

# Independent Medical Examinations

Medical / Musculoskeletal  
IME Evaluations

# OIC and BWC administer the Workers' Compensation System of Ohio

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

# The Bureau of Workers' Compensation

The Bureau of Workers' Compensation (BWC) is the medical administrator of the system. BWC collects employer premiums, manages claims, and pays injured workers and providers for compensable claims.

# The Industrial Commission of Ohio

The Industrial Commission of Ohio (OIC) is the adjudicatory branch of the Ohio Workers' Compensation System.

# The Industrial Commission of Ohio

OIC determines eligibility for Injured Worker  
Permanent Total Disability (PTD) benefits.

# The PTD Independent Medical Exam

When an Injured Worker (IW) applies for Permanent Total Disability, the OIC requests an Independent Medical Exam to evaluate impairments resulting from the allowed conditions in the claim.

# The PTD Independent Medical Exam

The purpose of the requested OIC exam is to determine the extent of **impairment** resulting from the **allowed** (work-related) musculoskeletal and medical conditions to assist OIC in consideration of the PTD application.

# The PTD Independent Medical Exam

The IME provides an opinion to three questions:

1. Has maximal medical improvement been reached?
2. If so, what is the estimated percentage of impairment due to the allowed conditions?
3. What are the physical limitations resulting from the allowed conditions?



# Definitions

Impairment

Disability

Maximal Medical Improvement

# Impairment

As stated by the Ohio Supreme Court, impairment is “the amount of the injured worker’s anatomical and/or mental loss of function caused by the allowed condition.”

# Impairment

An impairment rating is a **medical opinion** given by mental health and/or medical professionals to assist in the determination of disability.

# Disability

The Ohio Supreme Court states disability is “the effect the impairment has on the injured worker’s ability to work” (based on the allowed conditions of the claim).

# Disability

Disability is a **legal** determination and is made **only by the Court or Hearing Officers** - they consider the Stephenson Disability Factors (age, education, previous training, and work experience).

# Maximal Medical Improvement

MMI is a treatment plateau (static or well-stabilized) where **no fundamental, functional or physiologic change** can be expected within reasonable probability, in spite of continuing medical or rehabilitative procedures. The injured worker may need supportive treatment to main this level of function.

# Maximal Medical Improvement

The injured worker is almost always MMI at the time of the PTD examination. For the injured worker to be considered **not MMI**, there must be **new and changed circumstances** where there is a temporary worsening of an allowed condition.

# Maximal Medical Improvement

Another non-MMI circumstance would include a new condition that is allowed to the claim shortly before the PTD exam in which there has been inadequate time to treat the recently allowed condition.



# Maximal Medical Improvement

An opinion on injured worker MMI must be based on **current treatment of the allowed conditions** - ***and not*** based on speculation of future treatment which has not been performed, approved or requested.

# Medical /Musculoskeletal IME

- The examiner is an independent contractor
- There is no doctor-patient relationship
- The injured worker is not a “patient”
- Single exam fee-for-service commitment

# Medical /Musculoskeletal IME

Introduce yourself  
Explain the purpose of the OIC Exam  
Be professional and respectful  
Be fair, objective and impartial

# Medical /Musculoskeletal IME

Reassure the injured worker that you intend no harm during the exam process. Evaluate the injured worker and report your objective exam measurements, findings, Range of Motion(ROM), and observations.

# Medical/Musculoskeletal IME

The independent examiner must be **impartial**: hold no bias or contractual relationship with the injured worker, the employer, or their legal representatives.

# Medical/Musculoskeletal IME

The independent examiner must be **impartial**: the IME specialist must have no previous evaluations or treatments with the IW; no previous file reviews or IME exams for the IW, employer, or BWC/OIC.

# Medical/Musculoskeletal IME

Communication with the injured worker or their legal representative regarding the IME evaluation is conducted **only** through OIC Medical Services.

# Medical/Musculoskeletal IME

There is no authorization for injured worker  
treatment.



