

INTERIM POLICY 13.05

Section: Medical Examinations **Effective:** 1-1-2021

Title: Interim Policy 13.05 - Scheduling Independent Medical Examinations **Cancels:** Policy 13.05 dated 5-15-16

See Also: [29 U.S.C. § 701](#) (rehabilitation act)
[42 U.S.C. Chpt 21 Subchpt VI § 2000e-2](#) (civil rights act)
[42 U.S.C. Chpt 126 § 12101](#) (americans with disabilities act)
[RCW 49.60](#) (discrimination – human rights commission)
[RCW 51.08.121](#) (new medical issue)
[RCW 51.32.055](#) (determining permanent disabilities)
[RCW 51.32.110](#) (medical non-coop., paying for expenses and time lost)
[RCW 51.32.112](#) (medical examination standards)
[RCW 51.36.070](#) (medical examinations)
[WAC 296-14-410](#) (non-cooperation)
[WAC 296-20-01002](#) (definitions)
[WAC 296-20-022](#) (paying out-of-state providers)
[WAC 296-23-312](#) (independent medical examination provider number)
[WAC 296-23-317](#) (independent medical examination provider qualifications)
[Medical Examiner's Handbook](#)

Approved by:

Cheri Ward, Chief of Claims

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This policy applies when scheduling an independent medical examination (IME).

1. An IME can only be requested for specific reasons.

Reasons for requesting an IME include decisions regarding:

- Claim allowance.
- Reopening.
- New medical issue.
- Appeal.
- Case progress.
- Permanent partial disability.
- Work restrictions.

2. The IME must be scheduled at a time and place reasonably convenient to the worker.

Reasonably convenient means a location where residents within the workers' community (county) would normally travel for similar care.

Example: A worker living in Aberdeen needs to see an orthopedic surgeon. There is limited availability of orthopedic surgeons in Grays Harbor County. Residents in the community typically travel to Thurston County to see an orthopedic surgeon. Having the worker travel to Thurston County is reasonable.

Exception:

2a. If the attending provider declined to refer for a consultation and there is no available approved examiner in the reasonably convenient location, the department or self-insured employer may make arrangements including but not limited to:

- Scheduling with the next available examiner at a location as close as possible to the worker.
- Minimizing travel for single or multiple examination appointments.
- Use of telemedicine when appropriate.

3. Out of state IMEs must be scheduled with department approved examiners.

If the exam can't be scheduled in a reasonably convenient location, the department or self-insured employer will accommodate the worker by considering the following options before requiring the worker to travel:

- Consultation(s).
- Scheduling with the next available examiner at a location as close as possible to the worker.
- Minimizing travel for single or multiple examination appointments.
- Use of telemedicine when appropriate.

NOTE: The consulting provider must have a department provider number.

NOTE: Out of state chiropractors can't perform impairment ratings.

4. Adjudicators may require a worker living in another country return to the United States for an IME.

The adjudicator may authorize a consultation in the country where the worker resides.

5. State Fund adjudicators may request specific doctors ONLY in certain situations.

State Fund adjudicators may request specific doctors only in the following situations:

- Reopening requests (when returning the worker to the closing examiner).
- Repeat examinations (when the doctor examined worker before).
- When the claim involves complex medical or legal issues making it appropriate for the adjudicator to request specific doctors.

Reminder: IME requests should not exclude approved examiners without documented reason(s).

6. The department or self-insured employer must provide a written notice of the IME appointment to both the worker and the worker's representative.

The notice must:

- Be sent at least 14 calendar days but not more than 60 days prior to appointment.
- Include the appointment time, date, and place.
- Be sent to all claim parties.

NOTE: The purpose of the IME needs to be documented in the claim file.

Exceptions:

6a. The worker or the worker's representative may agree to waive the 14 day notice for initial IME scheduling or reschedules. The worker's agreement to waive must be documented in the claim file.

6b. IMEs for incarcerated workers are confidential and no appointment notice is sent.

7. Department or self-insured employer will comply with applicable federal and state civil rights laws.

The department or self-insured employer will provide reasonable accommodation to ensure equal access for any person with a disability whether due to a work injury, pre-existing condition or other health condition.

Examples of reasonable accommodation include but are not limited to:

- Alternative communication methods, including reprinting and reformatting of information needed to administer industrial insurance benefits, such as Telephone Relay Services and Braille materials.
- Providing specialized transportation or location for independent medical examinations to accommodate physical mobility limitations.
- Ensuring workers with diabetes are allowed regularly scheduled breaks during extended examinations.

