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Maine's Workers' Compensation System: Is it Making the Grade?

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Fundamental changes in Maine's workers' compensation system were legislated four years ago. What impact have they had and what remains on the policy agenda? This article provides a comprehensive and balanced assessment of that reform effort, suggesting dramatic improvements in the system. But work remains: Vocational rehabilitation, labor-management collaboration, and cost-containment are especially in need of improvement.

by Jonathan W. Reitman, Esq.

Five years sometimes can feel like a lifetime. Think for a moment about what you were doing during the winter of 1991-1992. How many changes have occurred in your life since then?

Similarly, radical changes have occurred since 1991-1992 in Maine's Workers' Compensation System. In 1991, the issue of workers' compensation benefits was a front-page story dominating Maine's political landscape. At that time, I wrote the following analysis of Maine's workers' compensation dilemma:

- For more than ten years, the business and labor communities have taken an adversarial, "scorched earth" approach to the issue of workers' compensation. When business would propose a reform in the system, labor's kneejerk reaction often would be to call the proposal a plot to take away the hard-earned rights of the employees. When labor would propose reform, business would scream about the already-too-generous benefits, lawyers getting rich off the system, and the burdensome cost of securing coverage.
- The workers' compensation "reforms" that were enacted were so watered down that often they failed to produce any meaningful change.
- Neither management nor labor ever fully felt satisfied, and each would return to the Legislature the following year with different plans. The statute grew to be a patchwork of provisions that had little internal consistency and sometimes worked at cross-purposes.
- As a result, employer costs skyrocketed. Workers felt cheated and despised. Insurance carriers were on the verge of leaving the state. The system was collapsing, and threatening the entire Maine economy.

That analysis was prepared shortly after the state shutdown was precipitated by the workers' compensation crisis, surely one of the sorriest chapters in Maine's history. Into this dismal scenario entered a group of management and labor representatives who quietly began meeting in December 1991. As they talked, it became clear that despite their past adversarial roles, they had more in common than they might have thought. All were frustrated by the stalemate that stymied

real changes in workers' compensation. They believed management and labor, groups the workers' compensation system was designed to serve, were the most affected parties--not the Legislature--so they should take the lead in developing workers' compensation reforms. The group retained me as the neutral facilitator who would help guide their discussions during the ensuing months.

After six months of working together and arguing a lot, the sixteen labor and management representatives--the Workers' Compensation Group--reached unanimous agreement on reforms the workers' compensation system required. The group identified nine criteria that an "ideal" workers' compensation system should embody. With the creation of a blue-ribbon commission and the subsequent issuance of its report, many of those criteria were enacted in the 1992 Workers' Compensation Act reforms, the most comprehensive legislative redraft of the workers' compensation system in several decades.

Because of the highly controversial nature of the issue and the fragile peace that followed the 1992 reforms, there had been an unspoken agreement that there would be a moratorium on any critical comments about those reforms. But now, more than four years later, it seems appropriate to take a hard look at the current workers' compensation system to judge whether the system is working the way the Legislature intended when it enacted the 1992 reforms.

In this article, I will use the nine criteria originally developed by the labor-management Workers' Compensation Group in 1991 and 1992, since they seem valid measuring sticks by which to assess the successes and failures of the 1992 reform. How has each of the criteria played out over time?

I interviewed attorneys representing both employers/insurance carriers and employees, state employees involved in administering the Workers' Compensation System, injured employees, insurance adjusters and legislators. Following each of the individual criterion, I have graded the system's progress in that area.

Criterion 1. Focus on safety and injury prevention: Develop a system that works to reduce workplace illness and injury, both to reduce human suffering and costs; create incentives to encourage injury prevention efforts; find creative ways to use safety, second-injury funds.

There is no question safety is a higher priority under the new system than it was under the old. More employees throughout the state are involved in stretching exercises and preventing carpal tunnel syndrome than ever before. According to employer representatives, the heightened awareness and priority given workplace safety has resulted in fewer injuries. Statistically, this trend seems well-documented. From 1992 to 1994, the number of "first reports of injury" by which an employer documented an occupational injury dropped more than 25 percent. That trend appears to be continuing.

