



DIVISION OF WORKERS' COMPENSATION



DIME

Division Independent Medical Examination

The Division Independent Medical Examination (DIME) program provides an independent evaluation of medical issues relating to Maximum Medical Improvement (MMI) and impairment in workers' compensation cases. If a party disagrees with an authorized treating physician's impairment rating and/or the date of MMI you have the right to request a DIME.

CONTACT

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To view the complete Rule 11 please visit:
colorado.gov/pacific/cdle/division-independent-medical-exam-dime



COLORADO

Department of
Labor and Employment

Division of Workers' Compensation

STARTING THE DIME PROCESS

- A claimant seeking a DIME must file the Notice and Proposal and Application for a DIME within 30 days of the Final Admission. A carrier seeking a DIME must file a Final Admission or a Notice and Proposal and Application for a DIME within 30 days of the claimant being placed at MMI.
- Within 15 days of filing the Notice and Proposal and Application for a DIME a claimant who does not believe they are able to pay for the DIME must file an Application for Indigent Determination at the Office of Administrative Courts (OAC).
 - The DIME process will not be held in abeyance while the indigent application is pending, unless ordered by an Administrative Law Judge (ALJ).
 - The determination of indigence is based on the claimant's financial status on the date the application is filed and any extraordinary circumstances.
 - If claimant is determined indigent, the costs of the DIME advance shall be reimbursed/offset against permanent indemnity benefits following a final order or approved settlement.
 - Within 14 days of an indigent order or final DIME Physician Confirmation (whichever is later) the paying party must pay the fee to the DIME physician.

PHYSICIAN SELECTION

- Within 30 days from the filing of the Notice and Proposal and Application the requesting party and carrier must negotiate the selection of a physician.
 - If the parties cannot agree on a physician the carrier must file the Notice of DIME Negotiation form.
 - If the parties agree on the DIME physician and the fees with the DIME physician either party may file.
 - There will be no additional fees for medical record review or return visits for range of motion testing.
- Within 5 days of receiving the Notice of DIME Negotiation form the Division will confirm the agreed upon physician and fee or send a panel of three physicians to the parties in writing.
- Within 5 days of receiving the three physician list either party may request a summary disclosure of any physicians on the panel.
- If neither party requests summary disclosure information, the requesting party has 5 business days from the issuance of the three physician panel to strike one physician and notify the opposing party and the DIME Unit.
- Within 5 business days from the notice of the requesting party's strike the opposing party may strike another physician and notify the requesting party and the DIME Unit.
- DIME physicians are permitted to communicate with certain parties in specific situations, including communications in furtherance of negotiations of selecting a physician and fees. All copies of communications must be provided to the DIME Unit.

MEDICAL RECORDS

- Within 14 days of the Division confirming the selected DIME physician the carrier must submit one complete copy of medical records to the claimant.
- Within 10 days of receiving the initial carrier records packet the claimant must serve the carrier with any additional relevant medical records.
- The parties may agree to limit the issues to be addressed in the DIME.
 - The parties must include and sign the Notice of Agreement to Limit the Scope of the DIME form in the medical records packet served on the DIME physician immediately following the chronological index.
 - The DIME Unit must be provided a copy of the agreement.
- At least 14 days prior to the examination the carrier must provide a singular final packet to the DIME physician.
- At least 14 days prior to the examination a claimant seeking an interpreter must notify the carrier of the need for an interpreter.
 - The carrier is responsible for paying and arranging for the services of the interpreter.
- Any submission of supplemental records requires an ALJ finding of good cause.
 - No later than 7 days prior to the DIME examination supplemental records must be served by any party concurrently to the DIME physician and all other parties.

THE CONTENT OF MEDICAL RECORDS

WHAT SHOULD BE INCLUDED IN THE MEDICAL RECORDS PACKET?

