty unit for possible penalty assessment. The committee is comprised of seven (7) voting members appointed by the administrator: three (3) members shall be representative of the medical provider industry; three (3) members shall be representative of the workers' compensation insurance industry; and the medical director shall serve as the final member of the committee but shall not cast a vote unless a vote taken by members results in a tie. In that case, the medical director will cast the deciding vote. In making appointments, the administrator will strive to achieve a geographic balance and, in the case of the physician members of the committee, shall assure, to the extent possible, that the membership of the committee reflects the diversity of specialties involved in the medical treatment and management of workers' compensation claimants. Members of the committee will serve without compensation but, when engaged in the conduct of their official duties as members of the committee, will be entitled to reimbursement for travel expenses. Each member appointed shall serve a term of four (4) years and may be reappointed by the administrator. If a member leaves the position prior to the expiration of the term, the administrator shall appoint an individual meeting the qualifications of this section to serve the unexpired portion of the term, and the individual may be reappointed by the administrator upon expiration of the term.**

9. Provide a list of current members of the Medical Payment Committee. For each member, please indicate who appointed the member and how the member's presence on the committee complies with Section 50-6-125 (for example representatives of the medical provider industry and workers' compensation industry). Please indicate each committee member's county of residence. Does the committee's membership include female members? Members of a racial minority? Members who are sixty years of age or older? **See below. These individuals previously served on the Medical Care and Cost Containment Committee. Their expertise and experience in the subject matter and their willingness to serve on the Medical Payment Committee were determining factors in their appointments.**

**Dr. Mary Yarbrough, MPH  
Vanderbilt Occupational Health  
1211 21st Ave. South  
Suite 640 Medical Arts Bldg  
Nashville, TN 37232**

**Female, W, <60, Middle TN**

**Frank E. "Wink" Neal III  
Frank E. Neal & Company Inc.  
2223 8<sup>th</sup> Ave South  
Nashville, TN 37204**

**Male, W, <60, Middle TN**

**Jim McBride, Pharm. D**

**Male, W, <60, East TN**

**Clinton Drug Store  
1130 N Charles Seviars Blvd.  
Clinton, TN 37716**

**Mary Layne Van Cleave  
Tennessee Hospital Association  
5201 Virginia Way,  
Brentwood, TN 37027**

**Female, W, <60, Middle TN**

**Jeff Ford, AIC, ARM  
Sr. Risk Analyst  
McKee Food Corporation  
PO Box 750  
Collegedale, TN 37315  
Ext. 22239**

**Male, W, <60, East TN**

**Everett Sinor, Esq.  
General Counsel  
Brentwood Services Administrators, Inc.  
104 Continental Place  
Suite 200  
Brentwood, TN 37027**

**Male, W, <60, Middle TN**

10. Please indicate if there are any vacancies on the committee and what is being done to fill those vacancies. **There are no vacancies.**
11. How many times has the Medical Payment Committee met since July 1, 2014? **One meeting took place on September 4, 2014.**
12. What per diem or travel reimbursements do committee members receive? How much has been paid to date (beginning July 1, 2014)? **Members are entitled to travel expenses. For the September 2014 meeting, the travel expense totaled one hundred forty-three dollars and eighty-two cents (\$143.82) and the consultant's (CorVel Corporation) fee for reviewing the cases and making recommendations totaled six hundred (\$600.00) dollars.**
13. What are the committee's expected revenues (by source) and expenditures (by object) for fiscal year 2015? **There will be no revenues. The expected travel amount is approximately three hundred five dollars (\$305.00) per meeting plus the consultant's fee. Lunch may be provided at any extended meeting for one hundred dollars (\$100.00) or less. The case review provider charges 150.00 per case reviewed. At the September 2014 meeting there were 4 cases reviewed. We expect the committee to review approximately 20-30 cases per year. We anticipate spending approximately \$6,500 in total per year.**
14. Is the committee subject to Sunshine law requirements (per Section 8-44-1020 et seq., *Tennessee Code Annotated*) for public notice of meetings, prompt and full recording of minutes, and public access to minutes? If so, what procedures does the council have for informing the public of its meetings and making its minutes available to the

public? **Three notices are posted at the Legislative Plaza at least ten days prior to the meetings. There is a notification list for anyone wishing to be notified by email. The committee members are posted on the website <http://www.tn.gov/labor-wfd/bdmedcare.shtml>**