# Medical/Musculoskeletal IME

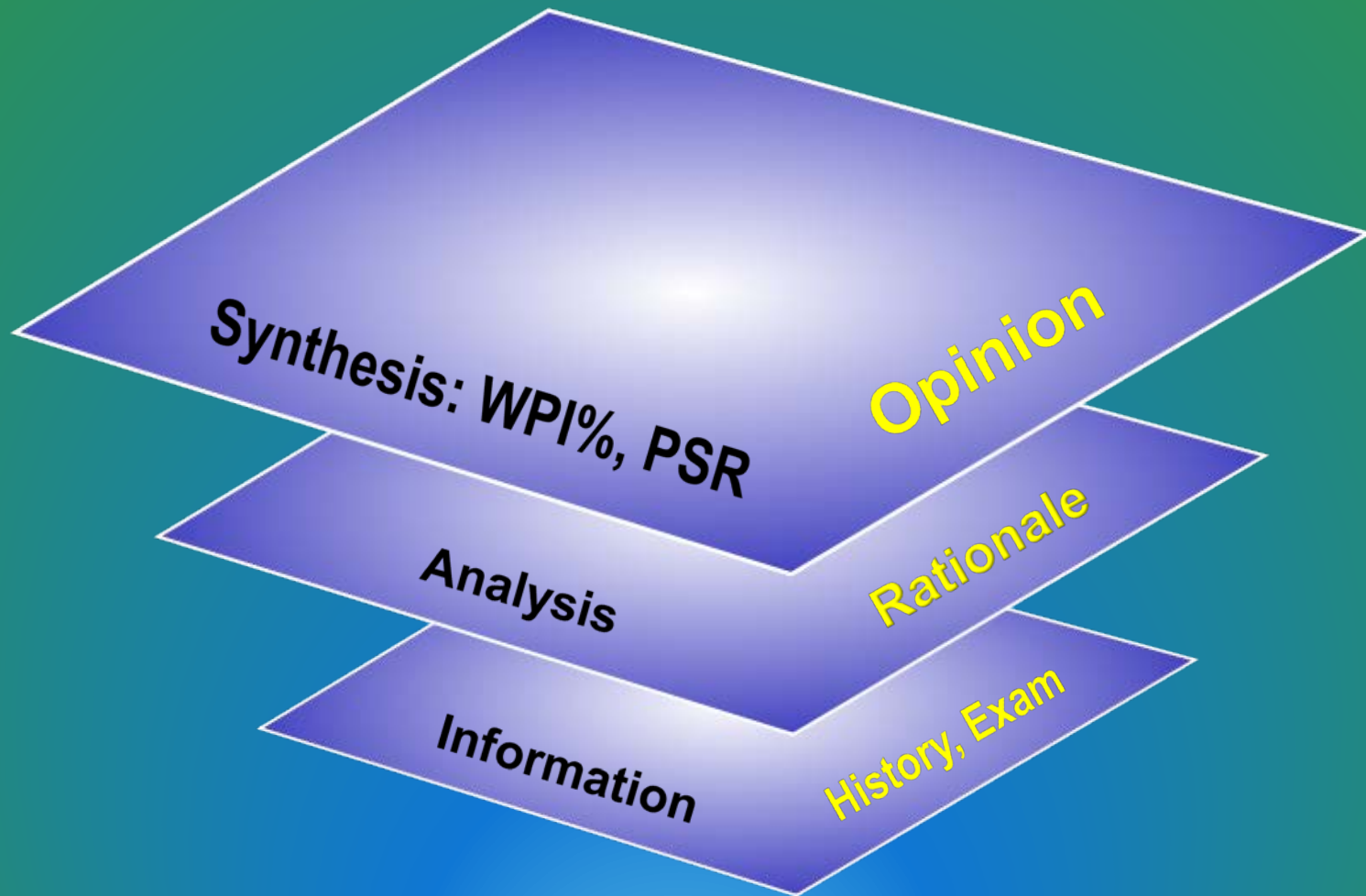
Refrain from giving advice or opinions to the injured worker regarding previous, current or future treatment.

