

1832 Schuetz Road St Louis, MO 63146-3540 Telephone (888) 995-5300 (314) 995-5300 Fax (314) 995-3897

**TO:** SENATE COMMERCE COMMITTEE **FROM:** MARK WALLS, SAFETY NATIONAL

KANSAS SELF-INSURERS ASSOCIATION (KSIA)

**RE:** HB 2059

**DATE:** JANUARY 31, 2017

Members of the Committee, thank you for the opportunity to provide written testimony on HB 2059.

My name is Mark Walls. I am Vice President of Communications & Strategic Analysis For Safety National. Safety National is a specialty workers compensation insurance company that provides excess insurance for approximately one-third of the self-insured's in the country. I have been involved in the workers' compensation industry for over 27 years and my role requires that I closely monitor emerging workers' compensation trends around the nation. I am also a frequent contributor to industry educational conferences and news publications. On behalf of Safety National, I urge you to vote "no" on HB 2059.

The AMA 6th edition represents the current standard for evaluating permanent impairment. It is used by over 20 states and the Federal government. The AMA 6th edition represented a significant improvement over prior editions in that it focuses on evidenced-based medical standards and objective measurements of impairment at maximum medical improvement.

Medical science tells us that broken bones heal and knee and shoulder surgeries usually restore full pre-injury strength and range of motion. Unlike prior editions which focused more on the diagnosis, the AMA 6th edition recognizes that the goal of medical treatment is to restore function and that if the treatment is successful there should be little to no permanent impairment.

The AMA 6th edition also allows for ratable impairment for conditions that result in functional deficits that were not ratable under prior editions. This makes the AMA 6th edition the most complete and comprehensive standard available for determining permanent impairment.

There are those that argue that the 6th edition results in unfairly lower impairment for injured workers. As physicians who were involved in drafting the AMA 6th edition guidelines will testify, such an allegation is not only untrue, it is preposterous. The AMA 6th edition guidelines provides an impartial evaluation based on objective measures and it is not slanted in any way against injured workers and to imply this has no basis in fact. Certainly there are some injured workers who will receive lower impairment ratings under the AMA 6th edition compared to the 4th edition. But there are also injured workers who will receive higher ratings under the 6th edition, especially those who have significant physical limitations.

A study published in 2010 showed that overall, there is no statistically significant difference between average whole person impairment ratings when comparing the 6th edition to the 4th edition. The focus of the AMA 6th edition is object measurements of impairment. Those with more physical limitations receive higher

impairment than those with less physical limitations. This should be the goal when gauging permanent physical impairment.

Medical treatment advances over time as do the AMA impairment guidelines. The 4th edition of the AMA guidelines was published in 1993. Would you want your physician utilizing a standard of care that is over 20 years old when there is more current information available based on the latest medical science?

I would like to thank the Committee for the opportunity to provide this testimony.