

Ohio | Industrial Commission

**INDEPENDENT
MEDICAL
EXAMINATIONS**



The Ohio Workers' Compensation System has provided injured workers with medical care and financial compensation for work related injuries, disease, and deaths since 1913.

Ohio's Workers' Compensation System is administered by two agencies:

BWC and IC

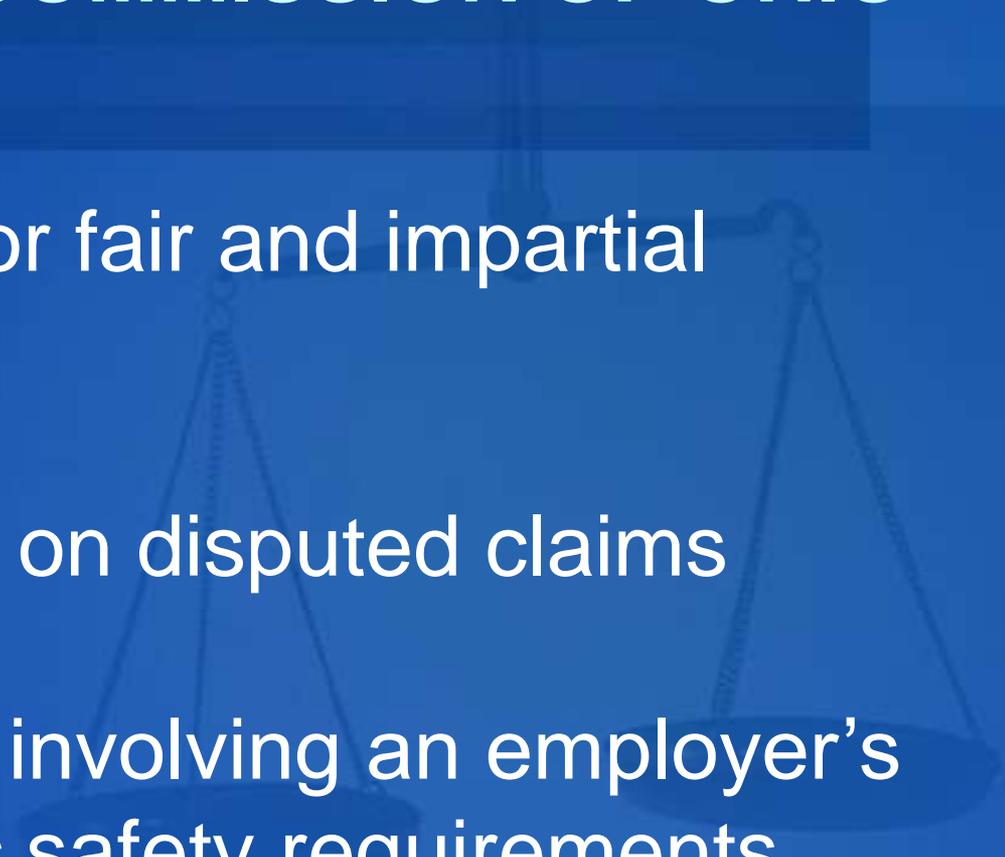
The Bureau of Workers' Compensation (BWC)

- the ***administrative*** branch of this system, managing claims, collecting employer premiums, and paying out compensable claims.

The Industrial Commission of Ohio (IC)

- the *adjudicatory* branch of this system.

THE INDUSTRIAL COMMISSION OF OHIO

- Provides a forum for fair and impartial claim resolution
 - Conducts hearings on disputed claims
 - Adjudicates claims involving an employer's violation of specific safety requirements
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THE INDUSTRIAL COMMISSION OF OHIO

- Determines eligibility for
Permanent Total Disability benefits



PERMANENT TOTAL DISABILITY (PTD)

- The issue in most IC examinations (IME)
- The IC's request for an independent examination (IME) is triggered by a PTD Application
- The claimant attests that he is permanently and totally disabled as a result of the injuries in the claim

PERMANENT TOTAL DISABILITY (PTD)

- The purpose of the IC's independent exam is to determine the *degree of impairment* resulting from the allowed work injury/injuries, to assist the Commission in its consideration of the application for PTD.

PERMANENT TOTAL DISABILITY IME

Provides medical expert opinion on three questions based *only on the allowed conditions*:

1. *Has maximum medical improvement (MMI) been reached?*
2. *If so, what is the estimated percentage of impairment due to the allowed conditions?*
3. *What are the physical or mental limitations resulting from the allowed conditions?*

MAXIMUM MEDICAL IMPROVEMENT

A treatment plateau (static or well stabilized) where no fundamental functional or physiological change can be expected within reasonable probability, in spite of continuing medical or rehabilitative procedures. An injured worker may need supportive treatment to maintain this level of function.

