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Mr. William Melofchik
Legislative Director
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RE: NCOIL Workers' Comp Pharmaceutical Reimbursement Rates Model Act

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Please accept my enclosed written comments with regards to NCOILs Amendments to the model act on physician dispensing. As a physician in a practice devoted exclusively to the treatment of injured workers, I unfortunately have extensive experience with the apparently complex chains of command between pharmacies, TPAs, insurance carriers, and adjusters. This results in the daily occurrence of needless delay and denial of recommended medical care even when it fits the ODG formulary standard that the state of Arizona adopted in 2016.

My comments echo those of the Arizona Medical Association and those of other state medical societies and practitioners who have taken the time to provide feedback to your organization. In summary, the proposal to allow a single 7-day fill only to patients seen within the first 7 days of an injury is arbitrary, prohibitive, and onerous in the treatment of patients. It is my opinion that this model act amendment is nothing short of the attempt to virtually eliminate physician dispensing while simultaneously maintaining the illusion of the practice for public consumption.

The difficulties of patients receiving medications are witnessed not only by us treating physicians and patients, but also attorneys, nurse case managers, and even adjusters. The NCOIL amendment proposes a solution to a fabricated problem and concurrently aggravates a real-world treatment and recovery barrier. As we have done, we continue to only offer patients the option of dispensed medications at the office if they are available. Some patients choose this option and others, a freestanding pharmacy. It has been my experience that this unfettered patient choice improves treatment time, compliance, and recovery as well as mitigates the negative perceptions of injured workers towards the workers compensation system.

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