

MINUTES OF THE MEETING OF THE
DISABILITY PROCEDURES AND SERVICES COMMITTEE
and
Board of Retirement**

LOS ANGELES COUNTY EMPLOYEES RETIREMENT ASSOCIATION
GATEWAY PLAZA - 300 N. LAKE AVENUE, SUITE 810, PASADENA, CA 91101

Wednesday, December 7, 2016, 10:26 A.M. – 11:29 A.M.

COMMITTEE MEMBERS

PRESENT: Vivian H. Gray, Chair
William de la Garza, Vice Chair
Yves Chery
Les Robbins
David Muir, Alternate

ABSENT: NONE

ALSO ATTENDING:

BOARD MEMBERS AT LARGE

Anthony Bravo
William Pryor
Vito M. Campese, M.D.
Shawn Kehoe

STAFF, ADVISORS, PARTICIPANTS

Gregg Rademacher	Ricki Contreras	Ricardo Salinas
JJ Popowich	Vickie Neely	Maria Silva
Steven Rice	Tamara Caldwell	Robert Hill
Vincent Lim	Anna Kwan	Mike Herrera
Eugenia Der	James Pu	
Allison E. Barrett	Debbie Semnanian	
Frank Boyd	Mario Garrido	
Sandra Cortez	Debra Martin	
Angie Guererro	Marco Legaspi	
Maria Muro	Marilu Bretado	
Michelle Yanes	Thomas Wicke	
Barbara Tuncay	Hernan Barrientos	

ATTORNEYS
Thomas J. Wicke

GUEST SPEAKER
David L. Friedman, M.D., Ph.D.

The meeting was called to order by Chair Gray at 10:26 a.m.

I. APPROVAL OF THE MINUTES

A. Approval of minutes of the regular meeting of September 7, 2016

Mr. Chery made a motion, Mr. de la Garza seconded, to approve the minutes of the regular meeting of September 7, 2016. The motion passed unanimously.

II. PUBLIC COMMENT

III. ACTION ITEMS

IV. FOR INFORMATION

A. Presentation by David L. Friedman, M.D., Ph.D. – Multi Axial Psychiatric Diagnosis.

Ms. Contreras introduced LACERA Panel Physician, Dr. David Friedman, who is Board Certified in General Psychiatry and Addiction Medicine.

Dr. Friedman began by stating that most of the presentation will be directly coming from the handout that he provided, which lists the axes that people see in the medical reports that psychiatrists use.

Dr. Friedman stated that the medical reports will contain the five axes and in order to help everyone understand what they are about, he included a brief history of what the Multi Axial System is. According to Dr. Friedman, the Multi Axial System is a snapshot of a diagnosis. This allows for you to see the physical problems that a person is having and determining if it is directly related to a mental problem and how it may be contributing to that mental problem.

Dr. Friedman briefly went over each of the five axes:

Axis I: Delineates all the major disorders or conditions that an individual may have.

Axis II: Outlines the various personality disorders and is the most important axis.

Axis III: Depicts the physical conditions that are present, and may be related to Axis I psychiatric condition, or as a result of it.

Axis IV: Delineates the various psychological and environmental problems that may affect diagnosis, treatment, prognosis, and causation of the Axis I and Axis II mental disorders (i.e. personal problems).

Axis V: Global assessment of functioning.

Dr. Friedman stated that when it comes to evaluation for disability cases, the doctors will observe and ask questions. Furthermore, they will do different types of testing, including psychological (i.e. true/false questions, memory testing). Some tests will pose a red flag if patient is exaggerating condition. Per Dr. Friedman, some patients may exaggerate because they do not feel heard and unfortunately there is no absolute way to tell if a person is being truthful. Dr. Friedman recommends looking at medical records and at the history of the patient to see how credible they are.

Mr. Kehoe asked Dr. Friedman if a physical evaluation is strictly determined by AME records or the physicians' evaluation itself. Dr. Friedman stated that for the physical evaluation, he, as a psychiatrist, will not evaluate it and will not diagnose any non-psychiatric disorders. Dr. Friedman will rely on reporting of other physicians if there is a physical condition.

Ms. Gray asked if Dr. Friedman reviews records from other physicians only and if he sees the patient more than once. Dr. Friedman stated that he wants to see ALL records, especially the psychiatric records if the patient was seen in workers' comp system or outside of it. As far as how many times the doctor sees the patient, the testing can be done in one visit but it is possible that they may need to return for a second visit. The doctor will also use information of a family member or significant other if a patient is a bad historian (especially if the patient has experienced a brain injury).

Dr. Campese stated that it is difficult to determine if a patient is truly disabled or if the problem is that they cannot get along with their supervisors. Dr. Friedman stated that it will depend on the credibility of the patient and quality and history are also keys to make that determination.

Dr. Friedman stated that that personality disorders exist independently and drugs/alcohol do not make a difference.

Any mental disorder can develop without stress. However, if you want to determine if the disorder is aggravated by stress, then history is key.

December 7, 2016

Ms. Contreras asked if a person is complaining of stress causing a physical condition, do they send to psychiatrist. Dr. Friedman stated that the patient needs to be sent to an internist first and the internist will determine if patient needs to have a psyche evaluation.

Ms. Gray asked if the Board of Retirement can ask for psyche evaluation if patient is claiming work stress causing physical condition. Dr. Friedman stated that you would need to first obtain the opinion of the internist (as long as internist asked all the appropriate questions related to the stressors at work). The Board of Retirement will not necessarily need to request a psyche evaluation unless the internist states it is needed. However, if there is a minimal history from the internist, the Board of Retirement can request a psyche evaluation in this case.

Mr. Okum asked how to deal with different personalities and provided an example of two people doing the same exact job but one files for service connected disability due to stress. Dr. Friedman answered by saying that the question that has to be raised is how long has this been going on for. Furthermore, Dr. Friedman stated that the physical body and the psyche are analogous and we can look at it in that perspective.

Mr. Chery asked what are the physicians doing to minimize the possibility of fraud in the industry and Dr. Friedman stated that all aspects of the condition need to be thorough and having as much information as possible is important.

V. GOOD OF THE ORDER

The Board and Committee Members thanked Dr. Friedman for his presentation and stated that they enjoyed it.

VI. ADJOURNMENT

With no further business to come before the Disability Procedures and Services Committee, the meeting was adjourned at 11:29 a.m.

**The Board of Retirement has adopted a policy permitting any member of the Board to attend a standing committee meeting open to the public. In the event five (5) or more members of the Board of Retirement (including members appointed to the Committee) are in attendance, the meeting shall constitute a joint meeting of the Committee and the Board of Retirement. Members of the Board of Retirement who are not members of the Committee may attend and participate in a meeting of a Board Committee but may not vote on any matter discussed at the meeting. The only action the Committee may take at the meeting is approval of a recommendation to take further action at a subsequent meeting of the Board.