

Meeting minutes: Workers' Compensation Advisory Council

Date: Sept. 10, 2025

Minutes prepared by: Alyssa Westergard, executive secretary to the Workers' Compensation Advisory Council

Location: Department of Labor and Industry, Minnesota Room, 443 Lafayette Road N., St. Paul, MN 55155

Attendance

Members attended

Bernie Burnham
Bill Gschwind
Bob Ryan
Burt Johnson
Colin Beere
David Henrich
Doug Loon
Gary Thaden
Hannah Alstead
John Thorson
Maggie Hobbs
Matthew Schmidt
Rep. Dave Baker
Rep. Kaela Berg
Sen. Jennifer McEwen

DLI staff members attended

Commissioner Nicole Blissenbach
Assistant Commissioner Jessica Stimac
Abdi Takhal
Alyssa Westergard
Alexis Johnson
Ann Gilles
April DelCastillo
Bretta Hines
Brian Zaidman
Carey Wagner
Deborah Dolsky
Denise Holmes
Elisabeth Griswold
Elora Leene
Ender Kavas

Ethan Landy
Hared Mah
Jeanne Vogel
Jennifer Bucholz
Jerrica Walker
Joe Lolich
Jon Brothen
Jordan Trumbo
Josephine Touy
Josiah Moore
Karen Kask-Meinke
Katherine Drake
Laura Zajac
Michael Gray
Michael Haire
Michelle Doheny
Michelle Ness
Michelle Sullivan
Nichole Sorenson
Nicole Kue
Sandy Stoddard
Sharon Benkufsky
Stacy Stoffregen
Tami Zunker
Tom Garza
Tracey Haskin
Virginia Prax
Yuri Jelokov

Visitors attended

Aaron Cocking, IFM
Ames Gascoigne, Wilson McShane
Anna Kim, LMC
Bill Marshall, Wilson McShane

Brandon Miller, SISF
Bridget Bender, University of Minnesota
Bruce Alexander, University of Minnesota
Carla Ferrucci, MAJ
Carrie Jacobson, Brown and Carlson
Daniel Dwight, Stinson
Daniel Gillis, Minnesota Senate
David Hoffman, MCIT
David Sullivan, Minnesota House of Representatives
Deb Norsten, Hennepin County
Ellen Florek, Minnesota Hospitals
Giovanna Kone, Hennepin County
James Heer, WCRA
Jennifer Wolf, MWCIA
Jerry Sisk, Mottaz Sisk
John Kysylyczyn, K Solutions LLC
Jonathan Boesche, NFIB
Karen Ebert, MCIT
Kate Moulton, Allina

Kathy Bray, SFM
Katie Storms, Aafedt Forde
Kim Barnes, MCIT
Lauren Reller, Stinson
Laurn Schothorst, Minnesota Chamber of
Commerce
Mark Freeman, Teplinsky Law Group
Melissa Hysing, Minnesota AFL-CIO
Michael Tupy, Hennepin County
Nicole Van Heel, Bauer DB
Owen Wirth, LMC
Rebecca Yang, WCRI
Rhonda Nilssen, MCIT
Ryan SanCartier, MCA
Stephanie Hooker, HealthPartners
Suzanna Kennedy, Stinson
Tiffany Grzybowski, HealthEsystems
Tori Kee, LMC

Call to order and roll call

Commissioner Nicole Blissenbach called the meeting to order at 9:45 a.m. Roll call was taken and a quorum was present.

Approval of the minutes and agenda

Bernie Burnham moved to accept today's agenda and the minutes from May 9, 2025. Gary Thaden seconded the motion. A vote was taken and the motion carried.

Announcements

Commissioner Blissenbach reminded the council about the misclassification study and report the Department of Labor and Industry (DLI) was asked to complete. She noted DLI currently has a request for proposals (RFP) up for assistance with the study. She also asked the members to share the RFP with stakeholders in their networks that may be able to assist with the study and report.

Blissenbach informed the council that the second annual Workplace Rights Week was coming up and provided information about presentations and events that would be going on during that time. She also instructed members to reach out if they would like to be involved in any of the events or presentations.

Assistant Commissioner Jessica Stimac noted DLI is working with MWCIA to add information about zero-estimated exposure policies and reported construction class codes, as required by the 2025 Workers' Compensation Advisory Council recommendations and bill, on the DLI website. She added DLI is also working on an article with some FAQs about zero-estimated exposure policies that will be published in the fall *CCLD Review* newsletter from DLI's Construction Codes and Licensing Division (CCLD).

Agenda items

1. Post-traumatic stress disorder (PTSD) study report

Dr. Bruce Alexander, University of Minnesota Midwest Center for Occupational Health and Safety, addressed the council to give an overview of the results from the PTSD study the University of Minnesota and DLI collaborated on. He began by noting the objectives of the study: review current Minnesota statutes about work-related PTSD; consider the occupations subject to Minnesota's rebuttable presumption and compare with other jurisdictions; review and analyze PTSD claims in Minnesota's workers' compensation system; obtain input from interested stakeholders; review evidence-based approaches and best practices for PTSD screening, diagnosis and treatment; and identify programs with effective prevention and programs with high return-to-work outcomes.

