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**Sent:** Tuesday, January 8, 2019 3:50 PM  
**To:** FILSINGER Cara L \* DCBS <[Cara.L.Filsinger@oregon.gov](mailto:Cara.L.Filsinger@oregon.gov)>  
**Subject:** Friday's meeting

In preparation for the MLAC meeting on Friday and HB2424 regarding come-alongs, we would like some information on "providing a documented history of treatment."

1. Is there a definition?

Our rules define a come along provider as: "[A] primary care physician, a chiropractic physician, or an authorized nurse practitioner who is not a managed care organization (MCO) panel provider and who is authorized to continue to treat the worker when the worker becomes enrolled in an MCO." OAR 436-015-0005(2).

A provider "who is authorized to continue to treat" is:

- An authorized nurse practitioner or physician who agrees to comply with MCO treatment standards and protocols; and
- That provider agrees to refer worker to MCO for specialized treatment

2. minimum criteria for history?

Our administrative rules define the history as:

- Medical records document treatment prior to the date of injury, or
- Worker has selected and identified the authorized nurse practitioner or physician through a private health plan, prior to the date of injury

3. What happens if the applying physician only saw the patient twice? Is that a sufficient history?

We believe this would satisfy the criteria.

4. Likewise, would treating someone a couple times five years ago and nothing since then, be enough for approval?

We believe this would satisfy the criteria.

5. Is the MCO the one to decide if the documented history is sufficient?

Yes, with a review of that decision available through the MCO internal dispute resolution process and then, upon request, further review by the Workers' Compensation Division.

Would you be able to answer these questions?

Thank you.