



Practical Guidance to Improve Your Bottom Line Through IMEs

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Learning Objectives

- › Identify factors to look for in determining how IMEs will ensure effectiveness to aid in further handling of a claim
- › Explore how to assess a vendor's quality oversight program
- › Discover what technology is available to assess and analyze IME programs



What is an IME?

An impartial evaluation based on medical evidence. It is performed by an actively practicing physician who is an expert in a relevant field or specialty, but who is not involved in monitoring the claimant's health or treatment.



Who Requests an IME?

Usually referred by a third party, such as an adjuster or case manager or claims manager for a third-party administrator, state agency or insurance company.



Why Request an IME?

IMEs are often used to help determine the next step in the claim process regarding medical management, functional ability or return to work (RTW). Requests are typically made when:

- › There's divergent info between attending physicians (AP) and other sources
- › The AP has trouble determining claimant's status
- › There's concern about AP's objectivity in the claim



Why Request an IME?

Other reasons an IME might be requested include:

- › Questions about effectiveness of treatment
- › Premature conclusion about claimant's ability to return to occupation or any occupation
- › Questions of claimant's ability to enter rehab/vocational process
- › Claimant's treatment continues unchanged with no improvement
- › Reevaluation required to more clearly define functional capacity
- › Claimant has complicated/multiple diagnoses



Why Request an IME?

Areas where an IME can provide useful information:

- › Confirming diagnosis
- › Evaluating effectiveness of treatment or suggesting potential alternate treatments
- › Attaining a true level of functional ability
- › Establishing or confirming prognosis
- › Determining ability to return to work in any occupation or own occupation



Polling Question

True or False

IMEs are often used to help determine the next step in the claim process regarding medical management, functional ability or return to work (RTW).



General Misconceptions

Typical myths regarding IMEs and their effectiveness:

- › IME does not involve highly interpersonal relationships between the injured employee, employer and treating physician
- › IME examiners often lack occupational health medicine background to offer reliable recommendations
- › IME examiners are detached from the claims process which limits their ability to provide an effective review



The Truth About IMEs

Quality IME programs integrate systems allowing reviewers to have pertinent information to ensure evidence-based opinions. These include:

- › History of case including clinical history, applied guidelines, and determination of functional ability
- › Diagnostic test results, job descriptions and claimant statements
- › IME providers who are specialized in treating diagnoses being addressed within the confines of the IMEs



What Makes a Good IME Physician?

Some things to look for when determining the quality of your IME's physician network:

- › Board certification in specialty, with an active clinical practice
- › Experience in a like specialty to the injury, including providing and prescribing for the diagnosis being addressed
- › In good standing with a clear and active medical license



What Happens During An IME?

IME physicians perform exam to assess examinee's health, injury or impairment. They have a dual obligation to the patient and the third party. Different components of the IME process:

- › What physician looks for?
- › What is performed?
- › What happens next?

What Physician Looks For

IME physicians are typically charged with assessing the following issues when performing the exam:

- › Medical records typically supplied by the insurance carrier and/or employer
- › Letter from referral source which provides diagnosis, brief synopsis and questions to address relative to claim



What is Performed?

Typical requirements of an IME exam:

- A comprehensive clinical examination focusing on the diagnosis presented by the referral source
- From time to time, the IME physician may recommend additional diagnostic testing to aid in rendering their opinion



What Happens Next?

Delivering the report

- Once medical records reviewed and exam performed, IME physician will provide a report of findings along with evidence-based medical opinion





Polling Question

Which physician quality would you not want in your network?

1. Suspended license
2. Board certification
3. Experience in a specialty



What's in the Report?

IME report includes review of medical records, history as presented by the claimant, physical exam findings and addresses all questions posed by referral source.

- › May include completed forms requested by referral source for functional abilities
- › If using a vendor to coordinate IME, average turnaround time for receipt of report to vendor is 10 days
- › Once report is received, a good vendor will provide a thorough QA process before delivering the final

Quality Assurance: The Seven Cs

- › **Correct:** spelling, claim information, dates, names, AMA edition used, jurisdictional language
- › **Consistent:** non-contradictory opinions, left vs. right clearly noted, report body consistent with summary
- › **Clear:** understandable medical opinions, easy readability, punctuation and grammar
- › **Complete:** all questions answered, all testing reviewed, all report sections included
- › **Corroborated:** supported by objective medical evidence, free from overly subjective opinions
- › **Conciliatory:** free of inflammatory or insulting comments toward any party
- › **Confined:** remains within scope of claim, limited to medical expertise of specialist



Rigorous Standards

- › Multi-prong quality management program
 - 1st and 2nd level QA conducted on 100% of cases
 - Expanding medical director audits
 - Corporate quality program with oversight
 - URAC compliant
- › Clinical expertise integrated into IME process
- › Data analytics and technology to support quality
- › Corporate compliance committee to discuss regulatory changes, new treatment procedures and rogue physicians
- › Compliance department to address program and quality enhancements