MAXIMUM MEDICAL IMPROVEMENT

- It is rare that an injured worker (IW) is not MMI at the time of a PTD examination
- The specialist examiner should consider if the IW is MMI *with the current treatment regimen*
- For the IW to be considered no longer at MMI, there must be *new and changed circumstances*

MAXIMUM MEDICAL IMPROVEMENT

- New and changed circumstances which would allow an injured worker to go back to a temporary total compensation status means that there is a *worsening* of the IW's allowed condition with a prognosis that the worsening is *temporary*
- A specialist's opinion on MMI must not be based on speculation of future treatment which has not been performed, approved, or requested

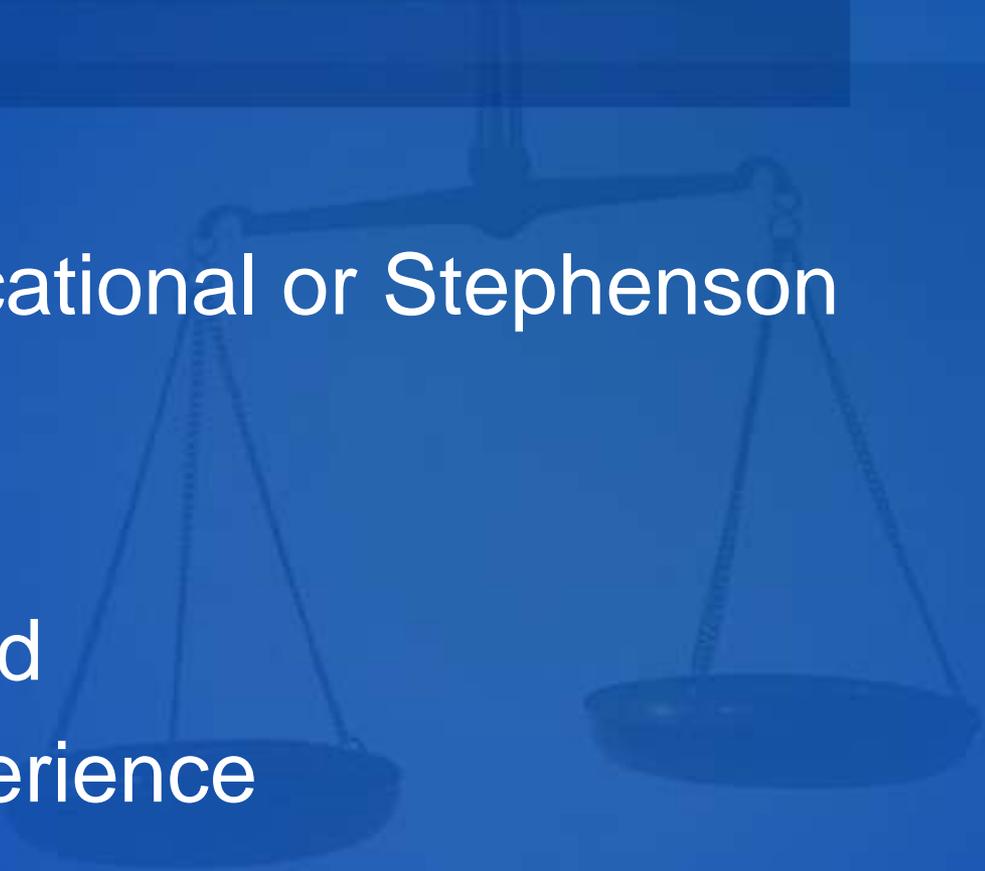
IMPAIRMENT

- Ohio Supreme Court: “the amount of the injured worker’s anatomical and/or mental loss of function caused by the allowed condition”
- This is a *medical opinion* given by medical professionals is to assist in the consideration of disability

