

PUBLIC MEETING MINUTES
Commission on Health and Safety and Workers' Compensation
April 8, 2026, 9:30 a.m.
Elihu Harris State Building, Auditorium
1515 Clay Street, Oakland, CA 94104 and by Zoom

1. Roll Call

The Commission on Health and Safety and Workers' Compensation (CHSWC) public meeting was called to order at 9:34 a.m. by Chair Roxborough. A quorum of members was present.

In Attendance: Nicholas Roxborough (Chair), Jen Hamelin, Shelley Kessler, Kristi Montoya, Chris Pedroza, Mitch Steiger, Meagan Subers.

Absent: Sidharth Voorakkara

2. Public Comment

Corey Murphy, Firefighter, Los Angeles County Fire Department, discussed his experience and challenges with the workers' compensation system in California.

3. Discussion, recommendation and possible action to approve minutes of the February 18, 2026, meeting

Presented by Nicholas Roxborough, Chair

<https://www.dir.ca.gov/chswc/Meetings/2026/04-08-26-Item-3-2-18-26-Meeting-Minutes.pdf>

On a motion by Commissioner Subers and seconded by Commissioner Montoya, the CHSWC meeting minutes were approved unanimously by all CHSWC Commissioners in attendance.

The votes were as follows:

AYES: Hamelin, Kessler, Montoya, Pedroza, Roxborough, Steiger, Subers

NOES: None

ABSENT: Voorakkara

Commissioners' Questions and Comments: None

Public Comment: None

4. Discussion, recommendation and possible action to approve the final 2025 CHSWC Annual Report

Presented by Melissa Flores, Executive Officer

This item was pulled from the agenda to include additional public comments. This item will be added to the agenda for the next CHSWC meeting.

5. CHSWC statutory authority & contracting “Ownership vs. Licensing”

Isaac S. Nicholson, Office of the Director of Legal Unit, DIR

Mr. Nicholson provided an explanation that a license is a legal agreement where the copyright holder grants permission to another party to use the copyrighted work under specified conditions. The cost and period of use are typically specified, and the license can be exclusive or non-exclusive. In summary, copyright is an ownership right, while a license is the permission to use the copyrighted materials limited by the terms of that licensing agreement.

The commissioners asked whether CHSWC would have a license or copyright of a study. Mr. Nicholson indicated that the work should be copyrighted to CHSWC for the purposes of intellectual property ownership. CHSWC determines how they want their copyrighted work to be used, and according to any limitations under state law. The license provision limits the subsequent reproduction of state-owned copyrighted work to a non-commercial purpose – typically non-commercial education or research. The license would also define subsequent use to either allow or prevent the reproduction of product, such as posting the study on an internet site. Just use of copyrighted material, such as a report, for research or citation, does not require seeking permission or license.

Licenses for research products tend to grant broad permissions. If limitations are desired, they would have to be explained in the licensing agreement.

The Chair thanked Mr. Nicholson for the primer on copyright law and asked Mr. Nicholson to come back to the next CHSWC public meeting to explain specifically what applies to CHSWC, and whether language regarding licensing and copyright is always the same or unique in contracts.

Mr. Nicholson also described Labor code 77. Labor code 77(a) allows CHSWC to conduct in-house or contract out for research studies. There is no authority identified that limits the abilities of CHSWC to conduct those studies related to workers’ compensation and the prevention of industrial injuries and occupational diseases.

Chair Roxborough thanked Mr. Nicholson.

Commissioners’ Questions and Comments: There were no further questions or comments.

Public Comment: None

6. Report from the Executive Officer

Melissa Flores, Executive Officer

Ms. Flores provided an update on the contracting for AB 1400 (firefighter mechanics’ and equipment cleaners’ carcinogen exposure) and SB 623 (PTSDs for emergency operators) research studies. Both agreements are currently in negotiations for licensing and ownership terms. Once agreement is reached the contracting process will proceed.

Ms. Flores shared that the mandated CHSWC SB 880 study report presented last year is being used in support of legislation (SB 1683 - Ortega) to remove the sunset date of the Prepaid Card program for workers' compensation benefits.

