**Workers’ Comp “reforms”: the fallacy of Senate Bill 936.**

Pennsylvania’s House of Representatives continues to debate proposed legislation that will put an insurance claims manager between every worker injured on the job and her or his doctor, effectively denying millions of Pennsylvanians access to the healthcare they need and that their doctors recommend.

Senate Bill 936, now in the House of Representatives, calls for a dramatic change to the state’s workers’ compensation law by establishing a pre-approved list of prescription drugs – a “drug formulary” for every injured worker in the state.

Effectively, this means that the insurance companies can overrule doctors and deny workers the medicine that was prescribed by his or her physician. Medical decisions can only be made by a patient and her/ his doctor - not a national panel or organization dominated by the insurance industry.

It’s a less than candid effort by health insurers and large employers to cut costs at the expense of injured workers.

As a Doctor of Chiropractic, I have treated many injured workers over the years in my practice based in \_\_\_\_\_\_\_\_\_\_\_\_. I know from first-hand experience that this approach, initially focused on prescription drugs, will jeopardize the quality of care that injured workers currently receive from their healthcare providers.

The formularies are obviously first driven by cost. Insurers, which currently exercise massive control already, fight for the cheapest treatment option available for their list of approved treatments, regardless of a doctor’s recommendation, which is always based on the evaluation of the patient. If a specific drug is not on the formulary – because it is usually too expensive – the injured worker is out of luck and must pursue a costly and time consuming appeal process to petition for the medication their doctor has prescribed.

In a worker’s compensation claim- when a worker is living on a reduced income, while incurring medical expenses on top of housing, food, transportation, and other basic costs of living- time is of the essence. In our current system, the hearing and appeal process can take months to complete. Who is on the short end of the proverbial stick? The injured worker.

Yes, insurers’ controls over many healthcare decisions have increased over the last decade, but at some point, providers and injured workers need to step up and say “ENOUGH” to any legislation that could further restrict or delay access to necessary and appropriate care, at the “expense” of potentially devastating consequences for the patient.

Supporters of Senate Bill 936 contend that this legislation will lead to a reduction in opioid usage in our state. There are already non-intrusive resources in place, like the Pennsylvania Prescription Drug Monitoring Program and urine drug screens, which contribute to reducing the prescribing of opioids.

As healthcare professionals, our “playbook” is always specific to the presenting needs of the patient, rather than one written by a national panel of insurers and business interests, which have no clue whatsoever what my patients require.

It is worth noting that those same special interests selling SB 936 have a history of gradually but noticeably pushing even more onerous proposals to control treatments and services. This would include chiropractic care for injured workers. Such proposals are mostly based on the often-flawed recommendations of the same government- sanctioned panel.

If an opioid prescription is cheaper than a series of highly affective and drugless chiropractic services, an insurance company claims adjuster will not blink an eye before approving the opioid. Under a formulary, the goal is to save money rather than provide the doctors prescribed care for the patient.

If Pennsylvania’s lawmakers are sincere about effectively addressing our opioid abuse calamity, they need to go back to the legislative drawing board and include the provider community as active participants in ALL discussions. Lawmakers must thoroughly reconsider meaningful improvements to the serious flaws in SB 936. They need to remember, in the historical context of the current law, that injured workers have surrendered their right to sue in exchange for a system that has committed to provide for wage loss and medical benefits for workplace injuries and illnesses.  Senate Bill 936 cuts to the very heart of that bargain and it would undermine a system that currently works.

Pennsylvania’s public servants- our House of Representatives- need to keep foremost in their minds that they were elected to serve patients, not enhance insurers’ profits at the expense of sound patient care.

To those House members who have opposed this bill, I thank you and urge you to stand strong and continue to put your constituents’ interests- injured workers in this case- first.

To those House members who voted to support insurers’ further intrusion in the patient-doctor relationship, I urge you to place your injured constituents’ interests above the wealthy special interests. Vote NO on SB 936.

The injured men and women I have been proud to treat over the years deserve better than Senate Bill 936 and the continuation of further, profit-driven intrusion into the patient-doctor relationship.

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