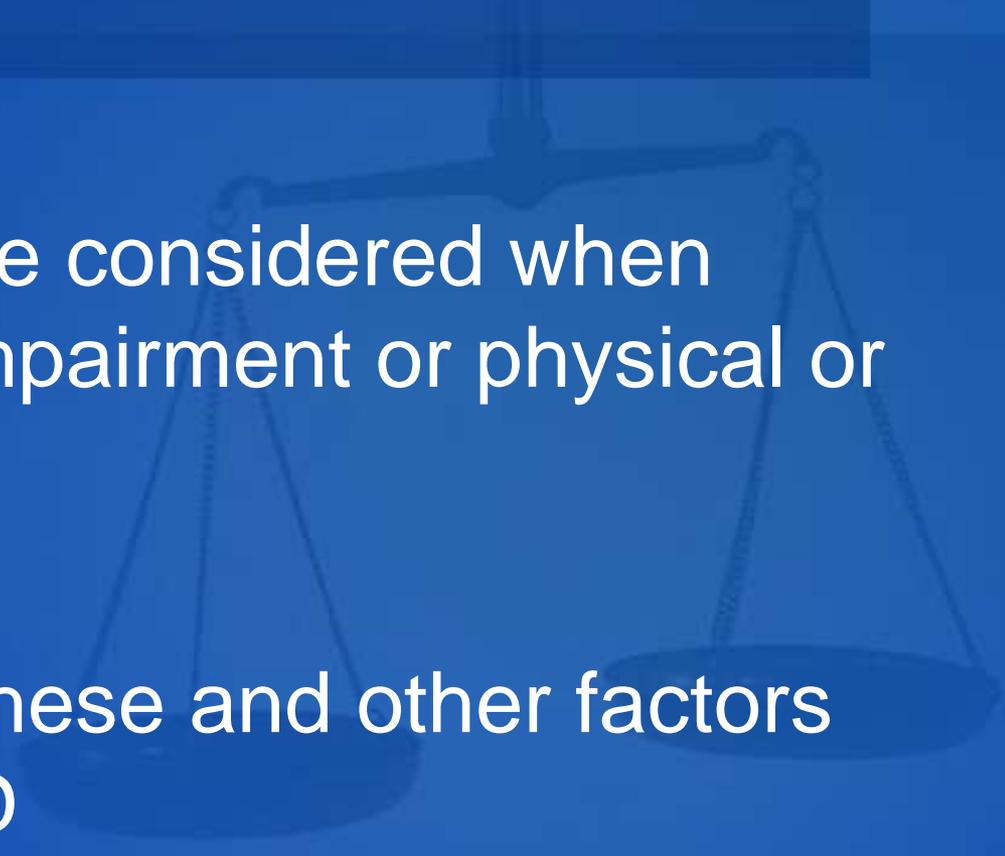
DISABILITY

- Ohio Supreme Court: “the effect the impairment has on the claimant’s ability to work” (based on the allowed conditions in the claim)
- This is a *legal* consideration and can only be determined by Hearing Officers and the Court

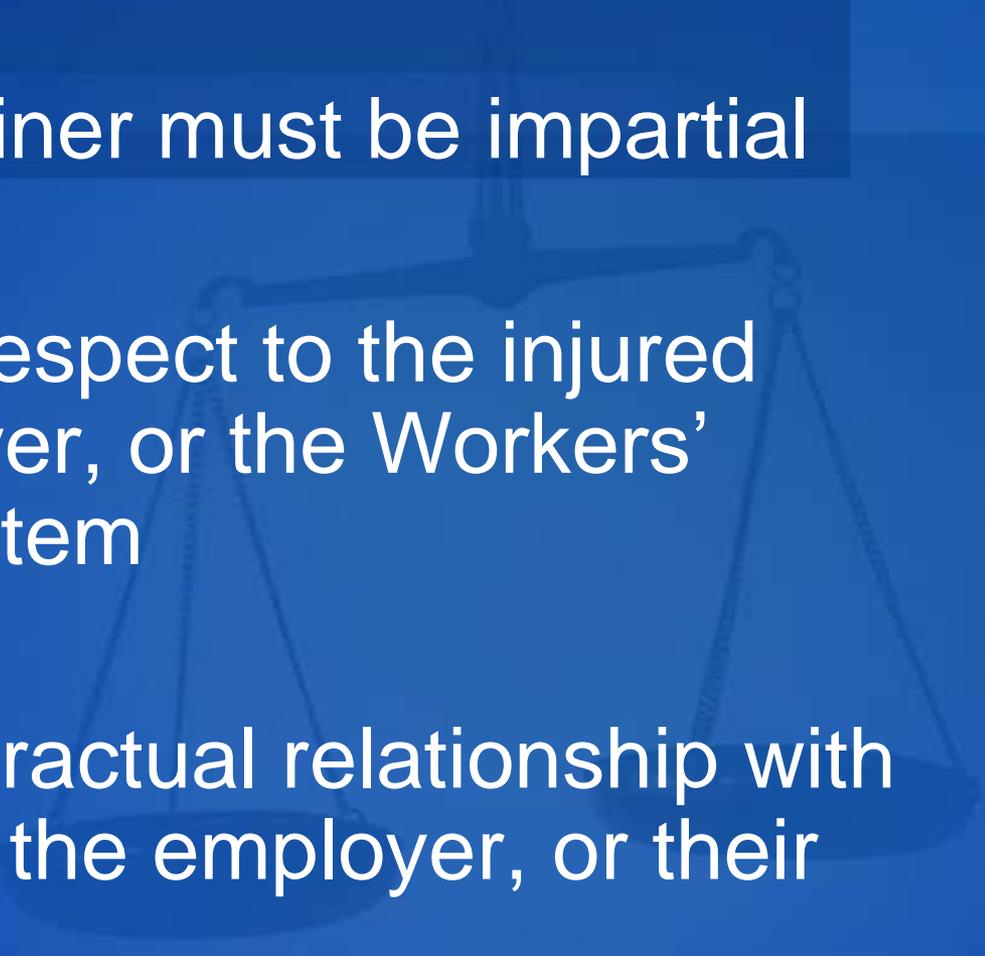
DISABILITY FACTORS

- Also known as Vocational or Stephenson factors
 - Age, education, and work/ training/ experience
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DISABILITY FACTORS