Ms. Flores thanked Commissioners Roxborough, Hamelin and Montoya who attended the March 26, 2026, CWCI Annual Meeting in Sacramento and who represented CHSWC. She said that other Commissioners might be interested in attending next year and learning from the insurer perspective. Chair Roxborough commented that the CWCI Conference was very informative and excellent in quality, regardless of industry perspective, and he extended his thanks to CWCI for inviting the Commission.

Ms. Flores also made an announcement of the retirement of Nurgul Toktogonova, a CHSWC research staffer who has been with the Commission for over 20 years and has been instrumental in preparing the CHSWC Annual Report. Ms. Flores reported a transfer of knowledge from Ms. Toktogonova to the staff is taking place, before she retires on June 1st. Chair Roxborough asked if it would be possible to acknowledge Ms. Toktogonova at the next meeting with her being present. Ms. Flores said that she would inquire into the possibility.

7. Standing Written Reports

a. Legislative update

<https://www.dir.ca.gov/chswc/Meetings/2026/04-08-26-Item-6a-Leg-Update.pdf>

b. Mandated Reports & Other Studies Status

<https://www.dir.ca.gov/chswc/Meetings/2026/04-08-26-Item-6b-Leg-Mandates-Studies.pdf>

Commissioners' Questions and Comments: None

Public Comment: None

8. Other Commission matters

Commissioners had several comments including requesting a review of California Labor Code sections that apply to CHSWC, asking a representative from DIR to discuss the process of issuing a Request for Proposal (RFP), providing updates on studies DIR is conducting of interest to CHSWC, and a presentation about commissioners rights, duties, and obligations as appointees to CHSWC.

WORKSHOP

9. Workers' Compensation Medical Care Access Research – Presentation

Kandice Kapinos Ph.D., RAND Corporation, Senior Health Economist and Professor of Public Policy

<https://www.dir.ca.gov/chswc/Meetings/2026/04-08-26-Item-9-Medical-Care-Access-Research.pdf>

Kandice Kapinos, Senior Health Economist and Professor of Public Policy at RAND, discussed the study *Medical Access in the California Workers' Compensation System* that is being conducted by the Department of Industrial Relations (DIR). Dr. Kapinos said California Labor Code 5307.2 requires DIR to annually study whether injured workers have adequate access to quality health care.

Dr. Kapinos discussed six metrics used to determine access to care: provider supply, utilization and demand, timeliness, distance, network adequacy, and administrative burden; she discussed how these metrics were used historically, how they were used in recent studies, and the challenges of using these metrics. Next, Dr. Kapinos discussed how they will address gaps in understanding network adequacy, access challenges due to Utilization Review/Independent Medical Review (UR/IMR), and how COVID and telehealth have changed access.

RAND is contracted for four years to provide four studies. This is Year 1 for RAND (Covid-19, Telehealth), Year 2 will be UR/IMR/IBR, Year 3 will be MPNs and MSOs, and Year 4 will be Telehealth update and final report.

Commissioners' Questions and Comments:

The commission asked if RAND last conducted the study in 2019, and Dr. Kapinos indicated that she believed it was another research group since DWC likes to rotate research bodies. It was asked if qualitative data and the importance of interviewing real people was included in the research. Regarding stakeholder interviews, Dr. Kapinos said that this data can be expensive to obtain. A Commissioner emphasized that funding deficiencies or shortfalls need to be highlighted for legislators so that they understand how these impact or limit the thoroughness of the study.. Another Commissioner asked when the study started and Dr. Kapinos answered that Year 1 has already started, beginning with the Evaluation Design plan.

