

DIVISION OF WORKERS' COMPENSATION

FACT SHEET E

ANSWERS TO YOUR QUESTIONS ABOUT QUALIFIED MEDICAL EVALUATORS AND AGREED MEDICAL EVALUATORS

Qualified medical evaluators (QMEs) or agreed medical evaluators (AMEs) examine injured workers to determine the benefits they will receive if there is a disagreement over the treating physician's opinions.

Do I need to fill out the claim form (DWC 1) my employer gave me?

Yes. Your employer must give you a [DWC 1 claim form](#) within one day of knowing you were injured. If you do not file the claim form within a year of your injury you may not be able get benefits. Giving the completed form to your employer opens your workers' comp case. It starts the process for finding all benefits you may qualify for under state law. Those benefits include, but are not limited to:

- A presumption that your injury or illness was caused by work if your claim is not accepted or denied within 90 days of giving the completed claim form to your employer
- Up to \$10,000 in treatment under medical treatment guidelines while the claims administrator considers your claim
- An increase in your disability payments if they're late
- A way to resolve any disagreements between you and the claims administrator over whether your injury or illness happened on the job, the medical treatment you receive and whether you will receive permanent disability benefits.

What if my employer didn't give me the DWC 1 claim form?

Ask your employer for the form or call the claims administrator to get it. The claims administrator is the person or entity handling your employer's claims. The name, address and phone number of this person should be posted at your workplace in the same area where other workplace information is posted. You can also get the form from the Division of Workers' Compensation (DWC) Web site at www.dwc.ca.gov. In the left navigation pane, under "I want to," click on "find a form".

I've been to the doctor. Why do I need to see a QME?

You and/or the claims administrator might disagree with what the treating doctor says. There could be other disagreements over medical issues in your claim. A second doctor -- an AME or QME -- has to address those disagreements. You might disagree over:

- Whether or not your injury was caused by your work
- Whether or not you need treatment for your injury
- What type of treatment is appropriate
- Whether or not you need to stay home from work to recover
- A permanent disability rating.

Who makes the decision about going to a QME?

You, your attorney or the claims administrator can request a QME exam. You might request a QME exam if:

1. Your claim is delayed or denied and you need a medical exam to find out if the claim is payable
2. You need to find out if you are permanently disabled in some way or if you'll need future medical treatment
3. You disagree with what your doctor says about your medical condition
4. You disagree with the finding of utilization review (to deny, delay or modify treatment).



Minimizing the impact of work-related injuries and illnesses



Helping resolve disputes over workers' compensation benefits



Monitoring the administration of claims

The DWC Medical Unit will provide whomever makes the request with a list (called a panel) of three QMEs. Each QME panel is randomly generated and the physicians listed are specialists of the type requested. One physician from the list is chosen to examine you and make a report on your condition. Once a QME is chosen for your claim, all medical disputes must go to that QME.

What qualifications do QMEs have?

The DWC Medical Unit certifies QMEs in different medical specialties. A QME must be a physician licensed to practice in California. QMEs can be medical doctors, doctors of osteopathy, chiropractors, psychologists, dentists, optometrists, podiatrists or acupuncturists.

What's the difference between a QME and an AME?

If you have an attorney, your attorney and the claims administrator may agree on a doctor without using the state system for getting a QME. The doctor they agree on is called an AME. If they cannot agree, they must ask for a QME panel list.

How do I request a QME exam?

Complete the "Request for Qualified Medical Evaluator" form and submit it to the DWC Medical Unit. See Information & Assistance (I&A) [guide 2](#) for help with this form.

NOTE: If your employer or claims administrator says there's a problem with your claim and sends you a "Request for Qualified Medical Evaluator" form, you have 10 days to complete the form, select the QME medical specialty and send the form to the DWC Medical Unit. If you do not submit the form within 10 days, the claims administrator will do it and will get to choose the kind of doctor you'll see.

What difference does it make who submits the form to request the QME?

Whoever submits the request form picks the specialty of the doctor for the exam. See I&A [guide 2](#) for more information. When you receive the panel, you will also receive a letter that explains how to set up the QME appointment and how to provide the QME with important information about yourself. Within 10 days of the date on the list, you must pick a QME from the list, make an appointment and tell the claims administrator. If you do not do this, the claims administrator may select the doctor and make the appointment for you.

Is there anything I can do if I disagree with what the QME says?

Yes, but you have a limited amount of time to decide if you agree with the QME's report or if you need more information. When you receive the report, read it right away and decide if you think it is accurate. If not, and you have an attorney, you should talk to him or her about your options.

If you don't have an attorney, first call the claims administrator. If that doesn't help, contact an [I&A](#) officer at your local Workers' Compensation Appeals Board (WCAB) district office. The I&A officer can help you figure out what's best in your case.

If you are in a union, you may be able to see an ombudsperson or mediator under the terms of your collective bargaining agreement or labor-management agreement.

I'm in a medical provider network (MPN). Does this process apply to me?

There are two tracks for resolving a medical dispute if you're in an MPN, depending on the situation. If your MPN doctor requests treatment that you agree with and that treatment is denied under utilization review (UR), you have the right to request an exam by a QME. The claims administrator must advise you of this right. However, if you only disagree with your MPN doctor about your diagnosis or treatment, you do NOT go to a QME – you have other options. You can change to another physician on the MPN list. You can also ask for a 2nd and 3rd opinion from a different MPN doctor. If you still disagree, you can have an independent medical review (IMR) to resolve the dispute. See the information on your MPN provided by your employer.

I still have questions. Who do I contact?

If you have questions about requesting a QME panel, contact the [DWC Medical Unit](#) by phone at 1-800-794-6900 or by writing to: DWC Medical Unit, P O Box 71010, Oakland, CA 94612.

For more information, call 1-800-736-7401 or visit the DWC Web site at www.dwc.ca.gov to find a local [I&A office](#). You may also download I&A [guides](#) and get information on [workshops](#) for injured workers.