

**STATE OF NEVADA
DEPARTMENT OF BUSINESS AND INDUSTRY
DIVISION OF INDUSTRIAL RELATIONS**

LCB File No. R167-97

IN THE MATTER OF THE ADOPTION OF
REGULATIONS PERTAINING TO MEDICAL
COMMUNICATIONS

DIR No.: 98-10
LCB File No. R167-97

PROPOSED REGULATIONS

Regarding the adoption of regulations pertaining to the initiation of oral and written communications relating to the medical disposition of an injured employee's claim for compensation and proceedings before the administrator.

AUTHORITY: NRS 616A.400 and Assembly Bill No. 147 of the 1997 Nevada State Legislature.*

Section 1. Chapters 616 A to 617, inclusive of the Nevada Administrative Code (NAC) are amended by adding thereto the provisions as set forth in sections 2 through 6 of this regulation.

Sec. 2. *For the purposes of these regulations, the following definitions shall apply:*

(a) *Compensated representative* means a labor representative, a person working for the Nevada attorney for injured workers or attorney's office or other person who receives money for assisting injured employees. *Compensated representative* does not include a family member or friend who assists the injured employee without pay.

(b) *Log* means a separate written record of any oral communication relating to the medical disposition of a claim of an injured employee with the injured employee's examining or treating physician or chiropractor, employee of the examining or treating physician or chiropractor, or health care provider. The log must be separate from case notes, memos and medical records which are contained in the file of an injured employee. The log must also contain the names of all parties included in the communication and a summary of the discussion.

(c) *Medical disposition* means any discussion with an examining or treating physician or chiropractor, employee of the examining or treating physician or chiropractor, or health care provider, concerning the injured employee's past, current or future medical status, or any request for, or authorization of, medical treatment, evaluation or testing which may be used to determine compensation and/or accident benefits to which an injured employee may be entitled.

(d) *Timely manner* means within five (5) working days after receipt of a written request.

Sec. 3. *The initiator of an oral communication relating to a medical disposition of a claim shall maintain a separate log for each injured employee's claim. If the injured employee has more than one claim, a separate log must be maintained for each claim of the injured employee. The log must be made available upon request and may be kept in the claim file.*

Sec. 4. *A copy of the log shall be made available in a timely manner to the insurer, organization for managed care or third-party administrator of the claim or a representative of any of those parties, or the injured employee or his representative, or the injured employee's employer or his representative, upon receipt of a written request and, if required, a proper authorization.*

Sec. 5. *A copy of the log shall be made available to the administrator or a person designated by him immediately upon request.*

Sec. 6. NAC 616C.088 is amended as follows:

NAC 616C.088 File of claims.

1. An insurer shall maintain a file of employees' claims concerning injuries and occupational diseases, including claims which have been denied. The file must be indexed by [claimants's] injured employees' names and social security numbers.

2. The file for each injury or occupational disease must contain:

(a) The employer's report of the injury or occupational disease.

(b) The [physician's or chiropractor's first report of the injury or occupational disease] claim for compensation and every subsequent medical report.

(c) All applicable orders of the hearings division of the department of administration and [reports] documents related to those orders.

(d) A record of all compensation paid to the [claimant] injured employee, and all payments made to any other person in connection with the claim, for:

(1) Accident benefits;

(2) Temporary partial disability;

(3) Temporary total disability;

(4) Permanent partial disability;

(5) Permanent total disability;

(6) Death benefits; and

(7) Vocational rehabilitation,

and the amount of the expected total incurred costs and the justification.

(e) A copy of any notice of termination of benefits which has been sent to the [claimant] injured employee.

(f) Copies of all correspondence and other documents pertaining to the claim, including copies of:

(1) All medical bills incurred by the [claimant] injured employee and received by the insurer; and

(2) Any notices sent to the [claimant] injured employee to inform him of his right to a review or appeal, but not including records of any privileged communication between the insurer and its attorney or of any investigation conducted concerning a possible violation of NRS 616D.300.

(g) All ratings performed by any physician or chiropractor.

(h) A summary of conversations or oral negotiations, or both, conducted by the insurer with the [claimant] injured employee, his attorney, his physician or chiropractor, or any other party, if action is requested or taken.

(i) *The log required by Assembly Bill 147 of the 1997 Nevada State Legislature.**

(3) Each file of a claim must be retained for 2 years after the death of the [claimant]

injured employee.

* The Legislative Counsel Bureau will replace Assembly Bill 147 with the correct Nevada Revised Statute citation.