

Occupational Pneumoconiosis Board



2021 – 2022

Annual Report

Occupational Pneumoconiosis Board

Members

Jack L. Kinder, M.D.
Internal Medicine
Chairman

Bradley Henry, M.D.
Internal Medicine

Mallinath Kayi, M.D.
Internal / Pulmonary Medicine

Johnsey Lee Leef III, 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 2021/2022 Occupational Pneumoconiosis Board Annual Report

Activity	July 1, 2020 to June 30, 2021	July 1, 2021 to June 30, 2022
Total Number of Claimants Examined	380	364
First Time Claimants	188 (49%)	172 (47%)
First Time Claimants Receiving No Diagnosis	93 (49%)	65 (38%)
First Time Claimants Receiving Initial Award	95 (51%)	107 (62%)
Total Number of Cancels / No Shows	89	90
	15	12
Repeat Claimants Receiving OP/O (first time-no award)	3	6
Total Claimants Receiving OP/O	18	18
Claimants Receiving Repeat Examination	192 (51%)	192 (51%)
Repeat Exam of Claimants Receiving No Additional Award	104 (54%)	104(54%)
Repeat Exam of Claimants Receiving Additional Award	88 (46%)	88(46%)
Total Number of Fatal Claims Reviewed	30	36
Fatal Claims Due to Occupational Pneumoconiosis	8 (27%)	6 (17%)
Fatal Claims Not Due to Occupational Pneumoconiosis	22 (73%)	30 (83%)
Out of Town Reviews Examined	1	3
Out of Town Reviews Receiving No Diagnosis	0	0
Out of Town Reviews Receiving an Award	1	3

Physicians at the Occupational Lung Center in Charleston, West Virginia examined **364** occupational pneumoconiosis claimants during the reporting period. There were an additional **36** fatal claims and **3** out of town review.

The Insurance Commissioner was updated on the status of Progressive Massive Fibrosis cases for this year. There were **17** new cases of PMF seen during the report period.



Jack L. Kinder, M.D.
Chairman