15. How does the committee ensure that its members are operating in an impartial manner and that there are no conflicts of interest? **The Division has a strict conflict of interest policy applicable to the Committee to prohibit any circumstances where a member's individual interest impairs or gives the appearance of impairing his or her ability to make unbiased decisions. If the committee has a formal conflict of interest policy, please attach a copy of that policy. See attached Exhibit 1.**
16. Has the Medical Payment Committee promulgated rules and regulations? **No. However, the committee is referenced in the Medical Care and Cost Containment Program. If so, please cite the reference. Rule 0800-02-17.21-22. See below.**

**0800-02-17-.21 PROCESS FOR RESOLVING DIFFERENCES BETWEEN CARRIERS AND PROVIDERS REGARDING BILLS.**

**(1) Disputes**

- (a) Unresolved disputes between a carrier and provider concerning bills due to conflicting interpretation of these Rules and/or the Medical Fee Schedule Rules and/or the In-patient Hospital Fee Schedule Rules may be presented to the Medical Payment Committee (or "Committee") on or after July 1, 2014. A request for Committee Review may be submitted within one (1) year of the date of service to: Medical Director of the Workers' Compensation Division, Tennessee Department of Labor and Workforce Development, 220 French Landing Drive, Nashville, Tennessee 37243, or any subsequent address as prescribed by the Division.**
- (b) Valid requests for Committee Review must be accompanied by a form prescribed by the Division, must be legible and complete, and must contain copies of the following:**
- 1. Copies of the original and resubmitted bills in dispute which include dates of service, procedure codes, bills for services rendered and any payment received, and an explanation of unusual services or circumstances;**
  - 2. Copies of all explanations of benefit (EOB's);**
  - 3. Supporting documentation and correspondence, if any;**
  - 4. Specific information regarding contact with the carriers; and**
  - 5. A verified or declared written medical report signed by the physician and all pertinent medical records.**
- (c) The party requesting Committee Review must send a copy of the request and all documentation accompanying the request to the opposing party at the same time it is submitted to the Medical Director.**
- (d) If the request for review does not contain proper documentation, then the Committee will decline to review the dispute. Likewise, if the timeframe in this Rule is not met, then the Committee will decline to review the dispute, but such failure shall not provide an independent basis for denying payment or recovery of payment.**

**Authority:** T.C.A. §§ 50-6-126, 50-6-204, 50-6-205, 50-6-226, 50-6-233 (Repl. 2005), and Public Chapters 282 & 289 (2013). **Administrative History:** Public necessity rule filed June 5, 2005; effective through November 27, 2005. Public necessity rule filed November 16, 2005; effective through April 30, 2006. Original rule filed February 3, 2006; effective April 19, 2006. Amendments filed June 12, 2009; effective August 26, 2009. Amendments filed March 12, 2012; to have been effective June 10, 2012. The Government Operations Committee filed a stay on May 7, 2012; new effective date August 9, 2012. Amendment filed December 26, 2013; effective March 26, 2014.

**0800-02-17-22 COMMITTEE REVIEW OF FEE SCHEDULE DISPUTES/ HEARINGS.**

**(1) Committee Review Procedure**

- (a) When a valid request for Committee Review is received by the Division's Medical Director, the parties will be notified when the Committee will consider the dispute. The Committee may consider the dispute at any meeting during which it has a quorum of the voting members. Members may participate by telephone or by video conferencing and members who participate by telephone or video conferencing shall be counted as if physically present for purposes of establishing a quorum.**
- (b) The parties will have the opportunity to submit documentary evidence and present arguments to the Committee prior to and during the Committee meeting in which the dispute will be heard.**
- (c) The Committee shall consider the dispute and issue its decision as to the proper resolution of the dispute. If the dispute is not ripe for a decision, then the Committee may continue it to the next meeting.**
- (d) If the parties to the dispute do not follow the decision of the Committee, then either party may proceed in any court of law with proper jurisdiction to decide the dispute.**

**(2) Computation of Time Periods**

- (a) In computing a period of time prescribed or allowed by the Rules, the day of the act, event or default from which the designated period of time begins to run shall not be included. The last day on which compliance therewith is required shall be included. If the last day within which an act shall be performed or an appeal filed is a Saturday, Sunday, or a legal holiday, the day shall be excluded, and the period shall run until the end of the next day which is not a Saturday, Sunday, or legal holiday. ["Legal holiday" means those days designated as a holiday by the President or Congress of the United States or so designated by the laws of this State.]**

**Authority:** T.C.A. §§ 50-6-204, 50-6-205, 50-6-233 (Repl. 2005), and Public Chapters 282 & 289 (2013). **Administrative History:** Public necessity rule filed June 5, 2005; effective through November 27, 2005. Public necessity rule filed November 16, 2005; effective through April 30, 2006.

