

AMA guidance on assessing permanent impairment goes digital

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Updates have been released for the *AMA Guides[®] to the Evaluation of Permanent Impairment*. They are the first updates since 2008 and the first to be introduced digitally rather than in print.

For more than 50 years, the *AMA Guides* have served as the authority on the evaluation of permanent impairment. Adopted by more than 40 states and several foreign countries, the *AMA Guides* provide a rigorous methodology to enable fair and consistent evaluation of patients who have suffered an illness or injury that has resulted in a permanent loss of function.

Previously, the *AMA Guides* were released in a printed textbook format, but updates will now be available at AMA Guides Digital, where a 25-year archive of the *AMA Guides[®] Newsletter* can also be found.

“The new format is to be more flexible and allows for updates in a more timely fashion,” said J. Mark Melhorn, MD, co-chair of the AMA Guides Editorial Panel and lead author of the *AMA Guides*’ chapter on upper extremities.

The updates have been incorporated into the *AMA Guides to the Evaluation of Permanent Impairment, 6th Edition, 2021 (AMA Guides Sixth 2021)*. They include new content that was proposed by the American Psychiatric Association and the American Psychological Association to align the *AMA Guides* with terminology and methodology that appears in the fifth edition of the *Diagnostic and Statistical Manual of Mental Disorders (DSM-5)*, which was published after the most recent print edition of the *AMA Guides*.

“The content updates approved by the Guides Editorial Panel will help clinicians conduct mental health evaluations and better achieve accurate, equitable and consistent impairment ratings with updated terminology, methodology and assessment tools that mirror contemporary medical science and practice,” added Dr. Melhorn, a clinical associate professor at the University of Kansas School of

Medicine-Wichita department of orthopedics.

Specifically, the printed version of the *AMA Guides Sixth Edition* uses the median value of three different scales that assess mental and behavioral impairment. One of these, however, the global assessment of functioning (GAF), was excluded from the *DSM-5*. It is now excluded from the updated *AMA Guides* as well, which now call for using an average of the remaining two scales to rate mental and behavioral health impairment.

“Switching to the digital format allowed us to update that specific section to reflect current best science that is outlined in the *DSM-5*,” Dr. Melhorn said.

“The hope is that by using current best science, we’re able to better clarify the criteria that the evaluating physician should use in determining the final impairment,” he added. “The goal of the panel is to offer evidence-based methodology to provide a fair and consistent impairment evaluation and the panel has worked very hard and is committed to that goal.”

The panel holds monthly virtual meetings that the public can view and participate in.

Patterned after the Current Procedural Technology (CPT[®]) Editorial Panel, the 13-member *Guides* Editorial Panel draws in experts to present the most current science for making impairment evaluations. Panelists include physicians, allied health professionals and regulatory and legal advisors.

Evidence-based proposals welcome

Relevant stakeholders—including members of the regulatory and legal communities—are invited to submit proposed updates that the panel will consider if they meet certain criteria.

Once accepted for consideration, proposals go through a five-step process that includes content development, preliminary approval, public comment, revisions if needed, and final approval by the panel. The process is meant “to allow all stakeholders to both participate and communicate with the panel,” Dr. Melhorn said.

He added that if a proposal is beyond the panel members’ areas of expertise, they can call upon outside experts to advise them on the proposal.

Process provides for fast response

Dr. Melhorn noted that, as new medical innovations become available, patient outcomes will improve, and it is important that the impairment-evaluation process reflect these changes.

“Our diagnostic skills for determining causes for musculoskeletal conditions, for example, have improved, which results in a more specific diagnosis allowing for better specific care for that condition—which also results in better long-term outcomes,” he explained.

An AMA Ed Hub™ educational module provides guidance on how to apply the mental and behavioral health updates. The CME module is enduring material and designated by the AMA for a maximum of 0.25 AMA PRA Category 1 Credit™.

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