# Medical/Musculoskeletal IME

Use a chaperone when prudent.  
Name persons that accompany the IW during the IME.  
Legal representatives of the IW **may not** be present  
during the IME.

# The IME Report

## Elements of the Medical/Musculoskeletal IME Report



# The IME Report

Medical/Activities of Daily Living (ADL) history

Medical/physical exam findings, ROM, observations

Analysis: examiner assessment and rationale

Synthesis (opinions): ∫ WPI% (Combined), PSR

# The IME Report

**Accept the allowed conditions.**

Allowed conditions are the legal basis of the claim.  
Never challenge or deny the validity of the allowed conditions in the claim.

# The IME Report

**Accept the allowed conditions.**

Denial (explicit or implicit) of the allowed conditions disqualifies the IME evidence and opinion at OIC Hearing or in Court.

# The IME Report

## **Accept the allowed conditions.**

On the date of exam, if musculoskeletal or medical impairment is negligible resulting from the allowed condition(s), the examiner should report zero (**0%**) impairment for the allowed condition(s).



# The IME Report

Use the *Guides to the Evaluation of Permanent Impairment, 5<sup>th</sup> Edition*, to provide an integrated Whole Person Impairment (WPI)% calculation for all allowed conditions evaluated by the examiner.

# The IME Report

An injured worker may have many similar anatomical or physiological conditions allowed within a work claim, or have similar/identical conditions allowed across multiple work claims.

# The IME Report

**Group similar allowed conditions according to anatomical regions or physiological systems.**  
Focus on the function of the body region or organ system examined, then rate impairment using the Tables/Figures from the *Guides, Fifth Edition*.

# The IME Report

Account for all allowed conditions assigned in the PTD exam. Give a combined whole person percent impairment of the anatomical regions/physiological systems examined - do not report on a **claim-by-claim** basis. Do not use ICD-9/ICD-10 codes in your report.

# The IME Report

Multiple impairments are **combined** according to the *Guides to the Evaluation of Permanent Impairment, Fifth Edition*, (Page 604), to calculate Whole Person Impairment (WPI)% of all evaluated conditions.

# The IME Report

For a complex IME involving many allowed conditions and multiple claims, **organize** the impairment categories by anatomical region or physiological function to calculate whole person impairment.

# The IME Report

Examples of report formats to  
organize impairment calculations  
(WPI)%

# The IME Report

Consider this PTD request

**Claim #1:** Lumbar strain, right rotator cuff tear

**Claim #2:** Lumbosacral L5-S1 disc protrusion

**Claim #3:** L4-5 disc bulge, Left L5 radiculopathy



# The IME Report

## Narrative format:

**Lumbar strain; lumbosacral L5-S1 disc protrusion; L4-5 disc bulge; left L5 radiculopathy.** A 2011 EMG showed (+) waves in the left L5 paraspinals /EHL. On exam, there is an absent left hamstring DTR (intact right), left SLR(+); 4/5 left dorsiflexion strength. She has decreased ROM of the lumbar spine; no history of back surgery. In my opinion, the IW has DRE Lumbar Category III impairment, (Table 15-3, pg. 384), giving her **13% WPI** for these allowed conditions using the *Guides, 5<sup>th</sup> Edition*.

**Right rotator cuff tear.** She had right RCT repair in 2012; no distal clavicle resection. On exam, she has decreased ROM for right shoulder abduction and internal rotation. In my opinion, the claimant has a **9% WPI** for this allowed conditions using Table 16-3 (p. 439), Figure 16-40 (p. 476), Figure 16-43 (p. 477) and Figure 16-46 (p. 479) in the *Guides to the Evaluation of Permanent Impairment, 5<sup>th</sup> Edition*.

