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## FCM 057-2016

## **FIRE CHIEF MEMORANDUM**

**DATE:** June 3, 2016

**TO:** All Members

**THROUGH:** Eric C. Tade, Chief of Department *ECT* 

Todd A. Bower, Deputy Chief of Department *ECT for TAB* Desmond G. Fulton, Division Chief, Administration *DGF* 

James Hart, Assistant Chief, Administration JH

**FROM:** Gary R. Pierce, Captain, Administration *GRP* 

SUBJECT: CHANGING HEALTH PROVIDERS FOR LOD INJURIES

The first step in the injury process for a member injured in the line of duty (LOD) is for the member to call the Ouch Line, 303-436-6824 (OUCH). If the member is unable to call due to the emergency of the injury, his/her supervisor should make the call. The Ouch Line nurse will give the member or his/her supervisor a choice of going to Concentra or COSH, and a decision will be made at that time as to which provider the member would like to see. If the member is taken to the hospital before they are able to call the Ouch Line, then at the earliest possible time the member or his/her supervisor will call the Ouch Line. Once the member or the supervisor has designated which provider the member will see, Risk Management will provide a written list, within seven days, of up to four authorized treating physicians from the two separate providers; COSH or Concentra.

A member does have the right to a one-time change of providers within 90 days following the date of injury, but before maximum medical improvement. This one-time change can only be granted if the member fills out the required form and submits it to Risk Management. This form can be found on the Colorado Division of Worker's Compensation website, under forms. The link to the website is: <a href="https://www.colorado.gov/pacific/cdle/forms-3">https://www.colorado.gov/pacific/cdle/forms-3</a>. If this option is exercised by the member to change providers, a new list of doctors will not be provided. The initial list is the only one that will be sent, so please retain the original list throughout the process.

If the insurer (Risk Management) or employer believes the notice to change providers from the member does not meet the statutory requirements and does not want to recognize the change of physicians, the insurer must provide written objection to the injured worker within seven (7) business days following receipt of the request. If the employer or insurer does not provide timely objection within seven (7) days to the injured worker's request to change physicians, then the change of physician request will be processed. If written objection is provided and the



dispute continues, any party may file a motion or, if there is a factual dispute requiring a hearing, any party may request that the hearing be set on an expedited basis.

:kfc/H/FCM/2016/057-2016 Changing Health Providers for LOD Injuries

DISPOSITION: Read at Roll Call for three (3) consecutive shifts. DISTRIBUTION: Suppression and Support Services (electronic)