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Testimony before the Senate Commerce Committee
Re: Senate Bill 167
February 18, 2015

My name is Dr. David Hufford and I am in my 29th year in the practice of medicine. For the last 10 years I have practiced at Mid-America Orthopedics in Wichita primarily in the field of Occupational Medicine. I have provided hundreds of impairment ratings for individuals whom I have treated and in the setting of independent medical examinations. I have been trained and certified to perform this function by both the American Board of Independent Medical Examiners and the American Academy of Disability Evaluating Physicians. Our practice considers itself entirely neutral in this endeavor and we believe this is evidenced by the large number of examinees that are referred to us through the administrative law judges in the worker's compensation setting. I believe the 4th edition of the AMA Guides to the Evaluation of Permanent Impairment has been a useful tool for this purpose until the present time. However, with the advancement of our knowledge and improvement in treatment for both operative and non-operative injuries and other conditions, the release of the 6th edition of the AMA Guides to the Evaluation of Permanent Impairment provides a better alternative that more accurately depicts the concept of impairment as it relates to the eventual outcome for the treatment of an individual. I have often said to people that impairment is a destination and not a journey and this is reflected by the philosophy of the 6th edition of the Guides. A large amount of work went into the formulation of the 6th edition and the intention of the experts involved is to reflect the functional status of an individual at their final disposition following treatment for a work-related injury. The experts who formulated the 6th edition of the Guides have made an attempt to create a document that conforms to the current evidence regarding various disease states and injury conditions. There has also been an attempt to provide a document that is aligned with the concepts of disease and injury as they are understood universally, not just in the United States but throughout the developed world. The 6th edition of the AMA Guides is not limited in usage to the United States alone but is also used in other countries for various purposes.

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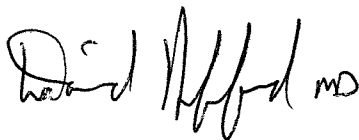
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I believe the 6th edition of the AMA Guides provides a broad panorama for categorizing the various injuries that occur in workers. I have been constrained and frustrated at times by the format of the 4th edition of the AMA Guides in that there are many conditions that can not be accurately depicted by the graphs, charts and tables that are contained within the musculoskeletal injury section. One example of this would be the provision of an impairment rating for someone who tears their biceps tendon and has a repair. The 6th edition of the Guides emphasizes the functional status of the individual and therefore contains a subjective component that is not present in the 4th edition of the AMA Guides. I have many times been asked during a deposition about the level of an individual's pain or the subjective experience of weakness that can not be categorized by the graphs and tables that are contained within the 4th edition of the AMA Guides. The 6th edition of the AMA Guides allows for consideration of these factors as the evaluation of the individual's functional status is one portion of the overall condition which is taken into account in providing the impairment rating. There are many conditions in the 6th edition of the AMA Guides that are accounted for that are relatively minor injuries but this does provide an avenue to categorize impairment for these relatively minor injuries that does not exist in the 4th edition of the AMA Guides.

The concern that has been expressed about the 6th edition of the AMA Guides is that many of the impairment ratings are lower for the same condition than those contained within the 4th edition of the Guides. This is primarily true in regard for injuries to the cervical, thoracic and lumbar spine. Since there is an emphasis on the functional status of the individual within each diagnostic category I believe the 6th edition of the AMA Guides will provide some latitude in assigning impairment and that opposition to the use of the 6th edition is over-stated in this regard. I further believe that we should go forward with the use of the 6th edition of the AMA Guides in a real-time and progressive manner that will demonstrate the utility of the concepts it contains in providing these impairment ratings. Many of the experts in this field believe that the 4th and 5th editions of the AMA Guides to the Evaluation of Permanent Impairment are outmoded and I would urge the committee to consider maintaining the status quo as it currently exists in our statutes.

The opinions expressed in this testimony are exclusively mine and are not intended to reflect the views of Mid-America Orthopedics in general or the other physicians in our practice.

A handwritten signature in black ink, reading "David W. Hufford MD". The signature is written in a cursive, flowing style.

David W. Hufford, MD, FAADEP, CIME