Chair Roxborough said that the presenters earlier stated that they are talking about workers' compensation reform now. He asked if they received the report four years from now, whether it would be valuable. Chair Roxborough noted that CHSWC's interest is more in Year 3 MPN/UR/IBR topics and asked whether they could work on Year 3 now and switch the schedule. Dr. Kapinos said that she suspects that everything is planned and has its reasons, such as the time needed to obtain data on UR, which is not yet readily available to start analyzing. She said she would check with the Principal Investigator. Another Commissioner referred to an October 2025 RFP and requested that injured workers impacted by aspects of the system be interviewed as part of the survey methodology. They mentioned input or insight via a technical advisory committee and offered to assist in identifying, contacting and learning from those impacted people. Dr. Kapinos said that physician surveys are very costly, as are injured worker surveys, mainly due to response rates/participation, and thought that a technical advisory committee could be looked into, in order to reach stakeholders who would be normally difficult to access.

Public Comment: None.

10. Workers' Compensation Medical Care Delivery: What works well and the issues/challenges – Panel Discussion

Saul Allweiss, Attorney, Law Offices of Allweiss, McMurtry & Mitchell

Basil Besh, M.D., FORM Hand, Wrist & Elbow Institute

Jason Marcus, Attorney, Marcus & Pulley

Jason Schmelzer, Partner, Shaw Yoder Antwih Schmelzer & Lange

Mr. Marcus discussed challenges and successes of the workers' compensation system. Mr. Marcus said workers' compensation had general difficulties with access to care, including navigating Medical Provider Networks (MPNs), doctors and corporations listed as being part of MPNs, but who did not accept workers' compensation, lack of medical specialists in the workers' compensation system, and problems with Utilization Review (UR). He also discussed how injured workers are treated in self-insured plans versus private health insurance plans.

Mr. Allweiss said that access to care is a system-wide problem not unique to workers' compensation. He said it is difficult for doctors to navigate the workers' compensation system. He stated that UR and Independent Medical Review (IMR) are working extremely well. MPNs should not be changed: MPNs delivered care but there was a shortage of medical providers. He also discussed self-administered companies, insurance companies and Third-Party Administrators (TPAs).

Dr. Besh said that workers' compensation has an access to care problem. Dr. Besh noted that 10 percent of the providers caused 90 percent of the problems. He said that UR that is denied causes problems and his solution is that he worked with American College of Occupational and Environmental Medicine (ACOEM) to convert their guidelines into checklists to ensure requirements to provide medical care. Workers' compensation also needs promulgation and enforcement of current laws. He discussed Assembly Bill (AB) 1048 and advocated for it.

Mr. Schmelzer said he agreed with Dr. Besh that ten percent (of system participants - whether medical providers, claims administrators, attorneys, etc.) cause ninety percent of the problem. However, he disagreed with Dr. Besh a bit and said he would argue with the idea that there isn't a general shortage of physicians and a general access problem in the State. He said he thinks it hits different payment systems differently in the state, and there are regional disparities. He said these are nuanced problems, and they need to deal with them in a nuanced way. He said UR and IMR are working well. He would like care to be provided during the delay period and would like it to continue. He also discussed AB 1048, Transparency of Network Contracts, agreed with part of AB 1048 but said that every problem cannot be solved through audits of and penalties.

The panel referred to MPNs when they originally were implemented from SB 863. MPNs were networks that were created as boutique networks of hand-selected providers but also they were leased lists of providers. Mr. Schmelzer likened the situation to weeding a garden; eventually things get overgrown and have to be weeded. He said problems are never solved, rather they are temporarily addressed.

Commissioners' Questions and Comments:

Chair Roxborough said it has been 12-13 years since workers' compensation reform, and he asked Mr. Schmelzer if he meant that it was probably necessary at this point in time. Mr. Schmelzer answered yes.

Commissioners responded and commented about the issues raised, including procedures for handling UR or RFA denials that appear to meet thresholds for approval, the incentives in place for medical treatment depending on self-insured vs. privately insured, as well as circumstances when delays are critically and painfully impacting the injured worker. As for the 10% of the cases creating 90% of the problems, one Commissioner commented that it may only be 10 people, not even 10% and that there must be a way to identify and address them without burdening the entire system and coming up with new requirements or new legislation to address problems caused by just a few bad actors. Regarding MPNs, Dr. Besh commented that MPNs and MPN lists are not audited, and he said that DWC has explained that they do not have the resources to do so.