Dr. Alexander noted various findings, including a large increase in PTSD claims from employees in presumption occupations after enactment of the presumption law, that is now subsiding. He also noted PTSD claims are denied at about a 90% denial rate compared to a 20% denial rate for non-PTSD claims. Further, the denials often lead to contested claims that are often paid, most by a settlement. Presumption occupations are also more likely to contest a denial and receive benefits, but they are also less likely to return to work in the same industry. He pointed out that identifying and tracking PTSD and mental injury claims is extremely challenging due to limits in workers' compensation data.

Dr. Alexander went on to review stakeholders' participation in the study. A survey was posted, inviting anyone interested to participate. The data collected was not representative of all workers. There were 751 respondents, 78% of whom were in the health care industry. Survey responses were reviewed and summarized to guide development of stakeholder interview questions. The majority of the respondents pointed to the complexity of the workers' compensation system as an area of concern. Dr. Alexander noted the results of the stakeholder interviews concluded there is a lack of accessible data about PTSD-related workers' compensation claims and there is inadequate communication regarding claim status. He noted another outstanding issue is a disconnect between procedural and clinical timelines. He provided the example that claims are supposed to be reported in 14 days, but it can take 30 days or more to get an assessment.

Dr. Alexander and the research team also conducted extensive reviews of screening, treatment and diagnosis best-practices. He said PTSD screening tools are available and can be very useful and effective in early detection of PTSD. However, he also noted careful consideration is needed when implanting screening tools in workplaces and employers may need guidance on managing results. Additionally, he noted PTSD is treatable in most cases, but a big barrier to treatment is access to care both within and outside of the workers' compensation system.

The last topic Dr. Alexander touched on was prevention and returning to work. The study showed mental health and wellness training programs in high-risk occupations are impactful, as are employee assistance programs. The study also found that returning to work following a PTSD claim is challenging, because the workplace may be triggering to the injured worker. There is evidence showing structured return-to-work programs can be successful.

Dr. Alexander and the PTSD study team had several recommendations for improving the workers' compensation system's process when it comes to PTSD claims, including:

- Improving the administrative processing of claims; specifically, improving data quality on the first report of injury for mental-injury claims, since there is not currently a standard coding or use of terms when it comes to reporting mental-injury claims.
- Standardizing the date of injury definition for PTSD by using the date of diagnosis by a qualified provider as the date of injury, which would require all of the timelines in the claim process that follow the date of injury to have to be changed.
- Expanding access to PTSD diagnosis and treatment, as well vocational rehabilitation services. Expanding the list of approved provider types to diagnose PTSD would improve how quickly people are diagnosed, thereby also improving the claims process. Improving access to vocational rehabilitation services would help improve the return-to-work process, as well as help to ensure injured workers are receiving the care and treatment they need.
- Having the Medical Services Review Board review PTSD treatment rules every two to three years to assess new treatments and remove ineffective treatments would be beneficial as well.

Some of these recommendations would require legislative changes, while others would require increased education and outreach efforts to ensure insurers and employers are aware of the new procedures. Additional enforcement and penalties could also then be implemented to ensure compliance.

Finally, Dr. Alexander noted there are also limitations in a study like this. For instance, the study could not really compare the denial rates in Minnesota to any other jurisdictions because the data is not easy to find. Longitudinal followup is also not possible. There may also be underreporting of PTSD claims due to people not making claims due to stigma or fear of losing their job and inconsistent application of diagnostic criteria may impact acceptance rates.

Council members asked questions and additional discussion ensued. Dr. Alexander, University of Minnesota study team members and DLI staff members answered specific questions about the report, including questions regarding: (1) the research done as part of the study into mental health training and continuing education programs; (2) injury classification of PTSD claims on reported claims, including how accepted PTSD claims are being coded using WCIO codes; (3) the designation of rebuttable presumption occupations; (4) use of date of diagnosis as the date of injury in other states; (5) the issues with available data on PTSD claims and how the data shows reconsidered denials; (6) whether diagnosing PTSD is within the scope of practice of the recommended expanded provider list; and (7) factors that may have impacted returning to work.

Dr. Alexander and Andy Ryan, University of Minnesota, also responded to an inquiry regarding what they thought were the recommendations in the report that could have the best short-term impact, which included aligning the diagnosis date with all other procedural timelines and expanding the list of providers that can diagnose PTSD.

Other business

The next Workers' Compensation Advisory Council meeting will be Oct. 8, 2025.

Adjournment

Thaden moved to adjourn the meeting and Burnham seconded. A vote was taken and the meeting was adjourned at 11:29 p.m.

Respectfully submitted,
Alyssa Westergard, executive secretary