

2022 IME Rulemaking

- 1. Reasons you can get an IME: Claim allowance, reopening, new medical issue, an appeal, case progress, PPD, or work restrictions (RCW 51.36.070).
 - a. Claim allowance: Not defined in new rules, but subject to time/timing requirements of WAC 296-23-309 (see #2, below).
 - b. Reopening: Not defined in new rules, but subject to time/timing requirements of WAC 296-23-309 (see #2, below).
 - c. <u>New medical issue</u>: A medical issue not covered by a previous Department/SIE-requested medical examination, e.g., medical causation, treatment, work restrictions, or PPD (RCW 51.08.121).
 - d. Appeal: After an appeal, LNI can resume jurisdiction and order an IME, or a SIE can schedule an IME regarding an appeal, if LNI approves (WAC 296-23-401).
 - e. <u>Case progress</u>: An IME for *an accepted condition* because there is no proper/necessary treatment plan, or the treatment plan is stalled or completed without objective/clinically meaningful improvement (<u>WAC 296-23-302</u>). The AP can request a case progress IME; but, if the AP does not request the IME, you must:
 - i. *Time*: Schedule the case progress IME least 120 days after the later of: (1) receipt of the claim, or (2) receipt of the last case progress IME report and additional treatment, if requested, has been authorized (WAC 296-23-308); and
 - ii. Substance: Ask the AP to explain the treatment plan per the case progress definition (<u>WAC 296-23-302</u>) or "a referral" to a consultation with the relevant specialist(s) within 15 business days. You can schedule the case progress IME if the AP/consultant: (1) does not reply in 15 business days or the consult could not be done in 90 days; (2) omitted requested info; (3) did not have treatment recommendations; (4) recommended treatment that was not proper/necessary or did not meet LNI medical treatment guidelines; or (5) wrote a report that does not comply with <u>WAC 296-20-06101</u> (<u>WAC 296-23-308</u>).
 - f. PPD: Not defined in new rules, but subject to time/timing requirements of WAC 296-23-309 (see #2, below).
 - g. Work restrictions: Not defined in new rules, and not mentioned in time/timing requirements of WAC 296-23-309.

2. Numerical limits on IMEs (WAC 296-23-309):

IME type	Number	Per specialty?	Can LNI authorize another?	Other exception or rule?
(1) Claim allowance	1	No	Yes	IME must be before claim allow/deny order.
(2) PPD rating	1	Yes	No	Limit applies unless prior the "prior rating examination" found rating premature and/or treatment needed and authorized.
(3) Reopening	1	Yes	Yes	IME is before final allow/deny reopening order. Can get another PPD IME after reopening.
(4) New medical issue	1	No	Yes	IME is after issue contended & before final accept/deny order "of the condition."
(5) Case progress/appeals	No numerical limits here; this rule refers to WAC 296-23-401 and WAC 296-23-308 (summarized in #1, above).			

3. IME notice letter requirements:

- a. Mail at least 28 days before IME, unless the IME is for claim allowance (which require 14 days' notice), or worker waives. No notice letter can be sent more than 60 days before the IME (<u>WAC 296-15-440</u>; <u>WAC 296-14-410</u>).
- b. Sent from the employer, to the worker and the worker's representative (WAC 296-15-440; Policy 13.05).
- c. Scheduled in a "reasonably convenient" location. (Policy 13.05; RCW 51.36.070; RCL tool). If there is no provider in the RCL, options here: RCW 296-23-358.
- d. Use LNI form <u>F207-238-000</u> (or substantially similar per <u>WAC 296-15-001</u>), which includes the IME reason, recording rules, and dispute rights (<u>WAC 296-15-440</u>).

4. IME disputes:

- a. If you receive one, send the dispute to LNI within 5 working days of receipt (WAC 296-15-440).
- b. LNI can only tell you to postpone the IME if it receives the dispute at least 15 calendar days before the IME (WAC 296-15-440).
- c. LNI considers the IME notice and dispute reasons, but consider sending LNI further explanation upon receipt of a dispute (WAC 296-15-440).
- d. If LNI determines the IME violates RCW 51.36.070, the report "may not be considered in the administration of the claim" (WAC 296-15-440).