

Adjudicative Advice

Escalation Protocol for Obtaining Outstanding Medical Information

Purpose

Timely decision-making is a fundamental component of the WSIB's commitment to providing excellent customer service. To achieve this, decision-makers are responsible for gathering relevant information, in particular, medical information that is required to adjudicate a claim. At times, however, it can be quite difficult to obtain the necessary medical information from treating physicians.

The Fair Practices Commission has identified the need for a consistent follow-up approach and protocol for the WSIB to use in obtaining medical information.

This document sets out an escalation protocol for obtaining delayed medical information.

Escalation Protocol

DAY ONE

- The Claims Adjudicator (CA) reviews the available information and decides whether additional information is needed to make a decision (see **Best Approaches: Weighing of Medical Evidence**).
- If additional information is required, the CA or Nurse Case Manager (NCM) telephones, writes or Right-Faxes the treating physician and requests the information. The CA or NCM offers to pay the treating physician for a telephone consultation using service code M100.

WEEK TWO

- The CA or NCM makes a follow-up telephone call to the treating physician to confirm that the original request was received.
- The CA or NCM sets a date by which the information is to be sent (generally within 14 days).
- The CA advises the worker by phone or in writing of actions taken to obtain the information.

WEEK THREE to WEEK FOUR

If the information is not sent and it is the only item the adjudicator is waiting on before a decision can be made, the CA discusses with the Manager to determine if a decision can be made without the outstanding medical information. If the outstanding medical information is still required, the manager or adjudicator escalates the matter to the WSIB Medical Consultant (MC), on a priority basis.

- The Medical Consultant (MC) will:
 - Call the treating physician and follow up the request in writing. The MC identifies a specific date for receipt of the information.
 - Advise the CA or NCM if the necessary medical information may be available from other sources including an independent medical assessment (IME), a specialty clinic assessment or a Regional Evaluation Centre (REC) assessment.

Notice: This document is intended to assist WSIB decision-makers in reaching consistent decisions in similar fact situations and to supplement applicable WSIB policies and guidelines as set out in the Operational Policy Manual (OPM). This document is **not a policy** and in the event of a conflict between this document and an OPM policy or guideline, the decision-maker will rely on the latter.

- The CA or NCM will:
 - Request the alternate source/s of information.
 - Advise the worker in writing about the status of the enquiry

WEEK FIVE

- If the required medical information is still outstanding from the treating physician, the CA refers the issue to the Manager to request that the Associate Medical Director (AMD) contact the physician one more time by phone with a follow up by registered letter. A copy of the letter is indexed to the file
- The AMD documents the treating physician's lack of response to file.
- The CA writes to the worker about the status of the enquiry

WEEK SEVEN

- If the required medical information is still outstanding, the AMD advises the Clinical Services Director of the required information.
- The Director may send another registered letter to the physician and copy the Ontario College of Physicians & Surgeons.
- The CA writes to the worker about the status of the enquiry.

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