

The Hidden Worker's Comp. Treatment Guideline Every Wisconsin Chiropractor Should Know !

In doing dispute resolutions for the Department of Workforce Development, I have noticed a disturbing trend over the last year. Worker's compensation insurance companies are denying treatment based on guidelines that are not accepted in Wisconsin.

I would venture to guess, that most chiropractors do not know that the Wisconsin Department of Workforce Development has its own set of guidelines for chiropractic treatment. You can get a copy of these guidelines at:
<http://dwd.wisconsin.gov/wc/medical/DWD81.pdf>.

The first thing I would suggest to anyone who treats work comp. patients, is to download the guidelines and become familiar with the sections pertaining to chiropractic. Make sure you understand the sections on frequency and duration. You should also understand the restrictions on modalities. If you design your treatment plans with the guidelines in mind, you should save yourself a lot of hassle.

You may be able to exceed the limitations of the guidelines, provided the treatment meets the criteria set up under section 81.04. I would suggest that you make sure your documentation as to why you have exceeded the guidelines, is impeccable. A hand-written scribble of "TnT fibers" in your SOAP notes won't do it ! You will need to have functional assessment tools like the Neck Pain Disability index, Oswestry and possibly the Rand SF-36. Your history and re-exams will need to give a clear picture of what is going on.

A common guideline used by out of state IME doctors is the ODG guidelines. These guidelines have not been accepted in Wisconsin. If you have a work comp. claim that is being denied based on these guidelines, call the adjuster and request that a record review be done by a doctor who is familiar with the DWD treatment guidelines. Also send them a written request outlining how your treatment has complied with the guidelines. Don't be surprised if the adjuster doesn't know anything about these guidelines. Many don't.

If they say no to your request, get a dispute resolution through the DWD. Include a copy of your written request for review, in your records. This will tell the DWD dispute unit, what your dispute is about. Send a copy of your whole file, don't expect the insurance company to send the copies of your records to the DWD. They won't do it.

If your records are lousy and you have exceeded the treatment guidelines, don't bother. You won't win. You are better off chalking it up to a tough lesson learned. Improve your records and follow the guidelines. If you exceed the guidelines, realize that it will be questioned and make sure you have the reasoning in the notes.

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