

Designated Doctor

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Information for Injured Employees from the Division of Workers' Compensation

Information in this fact sheet is effective for designated doctor examination requests made on or after January 1, 2007.

What is a Designated Doctor?

[Tex. Labor Code §§ 401.011(15), 408.0041 and 408.151; 28 Tex. Admin. Code §§126.7 and 180.21]

A designated doctor is a doctor selected by the Texas Department of Insurance, Division of Workers' Compensation (TDI-DWC) to make a recommendation about your medical condition or to resolve a dispute about your work-related injury or occupational illness. You, your representative, the insurance carrier or the TDI-DWC can request an examination by a designated doctor.

If you do not have legal representation, you can request a designated doctor in any manner, including a telephone call to your local TDI-DWC field office. Any other party requesting a designated doctor examination must complete and submit a *Request for Designated Doctor, DWC Form-32*, to the TDI-DWC. The TDI-DWC will determine if a designated doctor should be appointed to conduct the exam. You and the insurance carrier cannot request more than one (1) designated doctor examination every 60 days, unless the TDI-DWC approves it under certain circumstances. The TDI-DWC must use the same designated doctor for each examination related to a specific claim, unless the doctor no longer qualifies or is unavailable.

A designated doctor can address and give a medical opinion to resolve questions about:

- the impairment caused by the compensable (work-related) injury or illness;
- the attainment of maximum medical improvement (MMI);
- the extent of the injured employee's work-related injury or illness;
- whether the injured employee's disability is a direct result of the work-related injury or illness;
- the ability of the employee to return to work;
- the employee's ability to return to work after the second anniversary of entitlement to supplemental income benefits; or
- other issues similar to those described above.

This publication is a summary and is presented for informational purposes only. It is not a substitute for the statute and TDI-DWC rules. For questions about TDI-DWC rules, please call Customer Assistance at 1-800-252-7031. CS07-002B(12-08)

Scheduling an Examination

Within ten days of approving the request for designated doctor examination, the TDI-DWC will coordinate the scheduling of the examination and issue written notice to you, the designated doctor, the treating doctor and the insurance carrier. The notice will:

- provide the designated doctor's name, license number, office address, telephone number and the date and time of the examination or the date range for when an examination is to be conducted;
- explain the reason for the designated doctor examination;
- require you to be examined by the designated doctor; and
- authorize the treating doctor and the carrier to forward all medical records to the designated doctor at least five days before the examination.

You are required to attend the designated doctor examination. If you have a scheduling conflict, you are required to contact the designated doctor at least 24 hours before the appointment to reschedule. If the designated doctor has a scheduling conflict, he/she must notify you at least 24 hours before the appointment to reschedule. The designated doctor is required to contact the local TDI-DWC field office and the carrier within 24 hours of rescheduling the appointment with the date and time of the new appointment. If the examination cannot be rescheduled within 21 days of the original scheduled examination, the designated doctor will notify the TDI-DWC and the TDI-DWC will select a new designated doctor.

If you, without a good reason, fail to attend the designated doctor examination and do not reschedule the examination, the carrier may stop payment of your Temporary Income Benefits (TIBS). If you later attend the designated doctor examination, the carrier can again issue payment of TIBS, unless the designated doctor's report states that you have reached MMI or you are not eligible for income benefits for some other reason.

For further assistance, call

1-800-252-7031

or visit

www.tdi.state.tx.us

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If you have to travel greater than 30 miles one-way, the insurance carrier is required to pay for your reasonable travel expenses when traveling for the examination. To request reimbursement of your travel expenses, you must submit a *Request for Travel Reimbursement* (DWC Form-048) within one year (1) year of the date you incur the travel expenses.

Medical Records and other information

[28 Tex. Admin. Code §126.7(i)]

The designated doctor can receive your confidential medical records without a signed release from you. The treating doctor and insurance carrier are required to send your medical records and other information to the designated doctor no later than the five (5) working days before the examination. The treating doctor and insurance carrier can also send the designated doctor information on your medical condition, functional abilities and return-to-work opportunities. If the insurance carrier sends information to the designated doctor, the insurance carrier must also send a copy of the information to you and your treating doctor. If the treating doctor sends information other than your medical records to the designated doctor, the treating doctor must also send a copy to you and the insurance carrier.

Contacting the Designated Doctor

Only you and TDI-DWC staff can talk with the designated doctor about your medical condition or history before the examination. After the examination, only TDI-DWC staff can talk with the designated doctor about your medical condition or history. The designated doctor may contact any doctor who has previously treated or examined you and any doctor who has conducted a peer review of your claim.

At any time, you, the insurance carrier or the treating doctor can contact the designated doctor's office to ask about administrative matters such as whether or not the examination took place; whether the designated doctor's report has been filed, or similar matters.

Designated Doctor Reports

Within seven working (7) days after your examination, the designated doctor will issue one of the following reports and provide you with a copy of the report. If you have

legal representation, contact your attorney for an explanation of what is contained in the designated doctor's report. If you do not have legal representation, and you need an explanation of the designated doctor's report, contact the Office of Injured Employee Counsel (OIEC) by calling 1-866-EZE-OIEC (1-866-393-6432) or your local TDI-DWC field office by calling 1-800-252-7031.

MMI and Impairment Rating Report

[28 Tex. Admin. Code §130.1]

The designated doctor will issue a *Report of Medical Evaluation, DWC Form-69*, when the purpose of the examination is to address MMI or impairment rating.

Ability to Return to Work Report

[28 Tex. Admin. Code §126.7(o) and §129.5]

The designated doctor will issue a *Work Status Report, DWC Form-73*, if the designated doctor determines you can return to work immediately with or without restrictions or you cannot return to work at the time of the examination.

Report for Issues other than MMI, Impairment or Return to Work

The designated doctor must issue a written narrative report for issues other than MMI, impairment or return-to-work.

Definitions

Income Benefits replace a portion of wages you lose because of a work-related injury or illness, or are paid to you due to permanent damage or harm to your body because of a work-related injury or illness. There are four types of income benefits: temporary income benefits (TIBs), impairment income benefits (IIBs), supplemental income benefits (SIBs) and lifetime income benefits (LIBs).

Impairment Income Benefits (IIBs) replace a portion of wages if you have a permanent impairment from your work-related injury or illness.

Impairment Rating is the percentage of permanent physical damage to your body that resulted from a work-related injury or illness.

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Maximum Medical Improvement (MMI) is the earlier of:

- the point in time when your work-related injury or illness has improved as much as it is going to improve; or
- 104 weeks from the date you became eligible to receive temporary income benefits.

Temporary Income Benefits (TIBs) replace a portion of wages if your work-related injury or illness causes you to lose all or some of your wages for more than seven (7) days. If you work more than one job, you may be paid TIBs if you lose all or some of your wages from other employers.