INCLUDE

Records regarding:

Diagnosis, treatment, and evaluation of the claimant's work related injury(ies)
Any relevant pre-existing condition(s), injury(ies), or disease(s), if applicable and available

Dated cover sheet listing the claimant's name, WC number, and time and date of appointment.

Chronological index of records with the date and the provider corresponding to each record, tabbed by year beginning with the earliest record.

EXCLUDE

Surveillance recordings

Depositions

Vocational rehabilitation reports

Non-treating case manager records

Prior orders and other duplicate records

Any party seeking to overcome these requirements must have the agreement of all parties or an order by an ALJ.

RESCHEDULING & TERMINATION

- A DIME can only be rescheduled once.
 - More than once requires a good cause finding by an ALJ.
- The DIME examination may only be rescheduled or terminated by the requesting party or by order.
- The parties and the DIME physician may use the Notice of Reschedule or Termination form to notify the DIME Unit of any rescheduling, termination, or failure to attend the examination.
- If a party reschedules, they must pay any applicable fee to the DIME physician within 10 days of initiating the rescheduling.
- The physician must receive the reschedule fee before the requesting party may reschedule the appointment.

DIME FOLLOW-UP

- A follow-up DIME begins if a DIME physician determines that a claimant has not reached MMI and recommends additional treatment.
- The carrier must file the Follow-up DIME form after the claimant completes all additional recommended treatment.
- The original DIME physician performs the Follow-up DIME, unless the physician is unavailable or declines.
- If the original DIME physician is unavailable or declines a revised DIME Physician Panel can be requested or the parties can agree to a new DIME Physician and follow up fee.
- The carrier is responsible for paying the follow-up examination fees, absent an agreement by the parties and the DIME physician or an order by an ALJ
- The carrier must notify all parties involved in writing of the date and time of the follow-up DIME.

SUBSEQUENT DIMES

- By filing the application form in a claim where a DIME has been completed previously, the requesting party certifies the claim has been reopened and it will be considered a subsequent DIME.
- This subsequent DIME will be treated as a new DIME and subject to all DIME procedures.
- The party requesting the subsequent DIME will be considered the requesting party regardless of whether that party requested the original DIME.

PAYMENT & SCHEDULING

- Within 14 days of receiving the DIME Physician Confirmation the requesting party must pay the DIME physician and then, only after the physician receives the fee, schedule the DIME with the selected physician.
 - This exam must be scheduled no earlier than 45 days or later than 75 days after the requesting parties receive the DIME Physician Confirmation.
 - An order by an ALJ is required to hold the proceedings in abeyance once an appointment has been scheduled.
 - Failure to make the appointment and advise all parties in writing within 14 days may result in a Director's order to show cause why the DIME process should not be terminated.
- Within 20 days of the examination the DIME physician must submit the original report with all attachments to the DIME Unit and all parties.