- 17. Does the Medical Payment Committee have a website? If so, please provide the web address. <http://www.tn.gov/labor-wfd/bdmedcare.shtml> What types of public information is available on the website? **The names of the members and the contact person for the committee are available there.**

18. Describe the nature and extent of the Medical Payment Committee's activities to date. **See Exhibit 3 for bylaws and minutes.**

*Questions about Performance Measurement*

19. Has the committee developed and implemented quantitative performance measures for ensuring it is meeting its goals? (Please answer either yes or no). **No, the Medical Payment Committee has not developed quantitative performance measures at this time. However, the following performance measure will be implemented this fiscal year: percentage of pending disputes resolved at each meeting. This measurement will be used for all meetings of the Medical Payment Committee this fiscal year, including the one meeting that has already take place.** If the committee has developed and implemented quantitative performance measures, answer questions 20 through 27. If the committee has not developed quantitative performance measures, proceed directly to question 28. **None.**
20. What are the key performance measures for ensuring that the committee is meeting its goals? Describe so that someone unfamiliar with the program can understand what you are trying to measure and why it is important to the operation of your program.
21. What aspect[s] of the program are you measuring?
22. Who collects relevant data and how is this data collected (e.g., what types information systems and/or software programs are used) and how often is the data collected? List the specific resources (e.g., report, other document, database, customer survey) of the raw data used for the performance measure.
23. How is the actual performance measure calculated? If a specific mathematical formula is used, provide it. If possible, provide the calculations and supporting documentation detailing your process for arriving at the actual performance measure.
24. Is the reported performance measure result a real number or an estimate? If an estimate, explain why it is necessary to use an estimate. If an estimate, is the performance measure result recalculated, revised, and formally reported once the data for an actual calculation is available?
25. Who reviews the performance measures and associated data/calculations? Describe any process to verify that the measure and calculations are appropriate and accurate.
26. Are there written procedures related to collecting the data or calculating and reviewing/verifying the performance measure? Provide copies of any procedures.
27. Describe any concerns about the committee's performance measures and any changes or improvements you think need to be made in the process.
28. Provide an explanation of any items related to the committee that may require legislative attention, including your proposed legislative changes. **The committee evaluates the medical fee schedule and approves regulations pursuant to § 50-6-**

**233 (c)(7). An initial investigation of issues regarding the medical fee schedule was presented at the September 4th, 2014 meeting. There are no proposed legislative changes pending at the present time.**

29. Should the committee be continued? **Yes.** To what extent and in what ways would the absence of the committee affect the public health, safety, or welfare of the citizens of the State of Tennessee? **The Medical Payment Committee provides the dispute resolution process for any medical payment dispute between an insurance carrier and a medical provider. Without the committee there would be no administrative appeal short of legal action in Circuit or Chancery Court for such disputes.**
30. Please list all committee programs or activities that receive federal financial assistance and, therefore are required to comply with Title VI of the Civil Rights Act of 1964. Include the amount of federal funding received by program/activity. **The Medical Payment Committee does not receive federal assistance. The Division is aware of the Title VI requirements. The Division does make all attempts to comply with Title VI requirements when appointing committee members.**

*If the committee does receive federal assistance, please answer questions 31 through 38. If the committee does not receive federal assistance, proceed directly to question 37.*

31. Does the committee prepare a Title VI plan? If yes, please provide a copy of the most recent plan.
32. Does the committee have a Title VI coordinator? If yes, please provide the Title VI coordinator's name and phone number and a brief description of his/her duties. If not, provide the name and phone number of the person responsible for dealing with Title VI issues.
33. To which state or federal agency (if any) does the committee report concerning Title VI? Please describe the information the committee submits to the state or federal government and/or provide a copy of the most recent report submitted.
34. Describe the committee's actions to ensure that committee staff and clients/program participants understand the requirements of Title VI.
35. Describe the committee's actions to ensure it is meeting Title VI requirements. Specifically, describe any committee monitoring or tracking activities related to Title VI, and how frequently these activities occur.
36. Please describe the committee's procedures for handling Title VI complaints. Has the committee received any Title VI-related complaints during the past two years? If yes, please describe each complaint, how each complaint was investigated, and how each complaint was resolved (or, if not yet resolved, the complaint's current status).
37. Please provide a breakdown of current committee staff by title, ethnicity, and gender.

