

WORKERS' COMPENSATION
MANAGEMENT-LABOR ADVISORY COMMITTEE
Full Committee Meeting

Mar. 5, 2026
10:00 a.m.
Virtual meeting

Committee members (present via zoom):

MLAC members and Organization they represent
Co-Chair Patrick Priest, CIS Trust
Co-Chair Scott Strickland, SMART, Local 16
Sara Duckwall, Duckwall Fruit
Margaret Weddell, Labor Representative
Stacy Lewallen, Fortis Construction, Inc (**Absent**)
Sarah Merrick, City of Salem Fire Department
Emily Cronan, Oregon Nurses Association
Ryan Hearn, Anduril Industries
Kim Schlessinger, Samaritan Health Services
Sean O'Day, Director DCBS (**Absent**)

Staff:

Teri Watson, MLAC Committee Administrator
Baaba Ampah, MLAC Assistant

Agenda Item	Discussion
Opening (00:00:00)	Affirmation and Roll Call Co-chair Patrick Priest called the meeting to order and shared an affirmation. Teri Watson called the roll of members. A quorum was present.
(00:02:03)	Public Comment – Dr. Saboe Dr. Vern Saboe, Oregon Chiropractic Association (OCA), opened his public comment by referencing MLAC's webpage, which states that MLAC is "committed to a common set of values: balance and fairness" noting that the OCA, and for "me personally," had hoped and prayed that MLAC would in fact provide that balance and fairness in regards to last session's OCA's proposal to allow chiropractic physicians to serve as attending physicians for the life of an injured worker's claim. He noted that regrettably, MLAC instead appointed two nurse practitioners as co-chairs of the interim Access to Care (ATC) subcommittee. He stated that considering SAIF's 2025 HB 3374, which died but would have allowed nurse practitioners to serve as attending physicians, for MLAC to then appoint two nurse practitioners as co-chairs constituted a clear conflict of interest. OCA chose not to voice this concern, hoping and praying still for that balance and fairness. Dr. Saboe stated that although the subcommittee allowed stakeholder input, there was no discussion or debate of facts, data, or scientific medical evidence as to why providing attending

physician status to chiropractic physicians, physician assistants (PAs), or nurse practitioners (NPs) would be in the best interest, or not, of injured workers. He stated for balance and fairness the planned interim summit and task force meetings on access to care must include a robust discussion and debate regarding facts, data, and quality medical evidence relative to the question, “Is it in the best interest of injured workers for chiropractic physicians to serve as attending physicians, yes or no, and why?”

(00:04:08) Emily Cronan, co-chair of the ATC subcommittee, responded by clarifying for the record that she is not an NP, and does not have that certification. She is a registered nurse (RN) and has never been or intends to become a licensed independent practitioner.

(00:07:14) **Public Comment - Oregon Trial Lawyer Association (OTLA)**
Due to OTLA’s Keith Semple delayed arrival, the committee tabled OTLA’s proposed public comment until he arrived.

(00:06:50) **Review minutes from Feb. 5, 2026**
The Feb. 5, 2026, minutes were deferred to next meeting to allow for further review.

(00:08:41) **Public Comment – OTLA**
Keith Semple and Jovanna Patrick for Oregon Trial Lawyers Association (OTLA), presented [their public comment](#) on the [proposed WCD pre-authorization rules](#). OTLA made comments and suggested changes to the proposed rules but it occurred to them that members of the ATC subcommittee and the larger MLAC committee may not have seen the proposed rules. Keith expressed concerns about the proposed rules as drafted and he doesn’t believe that they go far enough to address the crisis that spurred the ATC subcommittee meetings over the summer. Keith noted that two things came out of the ATC subcommittee meetings that he can recall: (1) the preauthorization process because providers were not able to get timely responses from insurers, preventing good medical outcomes; but also very frustrating that providers are in limbo, seeing workers month after month, and not having answers from insurers. That was one of the major reasons providers did not want to maybe participate [in the workers’ compensation system]; and (2) the additional administrative work on providers without adequate compensation to reflect the additional burden. The conversation on compensation [for administrative work] was set over for another rulemaking session, while the preauthorization discussion was included in the medical services rulemaking process. Keith noted that the idea as he recalled from the subcommittee suggested a preauthorization process patterned on the current elective surgery rule. This rule provides a process for the insurer to respond to a proposed elective surgery within seven days of receiving notice from the provider [OAR 436-010-0250(2)]. And, if the insurer doesn’t follow the process, they lose the right to contest if the service was reasonable and necessary. This process offers options for approval, denial, or