8. The department or self-insured employer provides meaningful access to workers with limited English proficiency by offering language access services at no cost.

9. The department or self-insured employer must provide a copy of the IME report to the attending physician, the worker, and the worker's representative.

For further information about this or other workers' compensation policies, you may contact the Insurance Services' policy program at 360-902-6932.

INTERIM POLICY 13.07

Section: Medical Examinations **Effective:** 1-1-2021

Title: Interim Policy 13.07 - Worker Cancels or Fails to Appear for an Independent Medical Examination **Cancels:** Policy 13.07 dated 12-14-2012

See Also: [RCW 51.32.110](#) (medical examination – refusal to submit – traveling expenses – pay for time lost)
[RCW 51.32.230](#) (recovery of overpayments)
[WAC 296-14-410](#) (reduction, suspension, or denial of compensation as a result of noncooperation)
Policy 13.05 (scheduling independent medical examinations)
[Medical Examiner’s Handbook](#)
[Andersen v. Dept. of L&I 1998](#)
[Romo v. Dept. of L&I 1998](#)

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This policy applies when a worker of a State Fund or self-insured employer cancels or fails to appear for an independent medical examination (IME).

- 1. The department or self-insured employer must send a letter to the worker or worker’s representative asking the reason(s) why the worker did not attend, obstructed or refused to submit to an IME.**
- 2. The worker has 30 days to respond in writing explaining the reason(s) for not attending an IME.**
- 3. The adjudicator determines on a case-by-case basis whether the worker has good cause for not attending an IME.**

If good cause is established a no show fee won’t be assessed, and the IME will be rescheduled if appropriate.

A worker must have good cause for not attending an IME. Reasons for good cause include:

- Notice of the examination was not sent to both the worker and the worker's representative 14 days prior to the scheduled appointment. The notice must contain the date, time, and location of the examination.
- The worker hasn't been examined or evaluated and leaves after waiting more than one hour after the scheduled time.
- The examiner cancels or is unavailable for an exam. If the examiner cancels because the worker was more than 30 minutes late, this will not be considered good cause for not attending the exam.

NOTE: Other situations may arise where the adjudicator must decide if the worker had good cause for missing the IME. Adjudicators should consider whether the worker experienced an unforeseen or unavoidable event preventing attendance. Failure to arrange dependent care or transportation generally won't be considered good cause.

NOTE: When a specialty examiner isn't available in a reasonably convenient location but the department or self-insured employer took steps to accommodate the worker, refusal to attend the exam because of location is not considered good cause.

4. Direction from a worker's representative or other interested party not to attend an IME, without further explanation, isn't good cause for the worker not to attend.

The worker or representative must provide the reason(s) for not attending and the adjudicator must carefully consider good cause on a case-by-case basis.

If appropriate, the adjudicator should consider noncooperation on the claim until the worker cooperates by attending an IME.

5. The department or self-insured employer may not assess a no show fee against a worker if the worker or their representative gives at least five business days' notice of the worker's intent not to attend the examination.

The adjudicator will cancel or reschedule the IME when notified of non-attendance five business days before the scheduled IME, if appropriate or indicated.

6. **When a worker repeatedly obstructs or refuses to submit to a medical examination, the adjudicator may consider suspending benefits unless given good cause.**
7. **Self-insured employers must request and receive an order from the department before reducing benefits.**
8. **A no show fee may be assessed when the worker or worker's representative fails to give five business days' notice of intent not to attend or cancelling the exam.**

Adjudicators can only assess a no show fee:

- If the worker gives less than five business days' notice, and
- Doesn't have good cause or
- Fails to attend the IME.

9. **The no show fee is recovered from time-loss benefits payable to the worker whenever possible.**

The no show fee can **only** be deducted from time-loss benefits and can't be deducted from other benefits such as permanent partial disability, pension or Option 2 awards.

The no show fee may be deducted from current or future time-loss benefits paid to the worker under other claims with the same insurer (State Fund or self-insured).

When a claim is reopened with a no show fee still owed by the worker, time-loss benefits will be reduced until the no show fee is paid in full.

Time-loss benefits will generally be reduced by an amount not to exceed 25% of the total time-loss payment until the no show fee is paid in full. If there are not adequate anticipated time-loss payments to cover the no show fee, the time-loss payment will be reduced sufficiently to recover the remaining no show fee, even if this results in exceeding 25%.

For further information about this or other workers' compensation policies, you may contact the Insurance Services' policy program at 360-902-6932.