Proprietary “Two Tier” Report Review

1st Review

- Medical discussion
- Review of medical records
- Medical opinion
- Spelling, typos and grammatical errors

2nd Review

- Compliance with relevant state and federal laws
- Compliance with relevant policy language

Report Submission

100% QA on every case



Partnering with Provider

When selecting an IME partner make sure they have these qualities integrated into their programs:

- › Training program for physicians on different lines of coverage
- › Fraud prevention technology such as Idology – a program which verifies and authenticates the provider
- › Review of providers to ensure they are entered into the National Practitioner Data Bank (NPDB) which provides a continuous query



Setting Provider Expectations

Good IMEs will produce results that will best aid the referrer in handling the claim:

- › IME physicians should provide well-written, succinct reports which completely address all questions posed
- › The opinion provided by the IME physician should be supported by objective evidence obtained through the physical examination as well be evidenced based



Integrated Systems

Quality IME programs offer real-time database information which allows customers to track the process more easily

- › Real-time IME results displayed in customizable, easy-to-use online dashboard
- › Views into closed and open IME activity
- › Key metric tiles to capture immediate picture of IME program
- › Filters providing navigation to control results shown
- › Chart by referral activity or by invoicing
- › Prior period comparison to track changes over time
- › Detail tables to investigate individual cases
- › Export functionality for easy-to-share files via Microsoft Excel

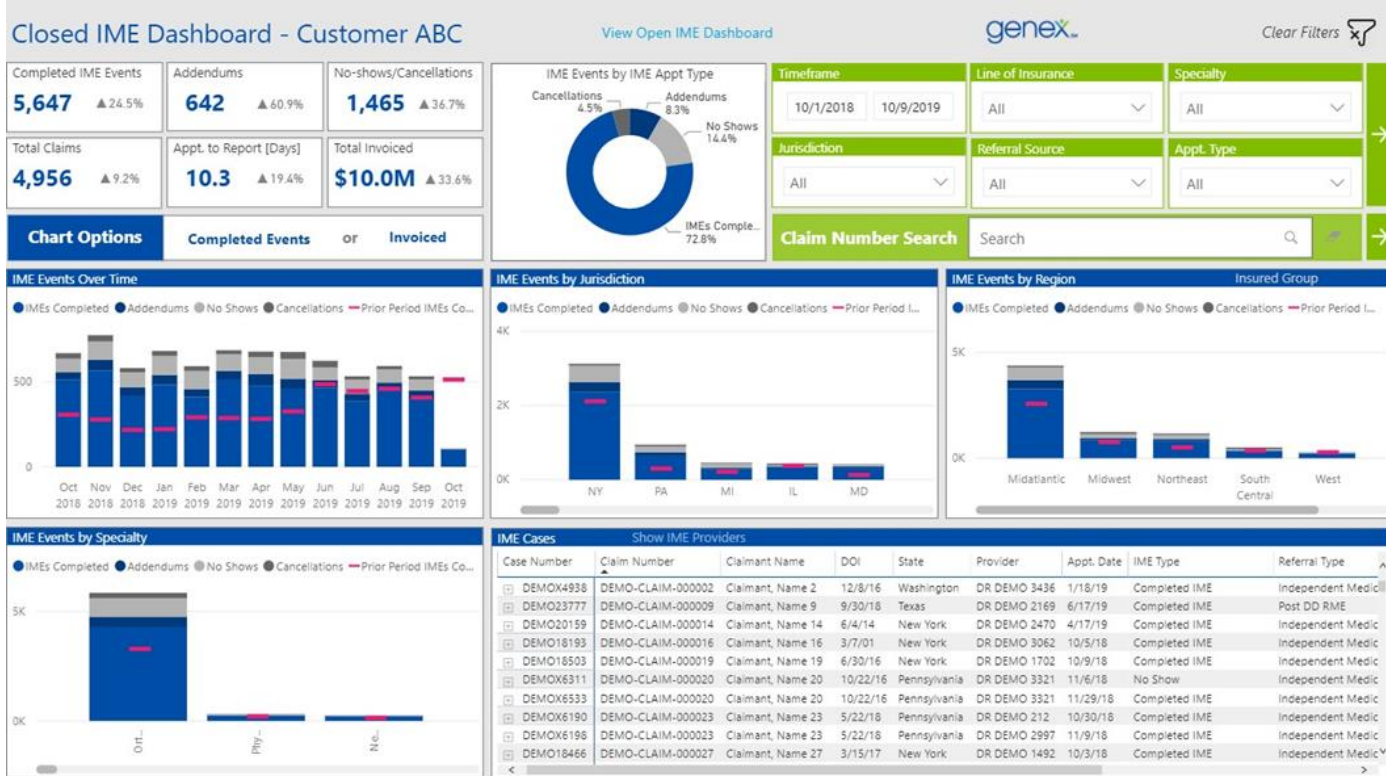


Polling question

› How many “Cs” should you check to ensure quality?

- 1. 6
- 2. 7
- 3. 11

Example IME Closed Dashboard



Example IME Open Dashboard





For more information contact

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