

Oregon Workers' Compensation

Key Medical Concepts _____	Topic of Interest
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Attending physician: A physician or authorized nurse practitioner who is primarily responsible for the treatment of a worker's compensable injury. This physician can be a medical doctor, doctor of osteopathy, oral surgeon; or, for 60 days or 18 visits, a chiropractor, naturopathic physician, podiatrist, or physician assistant. There may be exceptions under Managed Care Organizations.

Combined condition: A condition the worker had prior to the injury, which has combined, with the accepted condition to contribute to the overall disability or need for treatment. **For example:** The diabetic worker severely lacerates his foot. Because diabetics have a difficult time healing, the worker's need for treatment is prolonged.

Consequential condition: A condition which occurs as the result of the injury and contributes to the overall disability or need for treatment. **For example:** The worker's accepted condition is a low back strain. Anti-inflammatory medicine prescribed to relieve the back pain causes the worker to have gastritis, which results in a gastrectomy being performed. The gastritis and gastrectomy are consequential conditions.

Curative care: Those medical services required to diagnose, heal or permanently relieve or eliminate a medical condition.

Direct medical sequela: A condition that originates or stems from the compensable condition that can be established medically. Whether it is due to the accepted original condition or the consequential condition, it is rated according to the rules. **For example:** The worker's accepted condition is a low back strain with a herniated disk at L4-5. The worker develops permanent weakness in the leg and foot due to the injury to the nerve root at L4-5 (radiculopathy). The weakness is the direct result of the herniated disk or "direct medical sequela."

Independent medical exams (IMEs): Any worker entitled to benefits under the workers' compensation rules is required, if requested by the director, the insurer or self-insured employer, to submit to a medical examination. Should the worker fail to submit to the examination, or obstructs the same, the worker's rights to compensation can be suspended with the consent of the director until the exam has taken place.

Managed care organizations (MCO): A health care provider or group of medical service providers who contract with an insurer to provide and manage the medical services for injured workers. The department in accordance with OAR 436-015 certifies organizations. Insurers are not mandated to use MCOs.

Medically stationary:

No further material improvement can reasonably be expected from medical treatment or the passage of time.

Palliative care: Medical services required to reduce or temporarily moderate the intensity of an otherwise stable condition, but does not include those medical services needed to diagnose, heal, or permanently alleviate a medical condition. ORS 656.005(20). Those medical services compensable after a worker is medically stationary include services to workers who are permanently and totally disabled; prescription medications, services to administer or monitor prescription medications; prosthetic devices and services necessary to monitor, replace or repair those devices; services provided to an accepted claim for aggravation or orders issued under a Boards Own Motion, services necessary to diagnose the worker's condition and life-preserving modalities similar to insulin therapy, dialysis and transfusions.

Rights, Responsibilities and Roles:

Attending Physician:

- ◆ Prescribes or provides treatment.
- ◆ May refer to another physician, e.g., for therapy.
- ◆ Authorizes time loss.
- ◆ Describes findings of impairment upon which the insurer rates permanent disability.
- ◆ Determines when the worker has reached medical stationary or maximum medical improvement.

Worker:

- ◆ Can change attending physician two times after initial choice during the life of a claim.
- ◆ Must seek approval for an additional change of physician. (Exceptions in MCO contracts).
- ◆ Must submit to examinations.
- ◆ Must not commit injurious practice.
- ◆ Must cooperate with certain requirements or face suspension of time loss benefits.
- ◆ May receive care after medically stationary without insurer's approval (1) if permanently and totally disabled, (2) if care is needed to monitor medications or prosthetic devices, (3) to maintain a medically stationary condition or (4) services are required for accepted aggravation.
- ◆ If approved, may receive palliative care to help the worker continue in current employment.

Insurer:

- ◆ May obtain up to three independent medical exams in each claim opening without WCD approval.
- ◆ These exams may be used (1) if treatment seems too conservative, (2) for a second opinion regarding surgery (consultations for elective surgery may not count as an IME), (3) at the time of claim closure, etc.

Reference: OAR 436-010-0265

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