**Combined Whole Person Impairment:** 21% WPI, *Guides, Fifth Edition, (CVC, p. 604)*.

# The IME Report

## Table format:

Allowed Condition	Table/Figure	Comments	Whole Person Impairment %
<i>Lumbar strain; lumbosacral L5-S1 disc protrusion; L4-5 disc bulge; left L5 radiculopathy</i>	Table 15-3, p. 384	DRE Lumbar Category III	13% WPI
<i>Right rotator cuff tear</i>	T16-3 (p. 439); F16-40 (p. 476); F16-43 (p. 477); F16-46 (p. 479)	Decreased ROM right shoulder	9% WPI
	Combined Values Chart, p. 604	Combined WPI%	<b>21% WPI</b>

# The IME Report

Opinions (WPI%, PSR) are based solely on the allowed medical and musculoskeletal impairments arising from the allowed conditions in the claim. **Do not consider pre-existing or general health conditions outside the work claim.**

# The IME Report

**Provide opinions to the three questions.**

Support opinions with exam detail and rationale.  
Opinions are based on the best judgment, experience  
and expertise of the examiner.

# The IME Report

**Provide opinions to the three questions:**

Do not opine upon disability

Do not opine upon future treatment

Do not opine upon future impairment

# The IME Report

## Provide a Physical Strength Rating.

Consider impairments **only** from allowed conditions.

Can the injured worker return to **any** work activity?

Do not opine upon Return-To-Work (RTW) activity of the injured worker's previous job.

# The IME Report

Good History and exam detail: a **Valid Report** ✓

Thorough discussion of rationale: a **Credible Report** ✓

%WPI, PSR opinions based on exam and rationale:  
(for Hearing Officers) a **Decidable Report** ✓

# The IME Report

Educational courses in the use of the *Guides to the Evaluation of Permanent Impairment (5<sup>th</sup> Edition)* are highly recommended to become familiar with the tables, figures, and methodology of impairment assessment and calculation.



# IME Report Review

Complete your report within 10 business days following examination of the injured worker.

Upload the report to Industrial Commission of Ohio Network (ICON).

# IME Report Review

The initial IME report is considered a **draft** until it is **published** by OIC Medical Services. The IME report is reviewed for errors, consistency, calculations, and complete answers to the three questions and the PSR.

# IME Report Review

During report review, OIC Medical Services staff may contact you to correct items (omissions, typographic errors, date corrections, clarification of calculations, consistency, etc.) and ask you to make modifications.

# IME Report Review

Remember that the medical/musculoskeletal IME report is a complex **medicolegal** document. Some words have incompatible medical and legal meanings – please avoid using these words in reports.

# IME Report Review

resolved (medical): return to baseline function

resolved (legal): allowed condition no longer exists

**Avoid the use of “resolved” in IME reports.**

# IME Report Review

Once report errors are corrected, the IME report is published and forwarded to the OIC Hearing Officer and to legal representatives for the PTD Hearing.

# IME Report Review

After the PTD hearing, additional information and questions regarding the IME report may be requested to elaborate upon the examination, rationale, or opinions concerning impairment/work limitations.

# IME Report Review

Additional IME information requests include:

Addendums (occasional)

Interrogatories (rare)

Depositions (rare)



# IME Report Review

Provide **your** opinion.

Do not judge or contest allowances, the injured worker, employers, providers, attorneys or other institutions involved with the claim.

# OIC Medical Services

The fee schedule is tiered and based on the type of examination, and the number of anatomical regions and/or organ systems (which may encompass allowed conditions from multiple work claims).

# OIC Medical Services

Following application to the OIC panel, a new examiner has provisional status. After **one year**, if the OIC has need for the specialist's service, then the examiner will be advanced to active status.

# OIC Medical Services

The OIC examiner will be required to apply for reappointment every five years. Eight hours of Continuing Medical Education (CME) pertinent to specialty and impairment evaluation are required to remain active on the OIC examiner panel.

# OIC Medical Services

Use ICON as an online resource to access:

Specialist Examiner Training  
Medical Examination Manual  
Report Submission  
*MediScenes*

# OIC Medical Services

Refer to the OIC newsletter, *MediScenes*, for updates, *Guides 5<sup>th</sup> Edition* advice and CME Case Presentations.

Contact OIC Medical Services if you have questions, need more information, or need guidance on an IME.