



**Department of Labor and Training
Temporary Disability Insurance
1511 Pontiac Avenue
Cranston, RI 02920**

Impartial Medical Examiner's Agreement

Qualified Healthcare Providers performing medical consultation services for the Rhode Island Department of Labor and Training, Division of Temporary Disability Insurance, hereinafter referred to as TDI Impartial Medical Examiners, agrees to abide by the following descriptions of his/her duties and responsibilities during their time of service to the Department as a member of the roster of Impartial Medical Examiners pursuant to Rhode Island General Law Section 28-39-6, 28-39-7, 28-39-19.

Role and Responsibilities:

- To examine and evaluate claimants when selected by TDI staff for the purposes of offering a second opinion on the functional ability of said claimant to return to their regular/customary work.
- To conduct an impartial examination within 14 calendar days after date of notice;
- To render an initial written decision within 24 hours of the exam date, utilizing TDI form # 25F
- To submit a comprehensive report indicating all pertinent findings within 5 calendar days of referral indicating all pertinent findings referencing all relevant documents, reports, diagnostic exams, etc, provided by the claimant which assisted in final determination.
(May utilize TDI form # 25A)
- To render to the RIDLT, in a format acceptable to the Department, a report containing findings and basis of opinion, including but limited to:
 1. whether an impairment of function exists;
 2. whether such impairment is total or partial, temporary or permanent in nature;
 3. whether within a reasonable degree of medical certainty such an impairment of function has due cause to prevent claimant from performing his/her regular / customary work; and,
 4. any other matters relevant to medical determination.
- To render a report based on review of the claimant's medical records without an examination at the direction of the RIDLT.
- To review all medical documentation claimant provides impartial examiner related to the illness or injury

- To provide documentation at the request of the Department to update qualifications for appointment to the Roster including documentation of medical license and certifications to practice medicine in the State of Rhode Island.
- To have responsibility to continue to meet the criteria for eligibility during the period of appointment and any subsequent reappointments:
 - current full state license (no restrictions) rendered by the appropriate board of registration;
 - board certification as a specialist within discipline.
- To immediately report in writing to the RIDLT, Administrator of Temporary Disability Insurance any change (s) in eligibility that may adversely affect physician’s ability to meet basic qualifications for inclusion on the Roster such as suspension, revocation, cancellation, non-renewal, or any other restrictions on either medical license or board certification.
- To immediately disclose in writing to the RIDLT, Administrator of Temporary Disability Insurance or disclose to the TDI Assistant Director whenever the Board of Registration in Medicine places any restrictions on license to practice, or whenever any hospital discipline, civil action, or professional complaint is pending.
- To accept RIDLT Fee Schedule as compensation for service.
- To read and acknowledge receipt of Attachment A the Rhode Island Temporary Disability Insurance Policy Statement for Delineation of IME vs. Follow-up Care.

This agreement contains all of the terms and conditions agreed upon by the parties. No other understanding, oral or otherwise, regarding the subject matter of this Agreement shall be deemed to exist or to bind the parties hereto.

Dated this ____ day of _____, 20__

Dated this ____ day of _____, 20__

State of Rhode Island
Department of Labor and Training

TDI Impartial Medical Examiner

Fernanda Casimiro, Assistant Director

Print Name

Signature