<b>Suzy Douglas, Nurse Consultant</b>	<b>W</b>	<b>F</b>
<b>Kelly Burns, Workers' Comp. Specialist II</b>	<b>W</b>	<b>F</b>
<b>Margaret Collier, Administrative Assistant 4</b>	<b>W</b>	<b>F</b>

**NOTE: Supporting the committee is one of the job duties and programs though not the only duty of these employees.**

38. Please list all committee contracts, detailing each contractor, the services provided, the amount of the contract, and the ethnicity of the contractor/business owner. **CorVel Corporation is an approved contractor for the state of Tennessee for the state employees' workers' compensation program. CorVel provides review services to the Medical Payment Committee upon request with an anticipated expense less than five thousand dollars (\$5,000) per year.**

**Names of persons presenting this information at hearing:**

Troy Haley, Administrative Attorney and Legislative Liaison  
Abbie Hudgens, Administrator of Division of Workers' Compensation  
Dr. Robert Snyder, Medical Director of Division  
Suzy Douglas, Nurse Consultant of Division

Division of Workers' Compensation  
220 French Landing Dr. 1-B  
Nashville, TN 37243  
615-532-0179  
615-532-5928 fax  
[troy.haley@tn.gov](mailto:troy.haley@tn.gov)



**STATE OF TENNESSEE  
DEPARTMENT OF LABOR AND WORKFORCE DEVELOPMENT**

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**DEPARTMENTAL POLICY AND PROCEDURES**

**Subject: Conflict of Interest  
Effective Date: May 6, 2014**

**PURPOSE:** To assure that the interests and activities of all members serving on a departmental board, commission, or committee, do not conflict or give the appearance of conflicting with the provision of unbiased service to the public.

**POLICY:** All members serving on a departmental board, commission, or committee will comply with the attached Conflict of Interest Policy.

**PROCEDURES:** All members serving on a departmental board, commission, or committee will receive a copy of the Conflict of Interest Policy, Conflict of Interest Policy Acknowledgment form, and Conflict of Interest Disclosure form. All members will be required to sign the Conflict of Interest Policy Acknowledgment form, and complete the Conflict of Interest Disclosure form annually. Said forms will be returned to the Commissioner's Designees who will keep the signed copies on file.

The Commissioner's Designees\* and their respective departmental boards, commissions, and committees will be as follows:

- \* Administrator of the Division of Occupational Safety and Health  
Occupational Safety and Health Review Commission;
- \* Administrator of the Division of Workers Compensation  
Medical Advisory Committee and Medical Payment Committee;
- \* Administrator of the Division of Workforce Services  
Workforce Development Board; and
- \* Administrator of Workplace Regulations and Compliance  
Board of Boiler Rules, Elevator and Amusement Device Safety Board, and Prevailing Wage Commission.

The Commissioner's Designees shall make copies of the aforementioned forms. The Commissioner's Designees shall provide copies of said forms to the presiding officers of the governing bodies. Said forms shall be available for public review.

Prior to the transaction of business by any governing body, all members shall be reminded by the presiding officer or legal counsel to disclose their financial or personal interests in accordance with the Conflict of Interest Policy.



**STATE OF TENNESSEE  
DEPARTMENT OF LABOR AND WORKFORCE DEVELOPMENT  
220 FRENCH LANDING DRIVE  
NASHVILLE, TENNESSEE 37243**

**CONFLICT OF INTEREST POLICY**

**1. Purpose.** To assure that the individual interests of members do not conflict or give the appearance of conflicting with their duties while serving in their respective positions.

**2. Applicability.** This policy shall apply to all individuals serving on the following: Board of Boiler Rules, Elevator and Amusement Device Safety Board, Medical Advisory Committee, Medical Payment Committee, Occupational Safety and Health Review Commission, Prevailing Wage Commission, and Workforce Development Board.

