## Questions for Medical Advisory Committee Independent Medical Examination Process Nov. 4, 2016

Following an independent medical examination (IME), insurer must provide the attending physician a copy of the IME report. Some insurers request the physician review and comment on the findings outlined in the IME report. Typically a 14-day response is required. A sample letter from SAIF Corp. is on the following page.

Under the law, a worker is entitled to a Worker Requested Medical Examination when three criteria are met:

- 1) the worker has a timely hearing request on a denied claim
- 2) the basis of the denial is based on at least one IME, and
- 3) the worker's attending physician does not concur (in whole or part) with the IME report

The attending physician's review of the IME report is an important aspect of the worker's entitlement to this examination. Under current law and rules, the attending physician must specifically respond they do not concur in order for the worker to meet the third criteria.

The Management-Labor Advisory Committee is considering recommendations about this process. One idea is to modify the third criteria to allow a Worker Requested Medical Examination if the attending physician provides no written objection to the IME report within thirty calendar days of the insurer's receipt of the report, whether or not the report was provided to the physician.

## Questions:

- When an insurer sends an IME report to an attending physician, is it always clear what the insurer needs from the physician?
- Is it usually clear whether a response is required (or not)?
- Are the timeframes for responding reasonable?
- What reasons would lead a physician to not respond to an IME report?
- Do you bill and are you typically paid for responding to IME report?
- What could insurers do to improve the response rate?
- Would a standardized request for response (e.g., a form) be helpful?

October 14, 2016

Attending Physician 123 Any Medical Clinic Salem, OR 97132

Worker's Name: Injured Worker Date of Birth: 01/01/1967 SAIF Claim No.: 1234567C Date of Injury: 09/01/2016

RE: Report dated October 1, 2016

Dear Attending Physician:

Enclosed, please find the medical report from Independent Medical Examination dated October 1, 2016. Please help me with the management of this case by answering the following question:

Date
Date ent of this claim. Thank you rporation directed to claim

SAIF claims adjuster 440 Church Street SE Salem, Oregon 97312 P: 800.285.8525