- These are *not* to be considered when giving opinion of impairment or physical or mental limitations
 - The IC considers these and other factors in determining PTSD
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IMPARTIALITY

- Independent examiner must be impartial
 - Hold no bias with respect to the injured worker, the employer, or the Workers' Compensation System
 - Do not have a contractual relationship with the injured worker, the employer, or their representative
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IMPARTIALITY

- Have not examined or treated the injured worker, or reviewed the claim file for the employer, the injured worker, the Bureau of Workers' Compensation or the Industrial Commission

INDEPENDENT EXAMINER

- No doctor-patient relationship
 - Examinee is not a “patient”
 - BWC/ IC: “Injured worker”
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INDEPENDENT EXAMINER

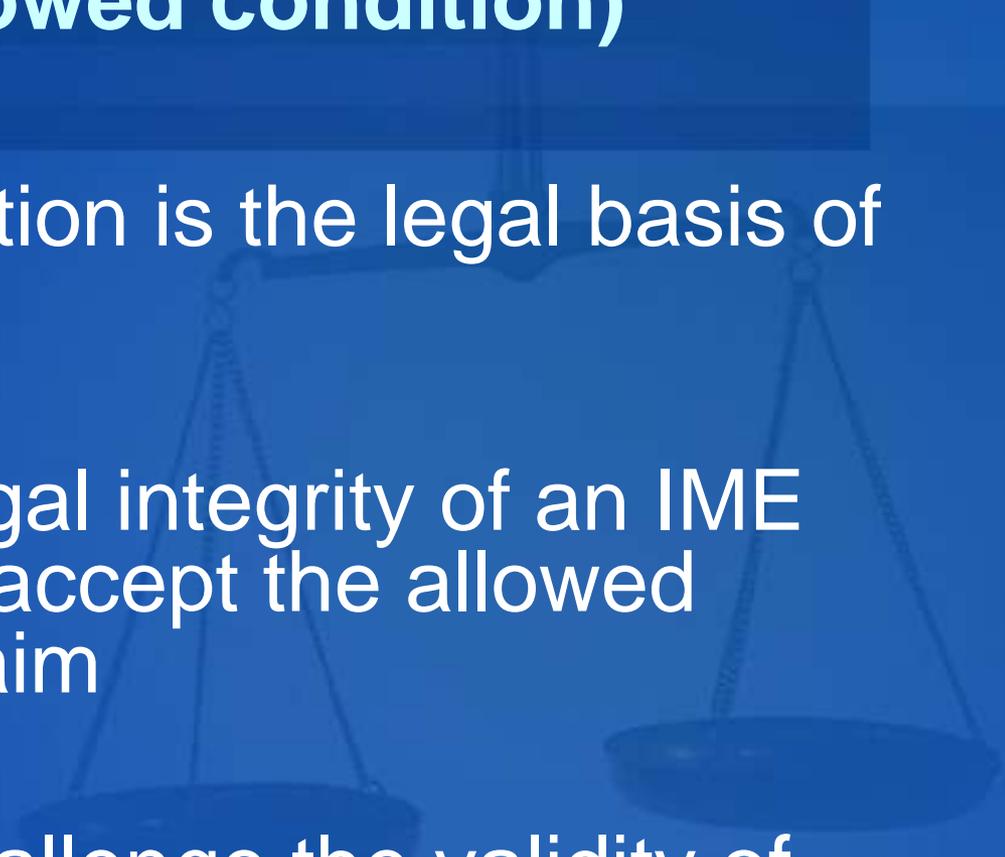
- You are an independent contractor
- Referral for medical review or examination represents a single fee-for-service commitment for the IC and the examiner
- No authorization for treatment is either implied or given in the IC's request for examinations

INDEPENDENT EXAMINER

- Examiners may not communicate with the injured worker except during the examination
- Examiners may not communicate with the employer, or the representative of the injured worker or employer
- Resist the temptation to give advice, or express opinions about current, past or future treatment

ACCEPTANCE

(Of the allowed condition)

- The allowed condition is the legal basis of each claim
 - Essential to the legal integrity of an IME that the examiner accept the allowed condition in the claim
 - Never question/challenge the validity of the allowed condition
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ACCEPTANCE

(Of the allowed condition)

- To state that there is no evidence of the allowed condition constitutes a denial of the allowed condition and may disqualify the IME as “some evidence” at hearing or in court