There is, however, a potential dark side to this otherwise heartening trend. Many skeptics of the reforms believe that while there definitely are fewer reported injuries and claims, this does not mean there are fewer occupational injuries. These skeptics point out (and the executive director of the Workers' Compensation Board acknowledges) that while there are fewer reported injuries,

Maine has no figures on actual incidents of occupational injuries. Employee attorneys believe many legitimate work injuries are not being reported or pursued because "it is too much hassle." According to one, "The word on the street is that workers' compensation is a bad deal for employees and they should stay away from it if at all possible." Another maintains, "There is a perception that the Workers' Compensation System has failed employees, so a different culture has been created." Even insurance company attorneys agree that "the culture has changed to be one against the filing and reporting of claims."

This sense that employees are not pursuing legitimate work injuries as workers' compensation claims is corroborated by representatives of Blue Cross and Blue Shield, Maine's largest non-occupational health insurer. A Blue Cross and Blue Shield representative said the insurer is seeing a vast increase in the number of work injuries reported as non-occupational. "When we see a carpal tunnel or low-back injury, we immediately call the employee. Many of them freely are admitting that these were work injuries, but they don't wish to pursue them as work injuries," the representative said.

The Workers' Compensation Board currently is implementing a Workers' Advocate System to help employees work their way through the system. Once that system has been in place for some period of time, Maine policy makers may be able to answer with more accuracy the question of whether we are seeing all those who have workplace injuries or only those who are reporting them.

In spite of this, it appears there is substantial progress in the area of safety and injury prevention, progress worthy of a grade of B+.

Criterion 2. Effective rehabilitation and return-to-work programs: A rapid return to work following an injury is best, both for the injured worker and to reduce costs; create expectations among employers and employees that an injured worker will return to work as soon as possible after an injury.

One of the most constant and accurate criticisms of the pre-1992 workers' compensation system was that no one in the system had any incentive to reduce lengthy periods of disability. Neither the doctor involved, the employee's attorney, the employer (many employers were in the assigned risk pool and their rates were not even based on their own experience), nor the employee had any incentive to get the worker back on the job as soon as possible. That equation seems to have improved dramatically. There are now many incentives for employers to get employees back to work sooner. According to one employer, "The return-to-work portion of the new system is working well. Disabilities that used to be lengthy are now much shorter. As a cold economic question, it makes sense for employers to get employees back to work as soon as possible."

Even skeptical employee advocates acknowledge that many employers are working much harder to get employees back to work more quickly, although they believe the jobs to which injured employees are returning are often "make-work" jobs that have no long-term future.

One legislative observer said, "There is tremendous pressure to return people to work, even if the job to which the employee returns is the very same job that caused her cumulative trauma in the first place." According to this observer, this pressure may be counterproductive in the long run.

A note of caution: Under the 1992 reforms, it appeared the only way an employer could terminate an injured employee's workers' compensation benefits was to make him a "bona fide offer of employment." If the employer offered no job, the employee's benefits continued. However, in a decision of the Maine Supreme Judicial Court in June 1996, the court held that an employer also could terminate an employee's compensation benefits if the employer could demonstrate that there were work opportunities available in the employee's community and that the employee had not made a reasonable search for such work. At least one employee's attorney wonders whether employers no longer will make return-to-work offers but rather will try to prove that an employee's work search has been inadequate in order to terminate benefits. Employer representatives claim that fear is simply paranoia, and that by accommodating the employee the employer gets him back to work, maintains the morale of the work force, and saves money.

The rehabilitation portion of this criterion has not fared as well. As one employee representative succinctly says, "Rehab is a dead letter." One administrator indicated that the Workers' Compensation Board has declined to develop an aggressive rehabilitation program because there was a perception under the old act that rehabilitation was too expensive, didn't place people in long-term jobs, and had become a cottage industry for rehab providers.

The Workers' Compensation Board has acknowledged that it has failed to develop a rehabilitation program. The recent hiring of a deputy director of medical and rehabilitation services at the board means, according to one member, that rehab will become a priority.

The new deputy director of medical and rehabilitation services indicated that within the next year vocational rehabilitation would merit an A grade. At this time, the jury is still out, so the author issues an A- for return-to-work efforts and a C- for vocational rehabilitation.

Criterion 3. Collaboration between labor and management and stability of the system: Employers and employees are the most affected parties. Only if they could agree on the outlines was a system likely to succeed. A system that avoids many changes during a multi-year period would help avoid returning workers' compensation to the political arena. Michigan, as an example, had no major changes in its system for seven years.