Commissioners commented about the difference between self-insured and fully insured companies, how access to care in workers' compensation is limited by geography, the fee schedule, and identifying efficiencies in the private health system to see if those can be transferred to the workers' compensations system. There were questions about the time it took for approval of treatment, UR, and audit of the workers' compensation system, penalties and enforcement.

Panelists responded to comments and questions from the Commissioners and noted that the claims handling process is slow, as well as discussing the reasons for the problems and how they need to be addressed.

Public Comment:

Tim Madden, representing medical provider Concentra, said Concentra struggles with a narrow aspect of the conversation, mainly urgent surgeries. He gave an example of a worker's delayed surgery for a torn bicep. Chair Roxborough asked how an urgent surgery is supposed to be handled. Dr. Besh clarified that the issue depends on the word "urgent" versus "emergent." Dr. Besh explained that there is a gap between emergent and elective, which is the usual UR.

Eulalia Mendoza, a community organizer with Proyecto Mixteco Indigena in Ventura County and an ex-farm worker, said that among the meeting topics discussed, she did not hear anything about farm workers. She offered an anecdote of an unnamed farm worker who collapsed while working in the fields and who apparently did not file a workers' compensation claim. The public comment was conducted in Spanish with a translator.

Sean Skullard, a vice president for the Sacramento Area Firefighters Local 522, spoke about presumptions of cancer for the firefighters he represents. He said that the system needs to make presumptives what they were meant to be, which is automatic approvals. He suggested that mandating peer-to-peer is needed – with the PTP conversation mandated with the UR doctor prior to any RFA denial.

11. Roundtable Discussion on Recommendations and Solutions - Wrap-up Other

Commissioners discussed auditing MPNs, including the extent of ghost networks, the idea of a statewide MPN for workers and employers who do not have a boutique MPN, and solutions for circumstances when doctors do not even know they are on an MPN list. There was an interest in knowing whether MPNs are functioning the way they were supposed to as designed. There was interest in learning which MPNs are working well and which are not.

Commissioners discussed the value of RAND studies and the studies that DIR and DWC contracts for. It was stated that CHSWC does not have to rely on DIR studies and can contract their own studies. There was discussion whether DIR can amend the currently contracted medical access study and whether CHSWC can be involved in DIR studies on topics that concern CHSWC. There was an expressed interest in CHSWC being involved when money is being spent for DIR to contract for studies about the workers' compensation system. A clarification was made that the 4-year medical access study by RAND would produce yearly reports and briefings, not just one report at the end of the four years. A participant inquired if CHSWC could ask for a briefing by RAND even if it is a DIR or DWC study.

Commissioners' comments included discussing enforcement in the workers' compensation system and requested the Division of Workers' Compensation (DWC) be invited to come to the next Commission on Health and Safety and Workers' Compensation (CHSWC) public meeting and discuss several topics including enforcement, Medical Provider Networks (MPNs), Independent Medical Review (IMR), UR, the recent *DWC Medical Access in the California Workers' Compensation System* study and its contract, and whether RAND will report back annually and give CHSWC a presentation on this study even though it is not a CHSWC contract. Other comments were regarding the fee schedule, payments to medical doctors, Artificial

Intelligence and technology, as well as writing a mission statement for CHSWC.

Chair Roxborough asked the CHSWC Commissioners to submit questions to Executive Officer Flores so she could send them to the DWC in advance, so that DWC can be invited to come to the next CHSWC public meeting prepared to answer those questions.

Public Comment

Sean Burrows, retired Fire Captain and paramedic, briefly described his experience in navigating the workers' compensation system and not receiving timely medical care. He offered to provide greater detail to RAND as part of their medical access study.

12. Adjournment

Chair Roxborough adjourned the meeting at 1:54 p.m.

Approved:

Nicholas Roxborough, Chair

Date

Respectfully submitted:

Melissa Flores, Executive Officer, CHSWC

Date