ACCEPTANCE

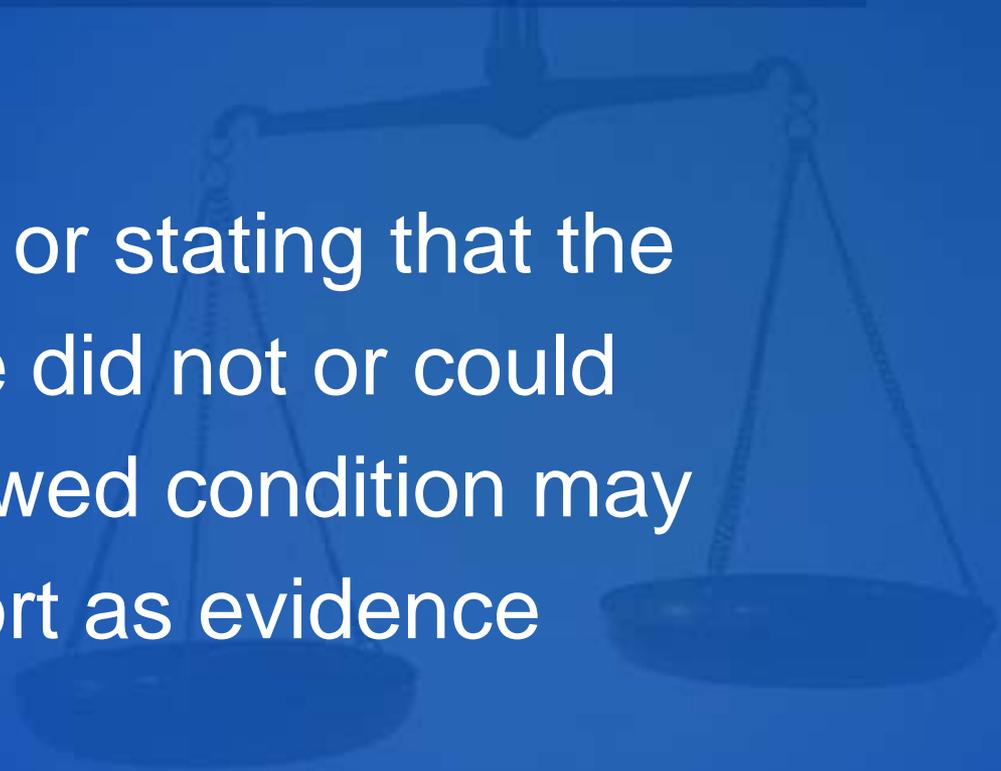
(Of the allowed condition)

- If current exam findings fail to confirm the presence of an allowed condition, examiner should state that ***“there is no evidence of impairment from the allowed condition at the time of this examination”***

ACCEPTANCE

(Of the allowed condition)

- Opinions implying or stating that the accident/exposure did not or could not cause the allowed condition may disqualify the report as evidence



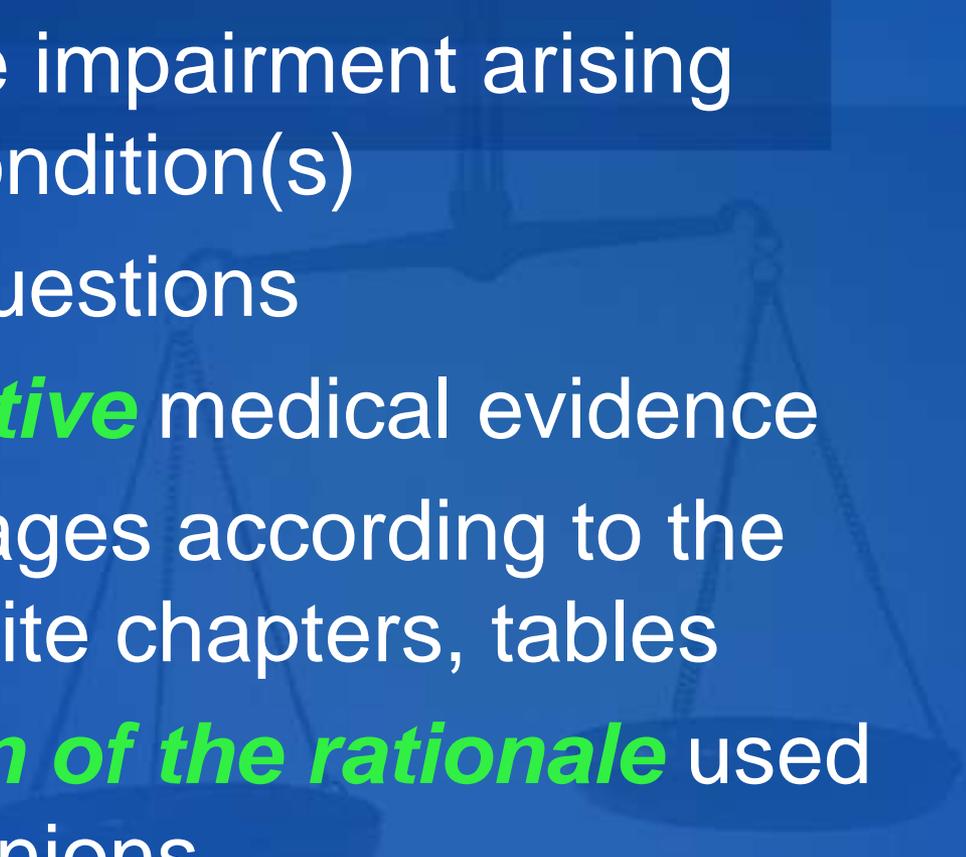
INDUSTRIAL COMMISSION IME REPORT

Report Format

A standardized format simplifies processing the claim for hearing, and provides checkpoints for examiners to assure the completeness of their report



