

Meeting minutes: Medical Services Review Board

Date: Jan. 15, 2026

Minutes prepared by: Katrina Namad

Location: Hybrid – Washington Room at the Department of Labor and Industry (DLI), 443 Lafayette Road N., St. Paul, MN, and via Webex

Members present

Beth Baker (chair; remotely)

Annie BeBault-Juntilla

Russell Gelfman (vice-chair)

Chad Griffith (remotely)

Kerri Hoff

Ceil Jung – alternate

Chris Kramer – alternate (remotely)

Andrew Wilkins – alternate (remotely)

Jessica Stimac, assistant commissioner

Taiwo Lawal, DLI medical consultant

Members absent

Elizabeth Alm

Zachary Anderson – alternate

Tammy Bredahl

Michael Head

Arnes Huskic – alternate

Courtney Mitchell

Matthew Monsein

Robin Saunders Ryan

Maria Starchook-Moore

Deborah Zurcher – alternate

DLI staff members present

Sharon Benkufsky

Tom Garza

Bretta Hines

Denise Holmes

Alexis Johnson (remotely)

Ethan Landy

Sandy Stoddard

Visitors present

Dana Gerber (remotely)

Agenda items

1. **Call to order** – The meeting was called to order at 4:02 p.m. Roll call was done by Katrina Namad and a quorum was met. Chris Kramer, Andrew Wilkins and Kerri Hoff served as voting alternates due to the absence of their corresponding board members.
2. **Approval of agenda and previous meeting minutes** – A motion to approve the Oct. 16, 2025 minutes, along with the Jan. 15, 2026 agenda with a change to the order of business, was made by Annie Bebault-Juntilla and seconded by Chad Griffith. A roll call vote was taken and the motion passed.
3. **DLI updates – Assistant Commissioner Jessica Stimac**
 - Karen Kask-Meinke, long-time Special Compensation Fund director, has retired after more than 40 years of state service. Jeanne Vogel, former Vocational Rehabilitation director, has assumed leadership of the Special Compensation Fund. Recruitment is underway for a new Vocational Rehabilitation director.
 - The Workers' Compensation Advisory Council (WCAC) has begun reviewing legislative proposals. The Workers' Compensation Reinsurance Association recently presented its requested changes, which are available on the WCAC webpage. The department will update the board as additional proposals are received.
 - The department has been invited by the International Association of Industrial Accident Boards and Commissions (IAIABC) to present about the post-traumatic stress disorder (PTSD) study, with the presentation scheduled for Feb. 26, 2026.
 - The department is working on implementing the non-legislative recommendations from the PTSD study. Several recommendations fall within the department's existing authority and focus on outreach and education.
 - Initial efforts include developing plain-language explanations of PTSD claim processes and creating a dedicated PTSD claims webpage. Additional educational resources will be added to this page as the initiative expands.
 - The mandatory workplace poster is being updated to include information about psychological injuries; the Communications unit is working to incorporate the content within limited space. The poster is in the formatting stage and will be posted on the department's website when finalized. Stakeholders may join the posters email list to receive notification when the update is released.
 - Details about PTSD are being added to the employee's guide, a pamphlet sent to injured workers after a first report of injury is received. The updated content explains how psychological injuries may differ from physical injuries in the claims process. The revised guide is currently in translation and will be released soon.
 - The department is assessing ways to strengthen education and enforcement related to PTSD denial narratives. Guidance on the administration of PTSD claims is being developed and will be distributed through GovDelivery, Work Comp Campus and the *Campus Connect* newsletter within the next month. Consistent with standard compliance practices, an educational campaign will be issued first, followed by enhanced enforcement efforts.
 - A flyer with a QR code highlighting Vocational Rehabilitation services has been developed. It provides brief, high-level information to alert injured workers with denied PTSD claims that return-to-work assistance may be available if they choose to contest the denial. The flyer will be

included in DLI publications and a distribution list has been created to share materials with community organizations, including nonprofits that support first responders and their families, to expand outreach efforts.

- Work is underway to improve identification of PTSD claims through better first report of injury coding. Because current coding combinations make PTSD difficult to identify, the department is working with the Minnesota Workers' Compensation Insurers Association (MWCIA) and the Workers' Compensation Insurance Organizations (WCIO), which maintains workers' compensation coding tables, to develop a recommended updated coding rubric for PTSD claims. In the meantime, the department will issue guidance to improve current coding consistency and claim identification.

4. PTSD rulemaking update – Alexis Johnson of Office of General Counsel

- The department is reviewing how the APA's 2025 PTSD guidelines may affect Minnesota's treatment parameters, which are currently based on the 2017 guidelines. A few updates – such as changes to psychotherapy treatments, including BEP and WET, the addition of Alprazolam and Topiramate as non-indicated medications, and changes to frequency and duration of psychotherapy treatment – may warrant future rule revisions. These items are presented for awareness only; no action is required at this time.
- Board members supported inviting clinical experts, particularly in psychiatry and psychology, to address the APA's changes before any rule changes are considered. Expert presentations will likely be scheduled for April and members can submit recommended expert names to the department.

5. Treatment parameters – Sharon Benkufsky, DLI Compliance, Records and Training

- The board reviewed proposed updates to the injection treatment parameters, including maximum-treatment limits and the management of long-term use. Members noted that no evidence supports a fixed maximum number of injections and most states allow continued treatment if it remains effective. Questions persisted about how to address ongoing injections beyond a 12-month period and whether clearer language is needed for chronic management and flareups.
- Members emphasized the need for safeguards, such as documented progressive improvement and continued use of appropriate chronic-pain treatments. Concerns were raised about injections being used without complementary modalities, which conflicts with chronic-care principles focused on restoring functional independence. Incorporating additional CMS-based criteria – such as functional impairment, at least 50% improvement, clinical rationale and primary-care notification – was identified as a way to strengthen the chronic section.
- The board discussed whether the draft is ready for broader public review. The department confirmed informal public feedback can be sought during rule development before formal proposed rules are published. A vote on a motion to release the current draft for public comment passed, allowing stakeholders to provide input before the board considers further refinement.

6. Future agenda items – Chair Beth Baker and board

- WCAC indicated interest in receiving Medical Service Review Board recommendations about statutory changes related to PTSD, particularly regarding expansion of diagnosing providers.
 - Assistant Commissioner Stimac asked the board to clarify its concerns with the proposed provider list and to identify which provider types members believed should or should not be included. Board members responded that expanding diagnosing authority could improve access, but also risks

reducing attention to work-related factors essential in workers' compensation claims. Several members emphasized that many mental health providers do not routinely address return-to-work issues and that expanding the diagnostic pool could require additional provider involvement for workability evaluations, especially in smaller or rural communities.

- Board members expressed mixed views about the provider types identified in the PTSD study. There was broad support for including psychiatric mental health nurse practitioners and physicians as diagnosing providers, given their relevant training. However, concerns were raised about marriage and family therapists and other providers whose typical practice and training may not align with diagnosing PTSD in occupational contexts. Members emphasized the need to balance access to timely diagnosis with ensuring diagnosing and treating clinicians have sufficient expertise to address work-focused requirements under the workers' compensation system.
- No additional future agenda items were brought to the table.

Adjournment

- A motion to adjourn the meeting was made by Baker and seconded by Griffith. A roll call vote was taken and the motion carried. The meeting was adjourned at 5:30 p.m.