

WORKERS' COMPENSATION  
MANAGEMENT-LABOR ADVISORY COMMITTEE  
Access To Care Subcommittee Committee Meeting

September 12, 2025

9:00 a.m.– 11:00 a.m.

***Committee members present via zoom:***

Emily Cronan, Oregon Nurses Association

Kim Schlessinger, Samaritan Health Services

***Staff:***

Teri Watson, MLAC Committee Administrator

Baaba Ampah, MLAC Assistant

Agenda Item	Discussion
<b>Opening</b>	
(00:00:03)	Co-chair Kim Schlessinger called the meeting to order.
	<b>Proposals/Recommendations</b>
(00:02:20)	It was noted that <a href="#">SAIF</a> , <a href="#">Lon Holston</a> , and <a href="#">Dr. Verne Saboe</a> , Oregon Chiropractic association, has proposal memos, but will not be presented during this meeting, but rather at the next meeting.
(00:04:25)	The <a href="#">Access to Care Object and Problem list</a> was presented. Co-chair Schlessinger encouraged stakeholders to share their thoughts on bullet points that stand out.
(00:07:37)	Elaine Schooler, SAIF, suggested submitting the list to the Medical Advisory Committee (MAC) for their comments and observations, so that they may provide additional insight and help prioritize pain points from their perspective. Matt West, WCD Administrator, explained that the division supports MAC, which meets quarterly. Given that Dr. Bowman chairs MAC and shared his perspective at the last subcommittee meeting, Co-chair Cronan pointed out that the subcommittee has already received feedback from that lens.
(00:10:44)	Co-chair Cronan flagged a typo under “Barriers”: it should read “assess instead of “access”.
(00:14:36)	Co-chair Schlessinger encouraged stakeholders to reach out with any additional observations.
(00:16:00)	Under objective number 3, “Map system-level pain points and corresponding solutions”, Co-chair Cronan asked for guidance on grouping each problem into a bucket of solutions and clarifying which entity’s purview each fall under (e.g.,

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WCD rulemaking, MCO responsibility, or outreach). Administrator West responded that WCD policy team can help make that happen.

- (00:18:01) Co-chair Schlessinger clarified that in this meeting, she would like stakeholders to identify standout items on the object and problem list and come up with some recommendations. Co-chair Cronan suggested to first coordinate where each issue goes, and asked stakeholders if the committee is on track.
- (00:21:10) Jovanna Patrick, OTLA, thanked the co-chairs and supported the “bucketing” of issues. She highlighted three issues: not enough participating doctors in the system, slow/unclear communication and authorization responses from adjusters, and administrative complexity that requires clinics to hire highly trained staff. She suggested a streamlined portal.
- (00:23:05) To Teri Watson’s question, Co-chair Cronan explained an example that an injured workers’ right to choice of care cannot be restricted, but perspectives, from previous meetings, have expressed the complication of not being able to direct care. Finding solutions, and who would be responsible for them, could allow the committee to look at its impact and if the ask would be feasible.
- (00:25:48) Co-chair Schlessinger agreed, and suggested adding an action item/follow up to corresponding categories. Co-chair Cronan agreed again, mentioning that discussions around increased education had solutions such as certification for the billing process, and being able to offer resources to smaller practices. The education might fall into different stakeholder responsibility such as WCD, MCOs, or private insurers. Co-chair Cronan continued this will make the process more familiar to office staff, which would increase proficiency, but might go to multiple stakeholders as a responsibility.
- (00:27:55) Elaine Schooler agreed with the bucket idea as it will be helpful to synthesize and organize bullet points. She noted it is challenging to prioritize at first blush, and suggested completing the bucketing idea a week before the next meeting. Then have a stakeholder expectation to review that report, in which they would then prioritize issues and explain the reason behind it to create a robust discussion.
- (00:30:02) Co-chair Cronan suggested prioritizing items in a mappable way to be able to share with stakeholders. She recognized that increased networking and accessing an additional group of providers is a long-term goal, whereas some components might have simpler solutions, which can be prioritized differently.
- (00:31:50) It was established that the report would be sent to participating stakeholders via email but will also be posted to the subcommittee website for future participants. Kirsten Adams, AGC, echoed Co-chair Cronan’s statement that there is multiple layers to the solutions, with some low hanging fruit and bigger challenges. Co-chair Cronan added that there are some small improvements that can be
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implemented right now, that can be completed through interpretive guidelines to improve the lives of injured workers quickly. As well as compounding larger solutions.