requesting a second opinion; and provides a path forward for workers to request adjudication under a de facto denial type process and requires confirmed receipt as the trigger for the deadline to respond.

(00:13:00) Keith Semple expressed that the biggest concern he has with the proposed rule is that it is relatively narrow as it applies only to attending physicians and they are the only ones that can make use of this process. And it only applies to limited types of services; they're enumerated as opposed to saying it can apply to any provider or any service. Another concern of Keith's is the turnaround time is 14 days rather than seven days, and the rule is triggered by the insurer's receipt rather than when the provider sent [the preauthorization request]. So if you can't prove the insurer received the request, this process doesn't even get started. He also noted the worker is given a deadline for filing on a de facto denial if the insurer ignores the request. The worker is supposed to know the deadline, rather than the provider, to request an administrative review. The worker could be out of luck if they don't know the process, while the insurer faces no consequences. He suggested that there needs to be [rule] language discussing what constitutes sending or receipt, or when something is deemed received so that we, workers, and providers know what triggers the process; and what they should be looking for and submitting to the division if they want some review. Keith Semple requested a reconsideration of the rules. There was an advisory committee and some discussion of what the rules might look like, and then we got proposed rules and have major concerns about the rules. Then we move to notice and comment, and of course we submitted OTLA's comments. Going from past experience, the proposed rules look a lot like final rules. Keith stated he has rarely seen major changes be made in response to stakeholder input in the rulemaking. Keith indicated that he feels that these conversations have been taking place for 10 years and the crisis has deepened in that time, and we now have a chance to do something very bold to address the concern. Keith feels that this is not going to help providers or the public. Keith would like to see more stakeholder input from medical providers and ATC subcommittee members. He would like to have physician compensation rulemaking discussion alongside subcommittee meetings so both conversations can happen at the same time.

(00:18:37) Jovanna Patrick expressed appreciation for the extensive work done by the ATC subcommittee, noting that WCD's rules do not reflect the subcommittee's recommendation. She noted that other than the attending physician, many service providers request many medical services, and these providers need assurance there is a process that notices are deemed received by the insurer if they fax it and have confirmation. Jovanna argued that the proposed rule fails to incentivize insurers to document receipts or respond within a specific time but rather gives insurers 60 days of inaction while placing the burden on workers, many of whom are unrepresented and lack understanding of the process. She explained that insurers get too much information from all sources and fail to respond to time. The intent was to hold insurers accountable to response times and simplify communication. Jovanna described a case where a worker's surgery

request went unanswered for a year despite repeated faxes, emails, and calls. She urged that the rules reflect clear guides with short response time and faster dispute processes. Jovanna concluded that the proposed rule does not help stakeholders as intended, especially workers, fails to solve the identified problems; and needs further discussion before being finalized.

(00:23:53) Matt West, WCD administrator, shared that WCD is committed to reviewing testimony from OTLA and other stakeholders. Because of where the division is in the rulemaking process, we are limited to what we can say. WCD is in the process of digesting such feedback, and as part of fulling consideration feedback we will be looking at if we need to tweak rule language or pull a rule completely for further discussion.

(00:24:50) Emily Cronan noted that as the ATC subcommittee labor co-chair, she agrees that the intent of the subcommittee recommendation was to create a path forward for injured workers who experience insurer delays and to create shared accountability. Emily shared that in reviewing the comments she doesn't see how the changes serve what was intended by the subcommittee. She added that the committee never discussed adding deadlines and asked why those components were added in the rule. Administrator West responded that the proposed language is not final and WCD will follow up.