The centerpiece of the 1992 reforms was a direct result of one of the strongest recommendations of the Workers' Compensation Group--that the system no longer be controlled by bureaucrats, insurers and administrators, but that policy decisions be made by the parties most affected--employers and employees. As a result, the Workers' Compensation Board, composed of four representatives of management and four representatives of labor, was created.

No part of the new system is more controversial than the Workers' Compensation Board. There is a sharp difference of opinion over the effectiveness of the board. The optimistic view is that while initially there was no harmony between labor and management representatives on the

board, a major clash that occurred about eighteen months into its existence has resulted in "a little more" trust between labor and management members. According to this view, the board now operates in a more professional and responsible manner. Members now can argue about controversial items and handle the differences between them much better than in the past. This optimistic view suggests that members have begun to see themselves as one board and not just as two opposing sides. Other observers are not as encouraged: "There is still too much stalemate at the board," said one employer attorney.

Despite these differing views, most people agree progress in this area has come a lot slower than anticipated. Nonetheless, the optimistic view asserts that most people from the outside don't appreciate how much the Workers' Compensation Board has accomplished. Often cited as an example of board successes is an agreement--after heated debate and extended impasse--about the appointment of independent medical examiners who would have the final word in assessing an employee's disability. Others cite the selection of new hearing officers as a crowning achievement of the board.

Virtually everyone involved in the system agrees that Paul Dionne, the board's new executive director, is an excellent choice to move the system forward. Even critics say that as the former chair of the board of Central Maine Medical Center and the former mayor of Lewiston, Dionne understands the difference between policy and implementation and thus will resist the board's tendency to micromanage the system.

Among employers and legislators, there seems near unanimity about the need for the workers' compensation reforms to continue to mature without major changes. There is almost palpable fear that if any revisions are suggested, they will create a crack in the system that will allow participants with personal agendas to manufacture a crisis that might justify a wholesale revision of the statute.

In 1996, two bills were introduced in the Legislature regarding workers' compensation. One would have allowed civil litigation in fatality cases, the other would have exempted certain small businesses from the requirement of workers' compensation coverage. The Workers' Compensation Board unanimously opposed these bills because they would have changed the basic contract between employers and employees and would have opened the floodgates for additional amendments. Those bills and others may be back in the upcoming legislative session, and many observers believe their outcome will be a test for the Workers' Compensation Board.

To the extent the board is able to continue to speak with a unanimous voice on these issues, legislators appear willing to defer to its judgment. According to one legislator, "The Legislature is visibly relieved not to have to deal with this issue. You would have to strain to find examples of legislators even willing to test the waters by offering a new bill."

Whether that reluctance will carry over to the next session is less clear. Both the AFL-CIO and the Maine State Employees Association have asked prospective legislators in their legislative questionnaires whether that candidate would support a restoration of the "prevail" standard for attorney's fees. "This suggests to me that this issue is at least on their legislative radar," said one

legislator. Given the current state of the system, the author gives an A for the stability of the system, and a C regarding collaboration between labor and management.

Criterion 4. Cooperative atmosphere/simpler system: The system should place a strong emphasis on alternative dispute resolution, with a low litigation rate. Alternatives to litigation promote a more collaborative workplace and speed the process of claims resolution. The system should be simple; an attorney should not be needed to explain it.

There was an overriding mantra central to the 1992 reforms: that the Legislature explicitly intended to "get attorneys out of the system" by stressing alternatives to litigation. In addition, for the first time in half a century, injured employees are required to pay for their own attorneys. These new measures appear to be working to reduce attorney involvement. This emphasis on alternative dispute resolution also appears to be working. According to recent data, 40 percent of all potential cases get resolved at an initial troubleshooting phase and an additional 20 percent get resolved at the second stage, mediation. This leaves almost 40 percent of cases contested at formal litigation. In its performance budgeting plan, submitted as part of its strategic plan, the Workers' Compensation Board has set an objective to reduce further the number of contested cases from 10,000 to 8,000 by the year 2000.

Despite the reduction in contested cases, the simplification of the system desired by all parties has not yet occurred. Virtually all observers agree the system continues to be far too complex and is intimidating to the average employee. In addition, because the employee must pay attorney fees out of any potential recovery of retroactive benefits, many employees experience great difficulty in obtaining legal representation. A survey of injured workers, conducted for the board in September 1996 by injured worker advocate Dick Coty, revealed the following:

- Fifty-three percent of the workers injured after the 1992 amendments tried to hire an attorney for mediation; only 16 percent were successful.
- Thirty-nine percent had a poor or low understanding of the legal issues discussed at mediation.
- Forty-five percent had a poor or no understanding of the reasons their claim had been disputed.
- Thirty-six percent felt totally unprepared or poorly prepared for mediation.

