



California Chiropractic Association

Assembly Member Rocky Chavez – District 76

Assembly Bill 2407 - Workers' Compensation

Require Patients With Back Injuries To Be Assessed And Provided A Conservative Treatment Plan To Include Chiropractic Manipulation And Other Non-Invasive Care Modalities Prior To Surgery

Sponsor: California Chiropractic Association

ISSUE

The impact of the 2004 Workers' Compensation reforms continue to negatively affect the practices of doctors of chiropractic and the health of injured workers. With the elimination of doctors of chiropractic as primary treating physicians after the 24-visit cap, there has been an alarming increase in opioid use and surgery among injured workers. Injured workers' access to conservative treatment has been severely limited, if not eliminated especially in back injuries. Back injury and pain are one of the most common industrial injuries and also one of the most successfully resolved through conservative, non-invasive treatment modalities.

SOLUTION

AB 2407 would require providers treating injured workers' with back injuries to assess the employee's level of risk for chronic back pain and whether he or she meets the criteria for a surgical consultation. After an assessment has been completed, a comprehensive conservative treatment plan may be deemed appropriate to include (among other modalities), chiropractic manipulation, acupuncture, cognitive behavioral therapy and physical therapy.

In addition, yoga, intensive rehabilitation, massage, or supervised exercise therapy may also be recommended for inclusion in the comprehensive treatment plan. Surgery may be recommended, but only for a limited number of conditions and only if there is sufficient evidence to indicate that surgery is more effective than other treatment options.

BACKGROUND

When the system eliminates all non-drug, non-surgical options for injured workers with chronic back pain, their only recourse is to suffer with pain, turn to opioids and/or be prescribed expensive and often unsuccessful invasive procedures such as epidural steroid injections or surgery. The result, among others, is a dramatic increase in costs, addiction and disability.

An independent study by the California Workers' Compensation Institute (CWCI) found that California has seen a 300 percent increase in opioid prescriptions over the last decade. Additionally, the CWCI found that nearly half of the Schedule II opioid prescriptions in California workers' compensation are for minor back injury claims, a treatment regimen that the American College of Occupational and Environmental Medicine describes as typically not useful in the sub-acute and chronic phases. (CWCI, 2011)

Regarding back surgery, a recent study analyzed the Washington State Workers' Compensation system and found that seeing a chiropractor first following a work injury to the low back significantly reduced the likelihood of surgery: approximately 42.7% of workers who first saw a surgeon had surgery, in contrast to only 1.5% of those who saw a chiropractor. (Spine 2013)

In January 2016, the Health Evidence Review Commission (HERC) of Oregon which oversees the Oregon Health Plan (OHP) has approved changes to coverage for treatments for back conditions in response to opioid and surgery overprescribing. The Oregon plan mirrors the changes contained in AB 2407.



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SUPPORT

California Chiropractic Association (Sponsor)

PROPOSAL OR BILL STATUS

Assembly Bill 2407 is authored by Assembly Member Rocky Chavez. Introduced 2/19/16.

FOR MORE INFORMATION

Cris Forsyth
CCA Governmental Affairs Director
(916) 648-2727, ext 130
cforsyth@calchiro.org