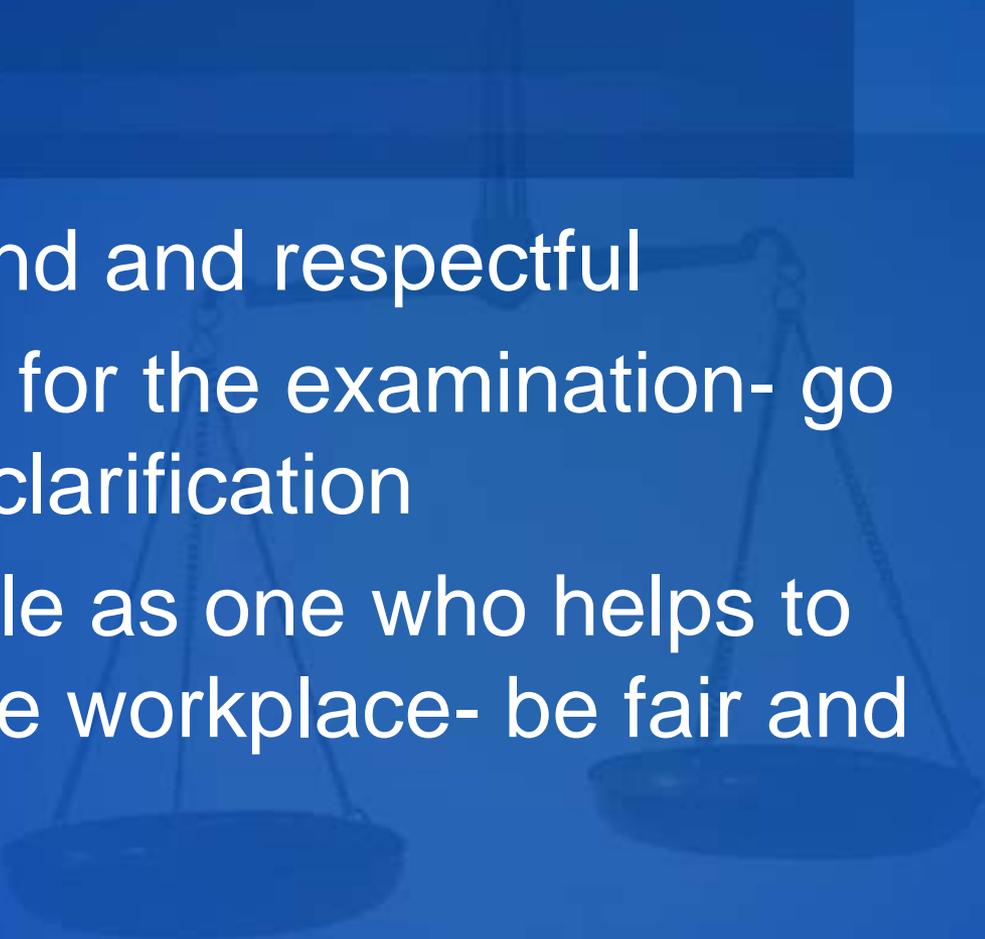
Opinion

- Based solely on the impairment arising from the allowed condition(s)
 - Answer the three questions
 - Support with **objective** medical evidence
 - Determine percentages according to the AMA Guides, and site chapters, tables
 - Provide **discussion of the rationale** used to arrive at your opinions
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Residual Functional Capacity Physical Strength Rating Occupational Activities Assessment

- Based solely on the impairment(s) arising from the allowed condition
 - Best medical opinion
 - Medical experience/expertise
 - Not pure science
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Personal Matters

- Introduce yourself
 - Be professional, kind and respectful
 - Explain the reason for the examination- go into detail- ask for clarification
 - Remember your role as one who helps to assure justice in the workplace- be fair and impartial
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Practical Matters

- Use a chaperone when prudent
- You must examine the injured worker- you must not “physically handle” them
- Let the injured worker know that you don’t want them to do anything that might hurt them
- Say who else is in the room

