Back Talk

Paper Review and Independent Medical Evaluation
(Part Three B - The Review Process)

In this last segment of this series of articles, I will address the independent medical examination (IME). There are a number of common reasons that an insurance company will request an IME: 1) Continuing treatment with no apparent end in sight. 2) Low impact accident with minimal auto damage and apparent out-of-proportion medical bills, especially with pre-existing treatment. 3) multiple accidents with questionable liability for each party involved. By far, the most common reason for chiropractic IME is for the first two reasons stated. If a patient you are treating falls in to either of these categories, you can possibly avoid an IME by doing one of several things.

First is to send your patient to a medical doctor early on in order to obtain a second opinion. This is especially recommended when you anticipate that the case will have extenuating circumstances or may require extended care. Once again, if you do this, be sure to let the MD know the reason for the referral. If it is only for a second opinion, state that. If it is to obtain an opinion and also to seek the doctor’s care, state that.

Additionally, if the care is extending beyond what appears reasonable, but you are close to releasing that patient, my suggestion is that you contact the insurance adjustor and speak with him/her. If you explain that the patient is close to being discharged and give an anticipated discharge date, my experience has been that the adjustor is grateful for your call and will allow you to finish care. Once you finish care, you can call the adjustor to say that the patient has been released. Open communication will go a long ways toward prevention of a paper review or IME.

With IMEs, I have found great variation in opinions through my experiences. On one end of the spectrum, the IME doctor stated that the injuries sustained healed in 4-6 weeks with or without intervention of care. On the other end, the IME doctor stated that care to date was reasonable and associated with the accident and additional care was warranted and gave a certain amount of visits and time. By far, the most common conclusion is care was authorized only up until the IME examination. At the time of the IME, the doctor states that the patient is medically stationary. Whatever the conclusions are, those are what the insurance company accepts and pays. The insurance company does state that if the treating doctor does not agree with the findings, the doctor may send in additional information, which will then be considered. I have done this on several instances, but have not been successful in changing the decisions.

In closing, paper reviews and IMEs can be minimized, but cannot be avoided. Sometimes these reviews are dependent upon extended treatment...
that may not be reasonable and with no apparent end in sight. You can go a long way toward avoiding a denial by making sure that you are following recommended chiropractic guidelines. Additionally, if the patient is not progressing under your care, do not continue treatments hoping for a different result. Change your course of treatment. Also consider contacting the insurance adjustor handling that claim in order to share your thoughts and plan. Make sure that before you call, you have a definite discharge date in mind so that information can be shared.

In contrast, sometimes these requests for independent review are based solely upon the patient’s circumstances, i.e. pre-existing conditions and treatment, low impact injury, questions regarding responsibility, etc., and there is little that you can do to prevent them. If the reviews are based upon the patient’s circumstances, you can be prepared by having “your ducks in line.” Once again, preparation starts on day one with the history and examination. Laying the groundwork with regular examinations showing consistent improvement, utilizing pain and disability questionnaires, noting any complicating factors, following recommended treatment guidelines, explaining treatment protocol, and referring the patient out for a second opinion when necessary will go a long ways toward justifying your care.

Have a blessed day!

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