- (00:33:27) Co-chair Schlessinger noted that there were some issues that are already being worked on. Such as time limit for NP (nurse practitioners) and PA (physician assistants), which seems like through feedback it is being extended. She suggested documenting such problems and on-going solutions. Co-chair Cronan added that the final report/recommendation should have a crosswalk to any ORS/OAR regulations, so that it is easy for people to understand reasons behind the recommendations. In an example to restricting choice/directing care, she suggested linking the actual rule as it stands as a reference point for interested parties. Co-chair Cronan noted that the suggestion is not urgent.
- (00:36:31) Teri Watson noted that at the next meeting, SAIF will give their presentation, and a recommendation to the legislative concept is needed. She mentioned that she would get the report completed by next Friday, with the expectation that everyone will review it. On October 2<sup>nd</sup> the subcommittee would make their recommendations to the full MLAC.
- (00:38:07) Co-chair Cronan asked if the subcommittee wanted to make a recommendations around therapy/recommendation, who is responsible for that. She noted that she does not want to make recommendation that are not possible. Administrator West answered that the WCD staff in the subcommittee will direct inquiries to the WCD policy team, to address rule/statue scenarios. Then it will be put out to the broader group to see if there are any limitations.
- (00:40:01) The [Access to Care Object and Problem list](#) will be reviewed by WCD policy team who will put each issue into “buckets”. Co-chair Cronan noted that her reasoning is to make sure that items on the list fall within actual solvable recommendations. Administrator West added that if rulemaking is necessary, the public rulemaking process will begin. Co-chair Schlessinger suggested a “future considerations” category to plant a seed in other stakeholders to consider implementing such considerations.
- (00:43:41) Ann Klein, Majoris Health Systems, mentioned that there is a number of suggestions and opportunities that have been highlighted through this process that do not require official process, but rather feedback. She noted that stakeholders are very committed to continue to strengthen the system. Ann Klein noted that in listening to the physical therapy precertification issues, Majoris Health has crystallized that the solution and dates were creating a larger problem. So they have already worked on updating how to issue decision on physical therapy to focus on frequency and a time range that provides buffer and opportunity for flexibility. She said that sometimes it requires these types of conversation to create the next step. Co-chairs showed their appreciation.
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- (00:47:01) Administrator West commented that the next [MAC meeting](#) is on October 31<sup>st</sup>, and suggested highlighting specific items that the committee would want MAC to review. It was mentioned that MAC meets in Wilsonville at the WCD Durham office.
- (00:48:07) To Co-chair Cronan's question, Teri Watson explained that the policy team and committee staff will review the objects and problems list, and send it to co-chairs for their edits. After, it will be posted on website later in the week.
- (00:52:53) Teri Watson clarified Co-chair Schlessinger's question, explaining that Lon Holston's proposal is not part of the "bucket list", and is rather a proposal for additional providers. Lon Holston will speak to it on the 26<sup>th</sup> of September.
- (00:53:43) Teri Watson reviewed that the object and problem list will be put into "bucket list" in collaboration with the WCD Policy Team. Which will be available to co-chairs on Monday, and available to stakeholders by Wednesday.
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- (00:54:34) Co-chair Schlessinger adjourned the meeting at 9:55 a.m.

\*These minutes include time stamps from the meeting video found here:

<https://www.youtube.com/watch?v=yOquTs-I5kU>

\*\*Referenced documents can be found on the MLAC Meeting Information page here:

<https://www.oregon.gov/DCBS/mlac/Pages/access-to-care-subcommittee.aspx>