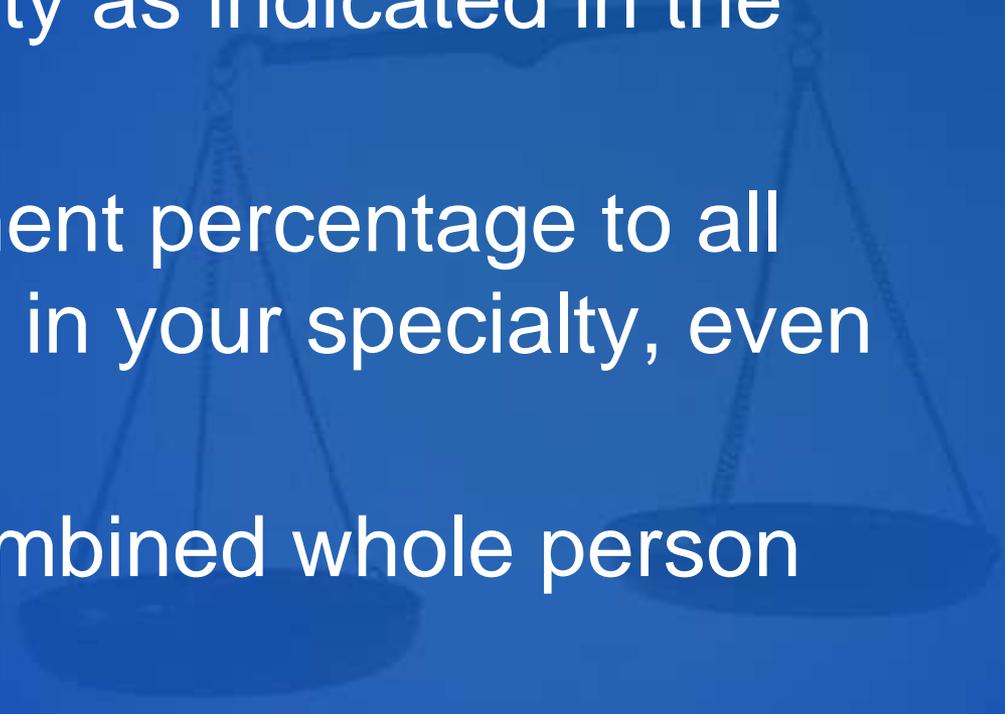
The Report

- Your initial report is considered a draft until determined complete by IC staff
- An IC staff member will review your report for essential elements- we call this “processing”
- If it is determined that the report is incomplete, you may be asked to modify it

The Report

- After the matter has been adjudicated, selected reports will be pulled and reviewed for medical competency and legal sufficiency
- We call this “quality assurance” and is considered confidential peer review
- You will get a letter from us indicating the results of the review for educational purposes

The Report

- Consider only the allowed conditions within your specialty as indicated in the referral packet
 - Assign an impairment percentage to all allowed conditions in your specialty, even if it is zero
 - Then provide a combined whole person impairment
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The Report

- Rarely our specialist examiners are required to respond to interrogatories and/or appear for deposition