**3. Definitions.**

**3.1 Conflict of Interest.** A circumstance in which a member's individual interest impairs, or gives the appearance of impairing, his or her ability to make unbiased decisions or provide unbiased public services. Also, any matter before the governing body in which a member has a financial or personal interest, which is in conflict or gives the appearance of conflict with the discharge of the member's duties.

**3.2 Financial interest** means ownership by a member of five percent (5%) or more of the stock of a corporation or any other business entity, or where the company is a business entity, which does not use stock for ownership, the legal or beneficial ownership of five percent (5%) or more of the business. This interest applies to the member or the member's relatives. For the purposes of this policy, a relative includes spouses, parents, siblings, or children.

**3.3 Personal interest** means an interest in any contract, employment or work in which the member has a public duty to vote for, let out, overlook, or in any manner to superintend any work or any contract which comes before the governing body.

**4. Conduct.**

**A.** A member shall not engage in conduct, which impairs, or gives the appearance of impairing, the member's ability to make an unbiased decision or provide unbiased public service.

**B.** A member shall not knowingly take any action, which might prejudice his or her ability, or another member's ability, to make an unbiased decision on any matter in which the member or the member's relatives have a financial or personal interest.

**C.** A member shall abstain from voting on any matter involving a person or entity in which the member or the member's relatives have a financial or personal interest.

**D. A member who is employed by, or has contracted to provide services to a person or entity seeking specific approval or action, shall abstain from voting on the approval or action.**

**E. A member shall not participate as an expert witness in a contested case before his or her governing body.**

**F. A member shall not solicit or accept any gift, gratuity, favor, entertainment, loan, or unusual discount from any person or entity, which has obtained or is seeking to obtain a decision on any matter from the governing body. This prohibition does not include food or drink or other entertainment as part of a meal or event if the value of such items does not exceed Fifty-eight Dollars (\$58.00) per occasion; nor does it include items of insignificant value routinely given in the ordinary course of business.**

**G. A member shall not accept honoraria or other compensation for activities, which are, or should be, performed as part of one's official duties, except as provided by the Comprehensive Travel Regulations of the Department of Finance and Administration.**

## **5. Disclosure.**

**A. All members shall annually review the Conflict of Interest Policy, and submit their Conflict of Interest Policy Acknowledgment forms and Conflict of Interest Disclosure forms to the Commissioner's Designees. The Commissioner's Designees shall provide copies of said forms to the presiding officers of the Boards, Commissions, and Committees. Said forms shall be available for public review.**

**B. Prior to the transaction of business by any Board, Commission, or Committee, all members shall be reminded by the presiding officer or legal counsel to disclose their financial or personal interests in accordance with the Conflict of Interest Policy.**

**C. Any member, upon determining that a matter taken up by a Board, Commission, or Committee presents a conflict of interest under this policy shall immediately notify the presiding officer and publicly acknowledge such conflict.**

**D. All members shall make every reasonable effort to avoid even the appearance of a conflict of interest.**

**E. The vote of any such member having a conflict of interest who does not so inform the Board, Commission, or Committee of such conflict may be avoidable if challenged. When a challenge is made, the Board, Commission, or Committee shall investigate the matter, determine whether or not a conflict exists, and decide what should be done given the circumstances.**

**MEDICAL CARE AND COST CONTAINMENT COMMITTEE BY-LAWS**

ARTICLE 1 – ADOPTION

Section 1. The Medical Care and Cost Containment Committee hereby adopts these Bylaws effective this the 18<sup>th</sup> day of July, 2008.

ARTICLE I -- OFFICES

Section 1. The registered office of the Committee shall be at:

220 French Landing Dr.  
Nashville, TN 37243

The registered agent in charge thereof shall be:

The Medical Director as appointed by the Commissioner of the Department of Labor and Workforce Development pursuant to T.C.A. §50-6-126.

Section 2. The Committee may also have offices at such other places as the Members may from time to time appoint or the business of the Committee may require.

ARTICLE II -- Meetings

Section 1. Quorum: A majority of the number of Members entitled to vote, represented in person, by telephone, or by proxy, shall constitute a quorum at a meeting of the Committee. The Medical Director shall also be included in the count for the purposes of a quorum.

Section 2. Proxies: Each Member entitled to vote may authorize another person or persons to act for him or her by proxy. To be valid, the Member must submit notice of the proxy in writing prior to the Committee meeting and a proxy shall be effective only for a single, specific meeting date. All proxies shall be filed with the Medical Director prior to a scheduled meeting.

