



ADMINISTRATIVE PRACTICES MANUAL

SUBJECT: WORKER'S COMPENSATION
Coverage of Medical Expenses

Policy Statement

Through a contract with a Third Party Administrator (TPA), Dane County complies with its legal requirements to pay doctor bills, hospital bills, medicines, medical and surgical supplies, crutches, artificial limbs and traveling expenses incurred for (a) examinations related to a workplace injury or illness and (b) treatment of a workplace injury or illness.

Billing Process

Employees should ask their providers to send work-related medical bills to Dane County's TPA:

Wisconsin Municipal Mutual Insurance Company
4785 Hayes Road
Madison, WI 53704-7364
Phone: 608-268-3002
Fax: 608-852-86471

Whenever a provider sends a bill directly to an employee, the employee should forward the bill onto the address above. If an employee ever pays a provider for services that should have been covered by worker's compensation, the employee should send both the bill and proof of payment to the address above.

Choice of Provider

- 1) Employees have the right to select the health care provider of their choice for treatment.
 - a) In an emergency situation, an employee can go to any doctor for treatment.
 - b) In a non-emergency situation, an employee may select any physician, psychologist, chiropractor or podiatrist licensed to practice in Wisconsin.
 - c) Employees may receive treatment from health care providers who are not licensed in Wisconsin based on a referral from a practitioner licensed in Wisconsin or after obtaining consent of Risk Management (or its TPA).
 - d) Employees are not required to receive treatment from providers participating in Dane County's employee health plan. However, if worker's compensation coverage is not available, then providers who participate in Dane County's health plan can seek payment from the employee's health plan while providers who do not participate in Dane County's health plan may seek payment from the employee.

- 2) Risk Management (or its TPA) should be notified as soon as possible after an employee selects their health care provider. **Failure to notify Risk Management (or its TPA) of the initial selection in a timely manner can lead to a disputed claim and the possibility of the injured employee having to pay for the entire cost of treatment.**
 - a) If the attending doctor refers the employee to a specialist or a series of specialists, this referral is still considered to be treatment by one doctor.
 - b) If several doctors in one partnership or clinic are seen, these are all considered one doctor.



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- 3) If an employee does not have confidence in his/her first doctor, recovery may be delayed. Therefore, if an employee is not satisfied with the first doctor he or she chooses, the employee is allowed to make a second choice.
 - a) While the employee must notify Risk Management of this second choice, Dane County may not object to it. **Failure to notify Risk Management (or its TPA) of a change in providers in a timely manner can lead to a disputed claim and the possibility of the injured employee having to pay for the entire cost of treatment.**
 - b) After changing doctors once, any further change may be made only by mutual agreement between Risk Management (and/or its TPA) and the employee.

- 4) On written request by Risk Management or its TPA, an employee should submit promptly to a reasonable examination by any doctor (physician, chiropractor, psychologist or podiatrist) named by Risk Management or its TPA. This is called an "Independent Medical Examination" or IME.

END OF NARRATIVE