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DENIAL OR LIMITS ON MEDICAL CARE DONE 87.3% BY GHOST DOCTORS

BY: SCOTT A. O'MARA

The State of California Department of Industrial Relations (DIR) issued a report on 04/08/2025.

The report studies the workers' compensation format that evaluates requests for medical care by the treating doctor for the California injured worker.

The process is where the treating physician who knows the patient and has treated the patient issues a required Request for Authorization (RFA). The RFA is sent to the adjuster of the workers' compensation case and in the vast majority of situations the adjuster is mandated to send the treating doctor's RFA to an outside vendor. The outside vendor is called Utilization Review (UR). These doctors never see the patient and based upon their review and alleged understanding of the request by the treating doctor, they will grant, deny or limit the medical care that is sought.

When the denial or change of the request by the treating doctor who knows the patient is made, the treating patient has very limited options. The options that are set forth by the California Labor Code are that the worker will request that the denial by the non-seeing doctor is appealed (to another non-seen doctor).

This appeal is a meaningless appeal because it then goes to another group of doctors called Independent Medical Review (IMR). The IMR doctor never sees the patient, nor is anyone allowed to know who the IMR doctors are. If the IMR doctor makes a determination that either limits or denies the medical care, in essence the worker has no right to have a meaningful appeal.

In the past if there was a denial of medical care by the adjuster, or any vendor that the adjuster or insurance company would use or the employer, the worker had the right to go in front of a Judge and present evidence of what the treating doctor who knows the patient, and has seen the patient, states. In addition to that, there was the testimony from the Applicant; this has been removed and has been removed through the UR/IMR process.

The new study of 04/08/2025 by the Department of Industrial Relations reviewed the denial and limits on medical care by the IMR Company. In the report they are reviewing the work of the

IMR Company which is called Maximus Federal Service Incorporated. In the review of Maximus' work of 2024 it was found that 141,621 decisions were reviewed by this outside company Maximus Federal Service Incorporated. Again, the outside company Maximus Federal Service Incorporated is the company that does the Independent Medical Review. Is there any independence about their medical review?

The recent 2024 study has determined that this outside corporation Maximus who employs doctors that do not see the patient, nor their names released, has made reviews of the request by the treating doctor of 87.3% of treatment that has been requested by the real doctors, (not by the ghost doctors that do not see the patient such as the UR or IMR doctors).

This continuation failure of the system has shifted the burden away from the responsibility of workers' compensation to cure or relieve the effects of the injury to either the worker using their own health plan or the worker incurring the cost.

The concept that this is an objective system and one that is designed to expedite access of medical care is incorrect. The system of UR/IMR has been designed in such a way to encourage workers to give up their entitlement to lifetime medical care, or medical care for work-related injuries.

There are no checks and balances that are available. The attorney cannot take the deposition of the UR or IMR doctor. In addition, the UR/IMR doctors do not have a realm of accountability. The UR/IMR doctors have a cloud of protection that encourages them to catch and release, they are not subject to medical malpractice review.

The study that was completed in 2024 of the UR/IMR process is consistent with other studies that show a very high level of denial, and no accountability.

The California Workers' Compensation Institute had its 61st annual meeting at the end of March 2025. At the 61st annual meeting, which was held in Sacramento, the Chief Operating Officer, Gideon Baum, anticipates that the legislative session in 2025 is going to look a lot like the session of 2024.

There were some changes made in 2024 that were needed. What this requires is that the various groups that represent California workers' be in a position to pass to various legislators the much needed changes that are required to make the workers' compensation system functional.

The dysfunctions that have occurred, and continue to occur, have been in existence since legislation of Senate Bill 899 on 04/19/2004, and Senate Bill 863 signed on 09/20/2012.

The opportunity to create a usable system again is coming forward to the legislative bodies to mandate that the process of UR and IMR be subject to judicial review, and elements of possible penalties. Also, UR/IMR doctors must be subject to the basic concept of medical malpractice if they do not meet minimal standards.

An opportunity for creating a better system that is accountable and reliable is now coming forth with a new Governor that will be elected in the future. New State Senators elected in the future,

new Assembly people elected in the future that have the power, and position to establish legislative changes, must be made aware of the failures and reasons for same and changes needed.

Finally, the study of 04/08/2025 that is provided by the Department of Industrial Relations (DIR) shows how these medical companies of IMR and UR contain/control costs at the expenses and violations of the California Constitution which states that medical care for job-related injuries is to cure or relieve the effects of the injury, because there is no right to present evidence to a Judge by deposition of the IMR/QME doctors, and testimony of the injured worker.

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