Section 3. Notice of Meetings: Written notice of a meeting shall be provided to all Members which shall state the place, date and hour of the meeting. Written notice of any meeting shall be given not less than ten (10) calendar days before the scheduled date of the meeting.

ARTICLE III -- VACANCIES

Section 1. Any Committee vacancy shall be filled pursuant to the appointment procedures outlined in T.C.A. § 50-6-125.

## ARTICLE VI -- AMENDMENTS

Section 1. These By-Laws may be amended or repealed by the vote of a majority of the Members at any regular Committee meeting, duly convened after written notice to the Members.

**MEDICAL CARE AND CONST CONTAINMENT COMMITTEE MEETING  
DECEMBER 10, 2013**

In Attendance:

Angelia L. Wright, Tennessee Hospital Assoc.  
Jeff Ford, TN Chamber of Commerce and Industry  
Jim McBride, Pharm D, TN Pharmacists Assoc.  
Phyllis Luttrell, RN Committee Consultant, CorVel Corporation  
Jeff Francis, TN Division of WC  
Frank E. "Wink" Neal III, Associated Builders & Contractors, Inc.  
Mary Yarbrough, M.D., Tennessee Medical Association  
Robert Snyder, M.D., Tennessee Medical Association  
Mary Layne Van Cleave, Tennessee Hospital Association,  
John Brophy, MD, Tennessee Medical Association  
Lisa Hartman, RN, Tennessee AFL-CIO State Labor Council  
Everett Sinor, Esq – Health Insurance Industry  
Suzy Douglas, RN – TDOL/WFD  
Brooke Griffith – TDOL/WFD  
Kelly Burns – TDOL/WFD  
Josh Baker, Esq. – TDOL/WFD

**WELCOME**

Wink Neal called the meeting to order and welcomed the committee and all attending guests. Introductions of the committee were made by Dr. Yarbrough.

**REVIEW OF CASES**

<b>RD1</b>	<b>Provider:</b> Physicians Partner	<b>Committee Decision:</b>	Due additional \$25.97
<b>RD2</b>	<b>Provider:</b> Physicians Partner	<b>Committee Decision:</b>	Due No Additional PMT
<b>RD3</b>	<b>Provider:</b> Physicians Partner	<b>Committee Decision:</b>	Due No Additional PMT
<b>RD4</b>	<b>Provider:</b> Physicians Partner	<b>Committee Decision:</b>	Due No Additional PMT
<b>RD5</b>	<b>Provider:</b> Steven Musick, DO	<b>Committee Decision:</b>	Due No Additional PMT
<b>Case 117</b>	<b>Provider:</b> HCA Parkridge East	<b>Committee Decision:</b>	Due additional \$1278.02
<b>Case 9</b>	<b>Provider:</b> HCA Hendersonville	<b>Committee Decision:</b>	Due additional \$904.54
<b>Case 12</b>	<b>Provider:</b> Bristol Neuro Surgery	<b>Committee Decision:</b>	Due additional \$240.00
<b>Case 13</b>	<b>Provider:</b> Bristol Neuro Surgery	<b>Committee Decision:</b>	Due No Additional PMT
<b>Case 14</b>	<b>Provider:</b> HCA Skyline Med Center	<b>Committee Decision:</b>	Due additional \$11,568.38
<b>Case 15</b>	<b>Provider:</b> HCA Skyline Med Center	<b>Committee Decision:</b>	Due No Additional PMT
<b>Case 16</b>	<b>Provider:</b> Vanderbilt Stallworth Rehab	<b>Committee Decision:</b>	Due Additional \$2,109
<b>Case 17</b>	<b>Provider:</b> HCA Skyline Med Center	<b>Committee Decision:</b>	Due No Additional PMT
<b>111</b>	<b>Provider:</b> UT Medical Center	<b>Committee Decision:</b>	Due additional \$6,000
<b>112</b>	<b>Provider:</b> UT Medical Center	<b>Committee Decision:</b>	Due additional \$3.600

## **CLOSING**

After reviewing cases, the meeting was adjourned. The next Medical Cost Containment Committee Meeting will be Thursday, April 3, 2014 at 12 Noon.

