

HB 3669/Nurse Practitioner Study

Background Overview:

During the 2003 legislative session, HB 3669 passed by the Legislature and was signed by the Governor. This bill provides, among other things, for an expansion in the authority of nurse practitioners to provide treatment and authorize temporary disability. HB 3669 also provides for the Director to assess the impact of expanding the authority of nurse practitioners to provide medical treatment for 90 days and authorize temporary total disability benefits for up to 60 days.

Study Purpose:

Gather and analyze data to determine the impact of HB 3669 (Nurse Practitioners) on costs, delivery of medical benefits and other outcomes in the workers' compensation system.

Study Time Line Summary:

Gathering of data and information is already underway. DCBS will be able to present final findings in written form by August, 2006 to MLAC. However, data and findings will become available prior to that date and will be shared with the MLAC Sunsets Subcommittee as it becomes available.

Study Objectives:

- 1) Identify the number of Nurse Practitioners who are authorized in Oregon under the statute to provide compensable medical services and treatment. The department has direct access to these figures.
- 2) Assess system impact, if any, as a result of HB 3669. Impact may include but is not limited to the authorization and duration of time loss, claim costs, return to work outcomes, geographic utilization patterns and overall worker access to services.
 - a. Conduct a review of data on a sample of claims where visits to nurse practitioners have occurred by injured workers to measure treatment and claim outcomes, focusing on cost, utilization and time to return to work.
 - b. Conduct a review of system wide/aggregate claims data to determine if there are any identifiable trends clearly attributable to HB 3669.
 - c. Conduct file reviews, if necessary, to measure treatment and claim outcomes, focusing on cost, utilization and time to return to work. This may be necessary because data constraints may not provide the quantity of data necessary for robust statistical modeling.
 - d. Conduct a direct survey of nurse practitioners to obtain additional data regarding worker access, continuity of care, changes in patient profiles since HB 3669 became operative, managed care considerations, and authorization of time loss.
 - e. Potentially use complimentary findings obtained through Care Provider Study to provide data regarding worker access, choice and continuity of care
- 3) Estimate the number and nature of complaints (including administrative disputes) made, if any, involving nurse practitioners by workers or other system stakeholders (to date, there have been no complaints regarding nurse practitioners received at the department). Obtain regular reports from the Medical Review Unit, Benefit Consultation Unit, Managed Care program, and Ombudsman for Injured Workers Office regarding level and type of complaints, if any, regarding nurse practitioners.

NOTE: The department expects there will be only a small amount of nurse practitioner related data available for this study. Currently, SAIF Corp. appears to be the one data source that has data broken out to the level of detail necessary to meet the objectives of this study. Other insurers contacted do not break data in as accessible and useful format for the purposes of this study. Therefore, in preparation of the study design and in developing initial data, the department has relied on SAIF Corp. data only. We will continue to contact other insurers, as well as self-insured employers, to determine if more data can be accessed.