Discussions with Workers' Compensation Board mediators revealed that many unrepresented claimants did not understand the offers made at mediation, and most could not make an informed decision on whether to accept or reject the offer. As a result, many claims were not resolved at mediation and the claim proceeded to a formal hearing. At that formal hearing, a relatively uneducated employee might wind up representing himself against an experienced insurance company attorney, a result one employee attorney called "clearly unfair and unjust."

Approximately 12 percent of the cases involve employees representing themselves. This is far short of the board's goal that 25 percent of employees could navigate the system without a lawyer, which suggests to at least one observer that an element of intimidation exists.

There are two potential solutions to this lack of representation dilemma. First, the Workers' Compensation Board has instituted a program that makes worker advocates available to help assess, prepare the case, and then go to mediation and perhaps even the formal hearing with the injured employee. The employer representatives on the board fully support this program because it would keep attorney involvement down, one of the explicit legislative intents of the 1992 reforms. The labor representatives on the board appear skeptical that the workers' advocates could be an effective match for sophisticated insurance company attorneys. They also voice concern about the crushing caseload such advocates will experience.

As a result, a second solution has emerged. Many observers believe there should be a return to the "prevail" standard, under which an employee could have his attorney's fees paid for by the insurance carrier if he or she prevails in formal litigation. Although it may be too early to tell, it appears the board is anxious to have the worker advocate system in place and be able to judge its effectiveness before it seriously will consider restoring the prevail standard. If this standard is to be restored by the Legislature, one insurance company attorney recently called for a clearer definition of "prevail," and for the enactment of a fee schedule or fee guidelines so that fees are not left solely to the discretion of the hearing officers. To date, the search for a cooperative atmosphere and a simpler system earns a grade of B-.

Criterion 5. A competitive state fund: Small businesses should have a choice of insurance outside the assigned risk pool. A state fund could lead to a healthy, competitive insurance market.

The Workers' Compensation Group thought a state-run state fund, which would compete with private insurance carriers, would provide freedom of choice for many employers and lower health insurance premiums. The Legislature declined to establish such a state fund. Nevertheless, there is substantial competitive pressure for a decrease in the premium pool, and many insurance companies now are hustling for business. The author assigns no grade for this criterion.

Criterion 6. Appropriate benefit levels: Recognize that benefits need to be an economic lifeline for injured workers while being equitable to both parties.

The Workers' Compensation Coordinating Council is an organization of large and small employers and insurers. Statistics publicized by the council suggest that while Maine's benefits have been reduced as a result of the 1992 reforms, they still rank fourteenth in the nation, 23 percent above the national average. By this measurement, it appears benefit levels, when compared with those in other states, are adequate.

However, the 1992 reforms established a cap on the highest level of benefits that could be paid to any employee. That cap is currently \$441 per week. For many high wage earners (those in the construction and building trades and in paper mills, for example) this cap means they are receiving nowhere near 80 percent of their date-of-injury wages and therefore are not being compensated adequately for their loss of income.

The Maine Supreme Judicial Court recently held that fringe benefits could be included in employees' average weekly wages. This finding has helped low and moderate wage earners-- those whose compensation rate is less than \$280 per week.

There is a potentially disastrous problem looming on the benefit-level horizon, however. The 1992 reforms indicated that if an employee was partially disabled, and if his injuries resulted in less than 15 percent whole-body permanent impairment, that employee could receive benefits for only 260 weeks. This means that for workers injured shortly after the effective date of the reforms, the 260-week cap will be reached early in 1998.

A simple hypothetical illustrates the problem. A worker injured in January 1993 sustains two ruptured disks. Surgery is done and the employee is unable to return to his heavy manual labor job. Nevertheless, the employee is able to find a light-duty job at another employer but is able to earn only 60 percent of his former wages. Under the current system, the employee has lost 40 percent of his wage-earning capacity and is entitled to partial compensation to restore a portion of those earnings. However, in January 1998, that employee, though still suffering from the effects of his work injury, no longer will be entitled to benefits because he cannot establish that his permanent impairment is 15 percent or greater. It is conceivable that Maine will face hundreds, if not thousands, of employees who remain disabled by legitimate work injuries but will no longer be entitled to benefits. A legitimate public policy question arises as to what will happen to those people who simply are cut off after five years but still have legitimate injuries. Will they turn to municipalities or some other public sources for support? That may be an appropriate public policy response, but it is important that as a state we be explicit about the decision we are making to shift potential liability from employers and their insurance carriers to public assistance.