DIME EXAMINATION FEES

BASED ON DATE OF INJURY TO THE FILING OF THE DIME APPLICATION
AND NUMBER OF BODY REGIONS

Two years or less
and/or
less than three body regions

Two to five years
and/or
three or four body regions

Over five years
and/or
five or more body regions

▼
\$1,000

▼
\$1,400

▼
\$2,000

DIME TIMELINES

Initiating Event		Document or Action to Be Completed		Days to Complete	Responsible Party	Action
Final Admission or MMI report issued	leads to	Notice and Proposal and Application for a DIME	within	30 days	Claimant or carrier	The party requesting the DIME must complete the Notice and Proposal for Independent Medical Examination and Application for a DIME within 30 days of the Final Admission (FA). Within 30 days of receiving an MMI report from an ATP the carrier must file the Notice and Proposal and application.
Notice and Proposal and Application filed	leads to	Application for Indigent Determination	within	15 days	Claimant	Within 15 days of filing the Notice and Proposal and Application for a DIME a claimant seeking to claim indigence must file an Application for Indigent Determination at the OAC.
Notice and Proposal and Application filed	leads to	DIME Negotiation Form	within	30 days	Claimant or carrier	The parties must attempt to negotiate the selection of a physician to conduct the DIME. The parties have 30 days of the filing Notice and Proposal for Independent Medical Examination and Application for a DIME to negotiate. If the parties have not agreed on the DIME physician and fee, the insurer shall file the Notice of Negotiation form. If the parties have agreed on the DIME Physician and fees, either party may file the form.
<i>If the parties do not agree on a DIME physician and fee, these are the next four steps in the process</i>						
Notice of Negotiation Form received (failed negotiation)	leads to	DIME 3-physician panel	within	5 days	DOWC	If the parties fail to agree on the DIME physician and fee the DOWC will issue a randomized 3-physician panel for the parties to review.
DIME 3-physician panel received	leads to	Summary Disclosure	within	5 business days	Claimant or carrier	Upon receiving the list of 3 physicians, either party may request a summary disclosure of the business, financial, employment or advisory relationships of any of the physicians on the panel.
DIME 3-physician panel issued	leads to	Requesting party strikes one physician	within	5 business days	Requesting party	If neither party requests the summary disclosure information from the doctors on the list, the requesting party has 5 business days of issuance of the 3-physician panel to strike one name from the list and notify the other party.
Requesting party strikes one physician	leads to	Opposing party strikes one physician	within	5 business days	Opposing party	The opposing party then has 5 business days to strike another name and notify the DIME unit and the requesting party of the remaining name.
The parties agreed on the DIME physician and fee, or the opposing party notifies the requesting party and DIME Unit of strike (The later of) The Indigent Order or DIME Physician Confirmation	leads to	DIME Physician Confirmation	within	5 business days	DOWC	The Division sends the DIME Physician confirmation.
DIME Physician Confirmation received	leads to	Pay for and schedule DIME appointment	within	14 days	Claimant or carrier	Within 14 days of a DIME Physician Confirmation or an indigent order (whichever is later) the paying party must pay the fee to the DIME physician.
DIME Physician Confirmation received	leads to	Pay for and schedule DIME appointment	within	14 days	Requesting party	The requesting party must schedule the DIME with the selected physician within 14 days of receiving the DIME Physician Confirmation. Payment must be received by the physician prior to scheduling.
DIME Physician Confirmation received	leads to	DIME appointment set	to take place within	45-75 days	Requesting party	The examination shall be scheduled no earlier than 45 days or later than 75 days after the requesting party receives the DIME Physician Confirmation.
DIME Physician Confirmation	leads to	Carrier submits a complete copy of medical records to the claimant	within	14 days	Carrier	The carrier must submit a complete copy of the medical records to the claimant within 14 days from the date the Division confirms the selected DIME Physician.
Carrier submits a complete copy of medical records to the claimant	leads to	The claimant provides the carrier with any additional relevant medical records	within	10 days	Claimant	The claimant shall serve the carrier with any additional relevant medical records no later than 10 days after receiving the initial packet.
The claimant provides the carrier with any additional relevant medical records	leads to	Carrier provides the DIME physician with a singular final packet	prior to	14 days before the DIME exam	Carrier	The carrier shall serve the DIME Physician with the final packet no later than 14 days prior to the scheduled examination.
DIME appointment scheduled	leads to	Claimant notifies carrier of the need for an interpreter	prior to	14 days before the DIME exam	Claimant	The claimant shall notify the insurer of the necessity for a language interpreter no later than 14 days before the examination.
Claimant notifies carrier of the need for an interpreter	leads to	Carrier pays and arranges for the interpreter	prior to	DIME exam	Carrier	The insurer shall be responsible for arranging and paying for the language interpreter services.
Claimant attends DIME appointment	leads to	DIME doctor submits report	within	20 days	DIME Doctor	Within 20 days of the examination the DIME physician must submit the original report with all attachments to the DIME Unit and all parties.