**MEDICAL CARE AND CONST CONTAINMENT COMMITTEE MEETING  
APRIL 3, 2014**

In Attendance:

Frank E. "Wink" Neal III, Associated Builders & Contractors, Inc.  
 Mary Yarbrough, M.D., Tennessee Medical Association  
 Robert Snyder, M.D., Medical Director  
 John Brophy, MD, Tennessee Medical Association  
 Jenifer Pianpiano, Tennessee AFL-CIO State Labor Council  
 Dr. Keith Graves, Tennessee Chiropractic Association  
 Lisa Hartman, RN, Tennessee AFL-CIO State Labor Council  
 Everett Sinor, Esq – Health Insurance Industry  
 Jim McBride, Tennessee Pharmacists Association  
 Jeff Ford, Tennessee Chamber of Commerce and Industry  
 Phyllis Luttrell, Corvel Corporation  
 Abbie Hudgens, Administrator TDOL/WFD  
 Landon Lackey, Attorney TDOL/WFD  
 Suzy Douglas, RN – TDOL/WFD  
 Brooke Griffith – TDOL/WFD  
 Kelly Burns – TDOL/WFD  
 Margaret Collier-TDOL/WFD

**WELCOME**

Wink Neal called the meeting to order and welcomed the committee.

**REVIEW OF CASES**

<u>Case #</u>	<u>Provider:</u>	<b>Committee Decision:</b>		
2012-1	Vanderbilt	<b>Committee Decision:</b>	Due additional	\$ 52,282.54
2012-2	Saint Francis	<b>Committee Decision:</b>	Due additional	\$ 7,445.71
2012-3	HCA-Southern Hills	<b>Committee Decision:</b>	Due additional	\$ 265.85
2012-4	HCA-Summit	<b>Committee Decision:</b>	Due additional	\$ 3,792.91
2012-5	HCA-Southern Hills	<b>Committee Decision:</b>	Due additional	\$ 19,588.64
2012-6	HCA-Centennial	<b>Committee Decision:</b>	Due additional	\$ 4,743.53
2012-7	Vanderbilt	<b>Committee Decision:</b>	Due additional	\$ 8,845.52
2012-8	Appalachain Ortho	<b>Committee Decision:</b>	Due additional	\$ 957.54
2012-9	Brookwood Medical	<b>Committee Decision:</b>	Due additional	\$ 35,448.80
2012-10	HCA-Parkridge Hospital	<b>Committee Decision:</b>	Due additional	\$ 951.91
2012-11A	HCA-Summit	<b>Committee Decision:</b>	Due additional	\$ 1,447.90
2012-11B	HCA-Summit	<b>Committee Decision</b>	Due No additional PMT	
2012-12	Regional Medical Center	<b>Committee Decision</b>	Due additional	\$ 12,090.09
2012-13	HCA-Skyline Hospital	<b>Committee Decision</b>	Due additional	\$ 1,450.13

**REVIEW OF CASES CONTINUED – PG 2**

<u>Case #</u>	<u>Provider:</u>		
2012-14	HCA- Centennial Hospital	<b>Committee Decision</b>	Due additional \$ 5,302.20
2012-15	HCA-Centennial Hospital	<b>Committee Decision</b>	Due No additional PMT
2012-16	HCA-Centennial Hospital	<b>Committee Decision</b>	Due No additional PMT
2012-17	HCA-Parkridge Hospital	<b>Committee Decision</b>	Due additional \$ 593.46
2012-18	HCA-Skyline Hospital	<b>Committee Decision</b>	Due additional \$ 14,164.10
2012-19	HCA-Summit	<b>Committee Decision</b>	Due additional \$ 517.20
2012-20	HCA-Parkridge	<b>Committee Decision</b>	Due additional \$ 2,795.40
2012-21	The Surgery Center	<b>Committee Decision</b>	Due additional \$ 1,491.13
2012-22	Saint Francis	<b>Committee Decision</b>	Due No additional PMT
2012-23	HCA-Hendersonville	<b>Committee Decision</b>	Due additional \$ 368.01
2014-1	Parkwest Surgery Center	<b>Committee Decision</b>	Due additional \$ 1,024.77
2014-2	Summit Surgery Center	<b>Committee Decision</b>	Due additional \$ 1,583.72
2014-3	Summit Surgery Center	<b>Committee Decision</b>	Due additional \$ 1,454.72
2014-4A	Orlando Health Hospital	<b>Incomplete – Closed</b>	
2014-4B	Orlando Health Hospital	<b>Incomplete-Closed</b>	
2014-5	Summit Surgery Center	<b>Committee Decision</b>	Due additional \$ 1,552.01
2014-6	Saint Francis	<b>Closed as untimely</b>	

**Discussions:**

There was a discussion regarding the Medical Fee Schedule, including the global billing period, add on codes, accepting ICD.10, clarification of conversion factor and the Tennessee multiplier, and the definition of trauma

**CLOSING**

This Division would like to formally thank the members for their participation on this Committee. The meeting was adjourned. No further MCCC scheduled.