Yet employers suggest the Legislature has made it clear that it didn't want workers' compensation to become an entitlement, and therefore no employee, despite the longevity of his or her disability, is entitled to lifetime benefits. There is a potential solution within the grasp of the Workers' Compensation Board. According to some of the members, the board first must obtain accurate data on these partially disabled employees. If that data reveals that medical and litigation costs have been lowered as a result of the 1992 reforms, the board could consider extending the period of time in which benefits could be received for those who remain disabled, without raising overall costs. But the Legislature might not want to increase benefits to these employees because the workers' compensation premium rates are down and insurance companies have returned to Maine, offering employers many choices for coverage. A final piece of the solution may be the development of an effective vocational rehabilitation program that would enable partially disabled employees to return to their pre-injury wage-earning capacity.

All observers agree it is imperative for the Workers' Compensation Board to act quickly and proactively on this issue. The board must obtain actuarial studies to determine whether an extension of these benefits is warranted. If the board fails to act proactively, it will represent a major failing. In the meantime, the author gives the effort a B-.

Criterion 7. Procedural mechanisms and time frames: The procedural mechanisms should produce quick decisions with no backlog of cases, thus helping to lower costs. Medical bills should be paid promptly. Time frames set forth in the statute should be strictly observed by the decision makers.

For differing reasons, both labor and management wanted to replace the former workers' compensation commissioners with an entirely new set of hearing officers. Many of those new hearing officers, while talented lawyers and experienced in other adjudicatory forums, had little if any background in the complex and arcane world of workers' compensation. Several had no exposure to the kinds of cumulative trauma that dominate many sectors of workers' compensation injuries.

Observers agree it took the new hearing officers more than a year to become familiar enough with the intricacies of workers' compensation to issue decrees that were timely and well-reasoned. Now that the hearing officers have experience, the time between the close of the evidence and the issuance of the decree has decreased dramatically.

Time frames definitely are improving. It now takes an average of twelve to sixteen months to get from the initial notice of controversy to a formal decree, compared with twenty-four to thirty months under the old system. The Workers' Compensation Board has a goal of reducing that time frame to eight to twelve months (four months to mediation, eight months to a formal hearing) within the next year. However, there remain some serious backlogs within the system. There currently are more than 800 cases awaiting mediation, and in some areas of the state it takes far more than a year from mediation to reach a formal hearing.

The most difficult issue the Workers' Compensation Board has addressed was its creation of a system to appoint independent medical examiners. In theory, if the employer and employee could not agree on a physician, the patient would be evaluated by an independent medical examiner, whose findings on issues of causation and disability would control the outcome of the case. This system was intended to reduce litigation and the "dueling doctors" system, in which both the employee and employer brought in their expert witness to testify on their behalf. The protracted debate and impasse around this issue brought the board to the brink of extinction, with the governor and legislative leadership threatening to abolish it. Finally, the board did establish a system whereby physicians could be appointed as independent medical examiners. All that effort seems to have been for naught, however, since independent medical examiners are used in very few cases.

Medical bills still are being delayed in payment. It sometimes takes as much as two years to obtain payment. In the last legislative session, a bill was introduced to allow for the collection of interest on past due medical bills that ultimately were declared to be compensable. The bill was narrowly defeated.

Advancement on this criterion to date merits a grade of B.

Criterion 8. Rate setting: Rate-setting procedures should contribute to a competitive environment and allow for rate adjustments based on experience--a further incentive for accident prevention. Employers should be encouraged to shop for lower rates; even assigned-risk employers should be able to negotiate rates.

Perhaps more than any other area, the decrease in workers' compensation premiums has caught the attention of the public and policy makers. One legislator noted that, "MEMIC [Maine Employers Mutual Insurance Company] has done a spectacular job of publicizing its rate reductions." In fact, there seems to be the very kind of competitive pressure leading to a decrease in the premium pool that the Legislature hoped would occur as a result of the 1992 reforms.

Premiums collected from Maine employers in 1994 totaled approximately \$250 million, which is now down to about \$165 million. Observers estimate there will be at least two more years of reductions in that premium pool, but warn that any legislative changes in the system will allow for premium increases, which always have been driven by such changes.

