

WORKER'S COMPENSATION INSTRUCTIONS HANDOUT

We welcome you to Lowcountry Orthopaedics & Sports Medicine a member of Arcis Healthcare, LLC. Your treatment is being covered by Workers' Compensation and this hand-out is information that you will need during the course of your treatment here. Please keep this handy as you may need to refer to it at times.

Your doctor has been requested by your workers' compensation carrier/adjustor to render medical treatment to you for the injury you sustained at work. We pledge to give you the best medical treatment available. In addition, the South Carolina Workers' Compensation Commission has laid out specific guidelines that we must abide by during the course of your treatment. We will be forwarding all information concerning your medical treatment and your work status to your adjustor, nurse case manager, and insurance carrier and, in some cases, to your employer.

Under the Commission guidelines, there are also specific things that **you** are required to do:

1. **You are required to keep your appointments on the date and at the time scheduled.** You are required to bring a picture ID and any films that were taken of your injury (MRI and/or X-rays). If you are not able to keep your scheduled appointment you must notify your adjustor or nurse case manager and our office. **You should keep a log of all your office appointments, physical therapy and other trips related to your treatment.** You can file for reimbursement for mileage by the workers' compensation carrier.
2. At each of your appointments you will be given a work note. A copy of this will be faxed to the appropriate parties. **It is your responsibility to provide your employer with a copy of the work note after each visit so that he or she can determine if work can be provided to you with any restrictions that you might have.**
3. It is also your responsibility to report to your employer the date and time of your next office visit or any surgical or diagnostic testing that might have been scheduled for you.
4. Your physician will make a **medical determination** as to your physical ability to work and this will be indicated on your work note. We cannot place you in an "out-of-work" status based on the fact that your employer does not offer "light duty". Many companies will make accommodations for employees being treated under workers' comp. **Therefore, we will only make a medical determination as to your work status.** If you feel that your employer is requiring you to work outside of the restrictions that the doctor has placed upon you, you must address that issue with your employer, nurse case manager, and adjustor or, if you have retained one, your attorney. **YOUR DOCTOR WILL NOT GET INVOLVED WITH THIS ISSUE. PLEASE DO NOT CALL OUR OFFICE AND REQUEST THAT YOUR WORK STATUS BE CHANGED.**
5. You must maintain a direct line of communication with your employer and failure to do so may result in the termination of your weekly benefits.
6. In addition, if you have retained an attorney, you must also provide him with your updated work status after each visit. Our office will not fax information directly to your attorney. You are responsible for providing him with a copy of your work note and treatment orders that you may be given at your appointment. If your attorney wants copies of your medical records sent to him he must make that request in writing per our medical records protocol on the website.
7. If you need a refill on any medications, please make the doctor aware of this at the time of your office visit. Our office has a very strict policy with regards to telephone requests for prescription refills. Some medications cannot be called in to a pharmacy; therefore a written prescription is required. If someone other than you comes to the office to pick up a written prescription, that person must show a picture ID and sign a form stating that the prescription has been picked up.
8. If you have disability income insurance or disability policies on any loans that you have, these forms should be submitted at the insurance check-out window when you schedule your follow-up appointment. **Please do not give these forms directly to the doctor as this will result in a delay in their completion.** There is a \$15.00 fee for each disability form submitted and it takes approximately 5-10 working days for completion of these forms. If your doctor has ordered any diagnostic testing or physical therapy for you, you will be given a written "order". **You must take the order with you when you present for your testing or physical therapy.** Failure to do so may result in cancellation of your testing or physical therapy appointment. This, in turn, may result in termination of your weekly benefits. All surgical procedures and tests must be approved by your workers' comp carrier **before** they can be scheduled. This will take 7-10 working days. **Our office will contact you when we receive approval and we will schedule the procedure with you at that time.**
9. Once your treatment has been completed, you will be placed at MMI (Maximum Medical Improvement). You will be given a disability rating according to the AMA guidelines, permanent restrictions, and future medical care. This information cannot be given over the phone. If a 14 B form is required, your adjuster, nurse case manager, and/or attorney should make a request in writing.
10. It is your responsibility to notify our office of any changes to your work comp claim. You are required to notify our office if your claim has settled or denied. In that case, you must supply our office of any settlement paperwork or denial letters in order to file with your personal insurance.

Thank you for allowing us to participate in your medical care. We will make every effort to ensure that your course of treatment will be thorough and release you as soon as medically possible. Please help us to do that by following your doctor's orders and following the guidelines set forth in this handout. Should you require further assistance please visit our website and contact one of the work comp coordinators.