Workers' Compensation Board case law updates – Cathy Ostrand

(00:26:30) Cathy Ostrand informed the committee that Lauren Eldridge is unable to attend so no case law update was available. Lauren will provide the update at next month's meeting.

Workers' Compensation Division (WCD) updates – Teri Watson

(00:27:00) Teri Watson gave a summary of bill activity:

- SB 1519, the temporary total disability bill, has passed both chambers and is headed to the Governor's desk for signature, with an effective date of Jan. 1, 2027.
- HB 4027, the BOLI expense fund bill, has passed both chambers and is also headed to the Governor's desk for signature; it will take effect 91 days after sine die.
- HB 4040, which grants full attending physician status to nurse practitioners and physician associates, is currently in the Senate for its third reading and is expected to pass. This bill contains an emergency clause, meaning it will go into effect as soon as it is signed and will require a lot of work for the WCD policy analysts.

(00:28:25) Matt West, WCD administrator, reported that the division is currently evaluating stakeholder feedback on the proposed rules [OAR chapter 436], divisions 9, 10, and 15. Related to HB 4040 and its emergency clause, WCD will need to update multiple rules immediately upon the bill's signing. Temporary rules will be issued in divisions 9, 10, 15, 30, 35, and 60, which will start a 180-day clock for

filing permanent rules. A stakeholder rules advisory committee will convene within the next six months to assist with this process. With divisions 9, 10, and 15 specifically it is going to be interesting as once HB 4040 is signed we will have temporary rules, and then on April 1 we will have permanent rules related to the changes currently up for discussion, followed by temporary rule changes to the April 1 permanent rules, and then an additional advisory committee to make the temporary rule changes permanent. WCD will communicate updates throughout the process.

2026 Workplan – review and update

(00:32:14) Teri Watson presented the [updated workplan](#), which outlines MLAC’s short and long term goals, noting that the goals are consistent with the [list of workplan topics](#). Teri stated that at the end of 2027, MLAC will review the short-term goals for 2025, 2026 and 2027 and update the long-term goals for 2027 to 2029.

(00:34:42) The committee reviewed the [workplan](#):
Q1 Jan.-Mar. 2026 workplan — complete.

(00:35:52) *Q2 April-June 2026*
Teri Watson clarified to Co-chair Patrick Priest’s question about whether the regulatory tour involved rulemaking, explaining that the purpose is to show how various regulatory bodies interact with WCD and the roles they play. Matt West added that both Oregon OSHA, and the Department of Financial Regulation (DFR) have a nexus into workers’ compensation system: WCD regulates the workers’ compensation industry itself, while DFR regulates insurance companies, including workers’ compensation insurers and their premiums. He emphasized that the tour is an opportunity for educating MLAC about parts of the system outside WCD.

(00:37:38) Co-chair Scott Strickland added that the regulatory tour is the last chain in the injured worker panel and employer panel in understanding the different perspectives and lenses for stakeholder. It introduces the different players in the system so that DCBS is not viewed as a single, amorphous entity, but rather identifying the different roles of DCBS agencies. He concluded that it gives MLAC a holistic perspective of different stakeholders engaged in the workers’ compensation process in Oregon.

(00:39:44) Co-chair Priest suggested asking Oregon OSHA for feedback of what MLAC could bring to make the June 16 offsite meeting experience at the Oregon OSHA conference better.

(00:41:05) *Q3 July-Sept. 2026*
Teri Watson noted that she wanted to bring the Healthcare Summit topic and workers’ compensation system issues to Chair Nosse and Chair Patterson about expanding the discussion, since workers’ compensation is a piece of healthcare.

There are so many different healthcare forums that already exist, so she is trying to figure out the best way to move forward.