Part of the reduction in premiums is the result of the return to the workers' compensation market in Maine by a number of insurers. One estimate is that there are more than forty insurance carriers currently underwriting business in Maine, compared to the three private carriers left at the time of the 1992 reforms. Small businesses, however, have not seen the same premium decreases as larger employers. Their rates still are too high, they say, and workers' compensation continues to rate as their number one or two problem. "It's just difficult to reduce a \$1,500 premium much below that level," one observer said.

Rate-setting efforts currently earn an A- grade.

Criterion 9. Cost controls and medical cost containment: All six recognized medical cost-containment provisions should be implemented in order to ensure fair and affordable costs.

This area has received virtually no attention from the Workers' Compensation Board. According to one employee attorney, the board should have delegated this to the staff long ago but has not done so. As a result, medical protocols and utilization review for low-back problems, chronic pain, and carpal tunnel syndrome are only now working their way through the Administrative Procedure Act public comment process. Other cost- containment measures then will be addressed.

In part because attorneys can not receive any payment for assisting in obtaining payment on medical bills, physicians, hospitals, and other medical providers are filing their own petitions for payment of those bills. As previously noted, those petitions take a substantial amount of time to be resolved--part of the reason this criterion earns a C- grade.

Conclusion

Conclusions about the success of the 1992 Workers' Compensation Act reforms depends on your criteria. For employers and legislators, the goals of the 1992 reforms were simple: reduce insurance rates; change the culture that encouraged claims; remove attorneys from the system; and, most of all, take the workers' compensation issue out of the legislative arena where it had become an annual source of strife. By those measurements, the workers' compensation reforms are a dramatic success. Rates are down, numbers of reported injuries have dropped dramatically, far fewer attorneys are involved in claims litigation, and the Legislature only sporadically has dealt with isolated bills--all of which have been rejected.

There are other reform elements, however, that should not go unexamined by policy makers:

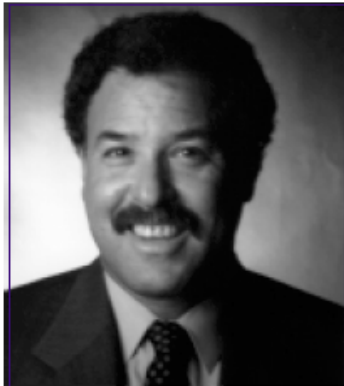
- Many employees who have legitimate injuries face the prospect of being forced back to work at jobs that clearly are inappropriate, or they risk losing their benefits if they do not accept the job offers.
- In January 1988, many employees with lingering effects from legitimate injuries will be terminated from compensation.
- Far too many employees face a distinct tactical disadvantage when they try to press legitimate claims. The system is so complex, bewildering, and intimidating that it is virtually impossible for the lay person to represent himself. Thus, there is a distinct power imbalance when an employee tries to pursue a claim against a sophisticated defense attorney.
- Then there is the Workers' Compensation Board. It has become clear in the last four years that the board is the key to the 1992 reforms. To the extent the board functions productively and solutions that benefit both labor and management emerge, the entire Workers' Compensation System will be stabilized and solidified. To the extent the board continues to bicker and be subject to internal strife, the entire system will suffer. The challenge is clear: the Workers' Compensation Board must find a way to work toward productive solutions. If the board fails, the dark days of the 1991 state shutdown precipitated by the workers' compensation issue will be with us again.

There is one other major success of the 1992 reforms that should not go unnoticed: The ability of labor and management to work collaboratively within the Workers' Compensation Group to develop common solutions apparently has served as the prototype for other, more civil, discussions between former adversaries. One journalist recently observed the following:

"Governor King proposed something radical [in the forest practices area]--coming up with a better plan by bringing together the people who had been arguing the issue for years and asking them to find solutions. The model was workers' compensation, where, after years of battling, the opposing sides had put together a plan that has begun to reduce rates and bring private insurers back into the market."

In addition to whatever else the 1992 reforms have accomplished, it may be that their most lasting achievement is to serve as a model for collaborative problem solving and civil discourse. In the areas of environmental priorities, wetlands protection, transportation planning, and

telecommunications infrastructure, successful collaborative stakeholder groups have been established in Maine. Their success may owe a debt of gratitude to those sixteen labor and management representatives whose quiet work in 1991 and 1992 served as the basis for the 1992 workers' compensation reforms.



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