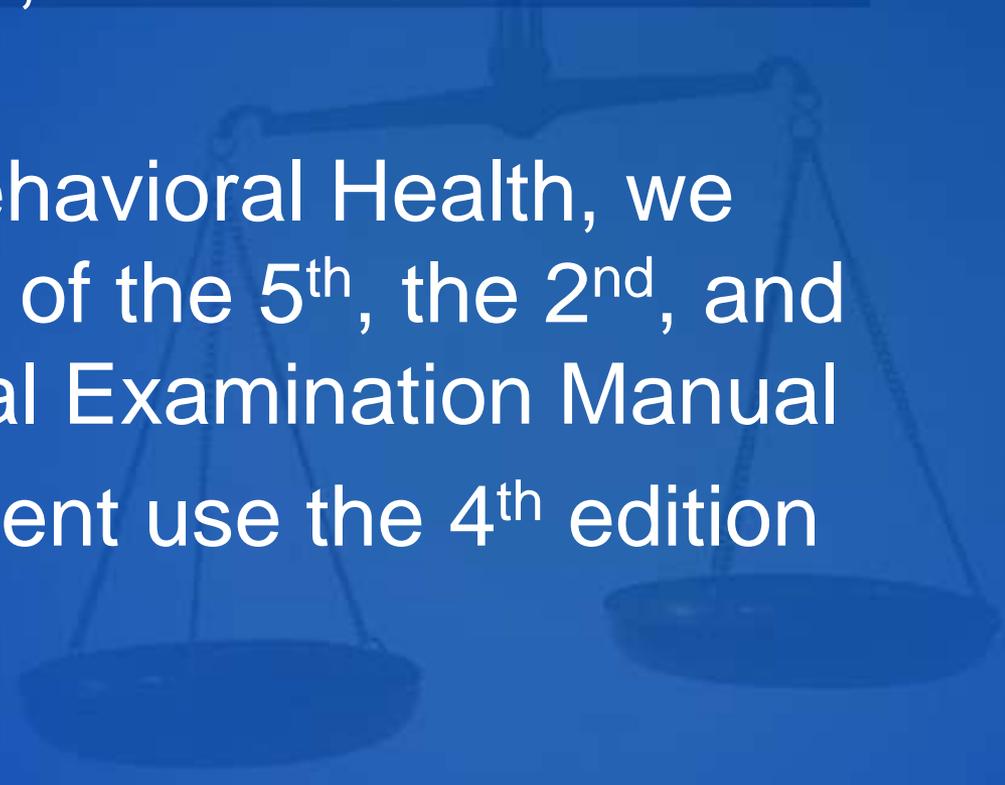
General Considerations

- Remember: *This is not a battle!* (i.e., with the injured worker, BWC, other doctors, or attorneys)
- You are asked to provide an opinion- it is *your* opinion
- Let us know right away if you need more information, if there is a conflict, or if you need guidance in formulating your report
- Explain the rationale for your opinions

Appointment Reappointment

- After **one year**, if the IC determines continued need for your services, then you will be advanced from a provisional status to an active panel status
- You will be required to apply for **reappointment in five years** at which time you will be asked to attest to required continuing education and that you continue to meet the prerequisites of the panel

AMA Guides

- For most disorders, we reference the 5th edition
 - For Mental and Behavioral Health, we combine elements of the 5th, the 2nd, and then the IC Medical Examination Manual
 - For visual impairment use the 4th edition
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AMA Guides

- We also use the *AAOMFS Guidelines to Evaluation of Impairment*
- The appropriate reference will be indicated in the referral letter

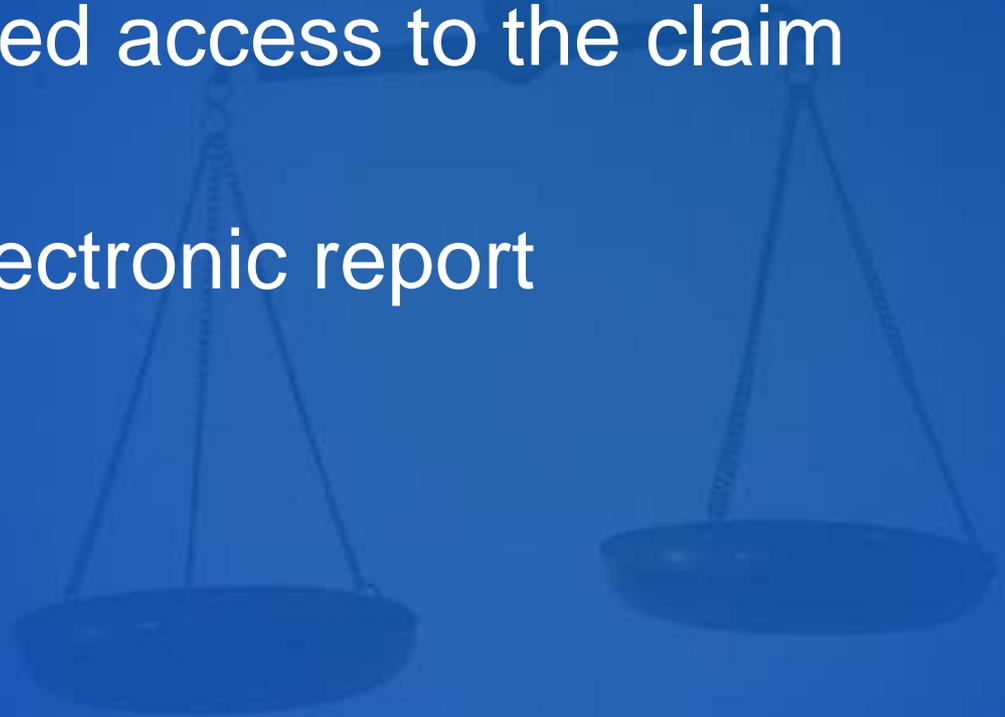


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- IC Medical Examination Manual- provides detailed instructions and sample reports.
- Archived issues of *IC MediScene*- addresses issues unique to IC medical reports
- Continuing education opportunities
- A copy of this orientation

Electronic Health Record

- Pilot study underway
- Provides time-limited access to the claim file
- Future plans for electronic report transmission



Fee Schedule

- Tiered based on type of examination and number of body parts or organ systems
- PTD applications may include multiple claims and multiple allowed conditions
- Do not consider each claim separately, rather provide a percentage impairment for each allowed body part, and then provide a combined whole person impairment

Mental and Behavioral Health

- Provide DSM-IV and GAF in your report
- The DSM-IV should include the allowed conditions (associated medical diagnoses can be deferred to the appropriate specialist)
- Psychological testing may be helpful, but is not required
- Do not use, refer to, or mention ICD-9 codes in your report

Mental and Behavioral Health

- Provide ratings in each of the four functional areas, then an estimated whole person percentage
- See pages 65 and 66 of the examination manual for detailed discussion of the required methodology