- (00:42:10) Emily Cronan reminded the group that during the December discussion, MLAC noted not broadening the scope so that nothing gets solved. Expanding the scope too far would reduce the committee's ability in solving smaller issues that impact injured workers.
- (00:43:07) Co-chair Priest asked if there were any particular topics Emily Cronan would like to focus on. Emily responded that there were some recommendations and larger conversations around provider access, vacancy crisis in certain disciplines and many more. She suggested revisiting the top problems identified in the ATC subcommittee meetings, even those that didn't become recommendations, to use as a rudimentary framework to build up the fall summit.
- (00:44:27) Co-chair Priest asked if the subcommittee was still intact or retired. Emily Cronan responded that the subcommittee had completed its original charge of reviewing the bill and conducting listening sessions, but the intention was for it to eventually form a new structure with more parties involved. Kim Schlessinger added that the subcommittee originally formed in response to SAIF's proposal to become a managed care organization, and when that proposal didn't advance, the group continued meeting to address the underlying ATC issues for injured workers. She felt the subcommittee served the purpose of reviewing the SAIF proposal but questioned how much further it could go since many of the problems extend beyond workers' compensation. She asked if they had the ability to address this huge problem that really isn't just workers' compensation insurance but is healthcare in general. She concluded that this is why Teri was asked to explore whether a bigger committee was appropriate to look at those issues.
- (00:46:45) Teri Watson asked for clarification if the discussion is pointing to two issues, the ATC subcommittee and the proposed healthcare summit. Co-chair Priest agreed but stated he is unclear what MLAC's role would be in the healthcare summit. He noted that the ATC subcommittee originally inspired the idea for the summit, but the committee now needs to determine what MLAC's role is at a healthcare summit and who would lead that work. Co-chair Priest supported Teri's approach of connecting the summit to a larger, existing healthcare forum to have MLAC present. He suggested that once MLAC has a seat at the table, it could be discussed who would be the best representative and what do we have to offer.
- (00:48:07) Sara Duckwall agreed with Emily Cronan to keep MLAC's focus on workers' compensation issues. Broadening it too far and to a healthcare summit may not be the best venue, or use of time to address workers' compensation issues. She suggested that Teri could parse out a piece of the summit to get the right participants in the right room so the committee can address only the workers' compensation piece without overextending its scope. Emily Cronan added that a
-

limitation of the subcommittee meetings was a limited number of stakeholders, and the burdens heard around access are related to a limited number of providers across various disciplines available to injured workers to improve their overall continuum of care. In that regard, we are missing hearing from hospital systems or the hospital association. A lot of mid-level and specialty providers are participating as directed by their larger healthcare systems. So we can't hear from and learn from them and figure out how to work together if they aren't present to have the conversation. Emily explained that the intent of broadening the summit was to bring more stakeholders who have a direct impact on how injured workers are treated to the table, without expanding it to become a statewide healthcare discussion.

(00:52:42) Co-chair Priest clarified that it instead of referring to a “healthcare summit” which makes it sound like we are hosting a summit, what is needed is participating in someone’s healthcare summit to offer a workers’ compensation perspective.

(00:53:24) Co-chair Priest mentioned that Emily Cronan has great passion for this and to bring back opportunities from her work to future meetings. Teri Watson stated the work plan will be reviewed again in August, and maybe October, after which the 2027 legislative information will start trickling.

(00:54:39) Co-chair Strickland noted that the thought behind the summit was to bring stakeholder engagement. He suggested an ATC stakeholder summit to seek different perspectives and to draw in organizations that did not have the opportunity to participate in the ATC subcommittee. He mentioned that it would be kept in the workers’ compensation scope and our ability. Stakeholders bring creative solutions, and outside the box thinking based on the variety of ways they interact and intersect with each other could be more productive and get to the recommendation of the subcommittee. He stated that because it is difficult to differentiate between a provider crisis *independent of* vs. *within* workers’ compensation, WCD and MLAC should not host a stand-alone summit but rather frame it as a stakeholder-driven summit that touches on workers’ compensation issues while welcoming other agencies and issues. He was thinking of providing a portion of a platform for a broader stakeholder meeting.

