

Occupational Pneumoconiosis Board



2015 – 2016

Annual Report

Occupational Pneumoconiosis Board

Members

Jack L. Kinder, M.D.

Internal Medicine

Chairman

Bradley Henry, M.D.

Internal Medicine

Mahendra Patel, M.D.

Internal / Pulmonary Medicine

Johnsey Lee Leef, Jr., M.D.

Radiologist – B Reader

John A. Willis, M.D.

Radiologist – B Reader

Occupational Pneumoconiosis Board

Overview

The Occupational Pneumoconiosis Board schedules examinations for all persons filing occupational pneumoconiosis claims with the Insurance Commission. The Board makes impairment determinations based on available claim related medical evidence.

The Board obtains a complete medical history of the claimant, including any treatment for heart and lung disorders and other conditions that restrict the persons' activity. The medical history includes current and past tobacco use and to what extent. Clinical members of the Board conduct a physical examination of the claimant, giving special attention to heart and lungs, as well as any disabling injuries. Under close supervision, claimants able to exercise safely, perform a simple, standardized exercise test.

Chest X-rays are made under the supervision of the radiologist members of the Board, following film quality and technical standards established by the *Federal Coal Mine Health and Safety Act of 1969* to detect even minute changes possibly due to pneumoconiosis.

Board members are thoroughly familiar with identifiable diagnostic changes shown by X-rays of the claimant for evidence of changes occurring over time.

The Occupational Lung Center at Charleston Area Medical Center performs pulmonary diagnostic testing for the Board and reports on loss of lung function and to the extent to which lost lung function impairs the claimant's ability to work.

The 2015 / 2016 Occupational Pneumoconiosis Board Annual Report

Activity	July 1, 2014 to June 30, 2015	July 1, 2015 to June 30, 2016
Total Number of Claimants Examined	538	585
First Time Claimants	209 (39%)	264 (45%)
First Time Claimants Receiving No Diagnosis	94 (45%)	118 (45%)
First Time Claimants Receiving Initial Award	115 (55%)	146 (55%)
Total Number of Cancels / No Shows	103	107
First Time Claimants Receiving OP/O (no award)	24	26
Repeat Claimants Receiving OP/O (first time-no award)	7	10
Total Claimants Receiving OP/O	31	36
Claimants Receiving Repeat Examination	329 (61%)	321 (55%)
Repeat Exam of Claimants Receiving No Additional Award	183 (56%)	190 (59%)
Repeat Exam of Claimants Receiving Additional Award	146 (44%)	131 (41%)
Total Number of Fatal Claims Reviewed	67	65
Fatal Claims Due to Occupational Pneumoconiosis	23 (34%)	17 (26%)
Fatal Claims Not Due to Occupational Pneumoconiosis	44 (66%)	48 (74%)
Out of Town Reviews Examined	3	1
Out of Town Reviews Receiving No Diagnosis	1	1
Out of Town Reviews Receiving an Award	2	0

Physicians at the Occupational Lung Center in Charleston, West Virginia examined 585 occupational pneumoconiosis claimants during the reporting period. There were an additional 65 fatal claims and 1 of town review.

There has been continued correspondence with Lee Petsonk, M.D. and the OIC regarding PMF cases throughout the report period. **21** new cases of PMF were seen during the report period.

An update of the ongoing PMF study was presented to the Insurance Commissioner.



Jack L. Kinder, M.D.
Chairman