**MEDICAL PAYMENT COMMITTEE BY-LAWS**

ARTICLE I – ADOPTION

Section 1. The Medical Payment Committee hereby adopts these Bylaws effective this the 4<sup>th</sup> day of September, 2014.

ARTICLE II - OFFICES

Section 1. The registered office of the Committee shall be at:

220 French Landing Dr.  
Nashville, TN 37243

The registered agent in charge thereof shall be:

The Medical Director as appointed by the Administrator of the Division of Workers' Compensation pursuant to T.C.A. §50-6-126.

Section 2. The Committee may also have offices at such other places as the Members may from time to time appoint or the business of the Committee may require.

ARTICLE III - Meetings

Section 1. Quorum: A majority of the number of Members entitled to vote, represented in person, by telephone, by videoconference, or by proxy, shall constitute a quorum at a meeting of the Committee. The Medical Director shall also be included in the count for the purposes of a quorum.

Section 2. Proxies: Each Member entitled to vote may authorize another person or persons to act for him or her by proxy. To be valid, the Member must submit notice of the proxy in writing prior to the Committee meeting and a proxy shall be effective only for a single, specific meeting date. All proxies shall be filed with the Medical Director prior to a scheduled meeting.

Section 3. Notice of Meetings: Written notice of a meeting shall be provided to all Members which shall state the place, date and hour of the meeting. Written notice of any meeting shall be given not less than ten (10) calendar days before the scheduled date of the meeting.

ARTICLE IV - VACANCIES

Section 1. Any Committee vacancy shall be filled pursuant to the appointment procedures outlined in T.C.A. § 50-6-125.

## ARTICLE V - AMENDMENTS

Section 1. These By-Laws may be amended or repealed by the vote of a majority of the Members at any regular Committee meeting, duly convened after written notice to the Members.

# DIVISION OF WORKERS' COMPENSATION MEDICAL PAYMENT COMMITTEE

SEPTEMBER 4, 2014

## **ATTENDEES:**

### In Attendance:

Gwyn Walters, Proxy, Medical Provider Industry  
Jeff Ford, TN Chamber of Commerce and Industry  
Jim McBride, Pharm D, TN Pharmacists Assoc. (on phone)  
Frank E. "Wink" Neal III, Associated Builders & Contractors, Inc.  
Mary Yarbrough, M.D., Tennessee Medical Association  
Everett Sinor, Esq – Health Insurance Industry  
Trevia Overstreet – Corvel Liaison  
Robert B. Snyder, Medical Director – TDOL/WFD  
Abigail Hudgens, Administrator – TDOL/WFD  
Suzy Douglas, RN – TDOL/WFD  
Kelly Burns – TDOL/WFD  
Troy Haley, Esq. – TDOL/WFD

## **WELCOME:**

Abbie Hudgens called the meeting to order and welcomed the committee and all attending guests to the newly formed Medical Payment Committee Meeting.

## **REVIEW OF CASES**

<b>MPC 2014-1</b>	<b>Provider:</b> St. Francis Hospital	<b>Committee Decision:</b>	Refund of \$803.35
<b>MPC 2014-2</b>	<b>Provider:</b> St. Francis Hospital	<b>Committee Decision:</b>	Additional \$586.20
<b>MPC 2014-3</b>	<b>Provider:</b> Regional Med. Ctr. of Memphis	<b>Committee Decision:</b>	Additional \$120,491.13
<b>MPC 2014-4</b>	<b>Provider:</b> Vanderbilt Medical Center	<b>Committee Decision:</b>	Additional \$1943.54

## **DISCUSSION OF MEDICAL FEE SCHEDULE**

Handouts will be included with the minutes.

## **CLOSING**

The meeting was adjourned.

## **NEXT:**

Medical Payment Committee will be Tuesday, December 9, 2014 from 2-4 pm.