(00:59:24) Emily Cronan suggested that she and Teri meet beforehand to look at logistics and compile the questions to bring back to the larger committee; and engage legislators who could help get the right people to the table, noting that the summit was originally spurred by the fact that key representatives and organizations were missing.

(01:00:54) Sarah Merrick echoed Emily Cronan’s suggestion, urging the committee to revisit the topic at the April meeting rather than waiting until August, and mentioned that waiting until August to revisit the topic would not do justice to the hard work that was done last summer.

-
- (01:01:23) Sara Duckwall suggested that Kim Schlessinger also be invited to maintain continuity.
- (01:04:14) Co-chair Priest asked Co-chair Strickland if anything needed to be added to the workplan for the fall given the anticipated volume of rulemaking. Co-chair Strickland clarified that nothing needs to be added to the workplan, noting that WCD does a great job in keeping MLAC updated on how that process plays out through department updates.
- (01:04:59) Co-chair Priest asked about MLAC’s role as it relates to rulemaking. Administrator West clarified that MLAC members get invited to the rulemaking advisory committee meetings but have no official role in rulemaking. However, he noted that MLAC members are important stakeholders who are invited to rulemaking advisory committee meetings.
- (01:06:19) The access to care co-chairs will meet with Teri in the near future to review the list of topics and stakeholders and report back to MLAC at the April meeting.
- (01:07:21) *Q4 Oct.-Dec. 2026/2027*
Teri Watson clarified that the “Offsite meeting/Healthcare Summit rural areas – may be pushed to 2027...” idea was generated from Stacy Lewallen, who had suggested having different members go to different meetings to talk about MLAC and healthcare issues, with the goal of increasing communication and outreach about what MLAC does and the workers’ compensation process. She noted that given the busy long [legislative] session, this item may be pushed out to the end of 2027.
- (01:18:12) Sara Duckwall commented that October is typically MLAC’s off-site meeting, and since there are two off-site meetings in quarter two, MLAC is covering that topic in a different time frame. She said that an additional off-site meeting is not needed in October, and quarter four could be about preparing for the 2027 legislative session.
- (01:10:25) Teri Watson noted that she has enough information to make edits to the workplan and will bring the updated workplan to the April meeting.
- (01:11:06) **Upcoming meetings –virtual and off-site meetings:**
April 2 (virtual), 10:00 a.m. – noon.

May 7 (off-site), 4:30 p.m. – 5:15 p.m., [Workers’ Compensation Educational Conference](#), Wilsonville Holiday Inn, Wilsonville, OR. A social hour with community members will follow at 5:15 p.m.

June 16 (offsite), 4:30 p.m. – 5:15 p.m., [Blue Mountain Occupational Safety & Health Conference](#), Pendleton Conference Center, Pendleton, OR. A social hour with community members will follow both meetings at 5:15 p.m.
-

(01:12:01) Co-chair Priest suggested an agenda or list of questions for MLAC members to help prepare for the off-site meetings.

No meeting in July 2026.

(01:13:36) In response to Dr. Saboe's public comment, Kim Schlessinger, Access to Care (ATC) subcommittee management co-chair, asked to respond on the record and stated that she is a nurse practitioner but that was not the role on the ATC subcommittee, the charge was to review the SAIF bill. She did not want his comments to suggest there was a bias or that she was lobbying for nurse practitioners. She described her role as that of a facilitator looking at workers' compensation insurance issues as a whole, identifying barriers, and bringing stakeholders together.

(01:15:12) Emily Cronan made a motion to adjourn the meeting, and Sara Duckwall seconded the motion. The motion passed.

(01:14:04) Co-chair Priest adjourned the meeting at 11:15 p.m.

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

https://www.youtube.com/watch?v=1ceK_o1E2K0&t=2172s

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

<https://www.oregon.gov/dcbs/mlac/Pages/2026-meetings.aspx>