

1 **WORKERS' COMPENSATION APPEALS BOARD**
2 **STATE OF CALIFORNIA**

3
4 **Case No. ADJ795505 (LAO 0794863)**

4 **VICTORIA SHANLEY,**

5 *Applicant,*

6 **vs.**

7
8 **HENRY MAYO NEWHALL MEMORIAL**
9 **HOSPITAL; and TRAVELERS INSURANCE**
10 **CO.,**

11 *Defendants.*

OPINION AND DECISION
AFTER RECONSIDERATION

12 On February 13, 2014, we granted reconsideration of the November 27, 2013 Finding of Fact to
13 further study the factual and legal issues. This is our Decision after Reconsideration.

14 In the November 27, 2013 decision, the workers' compensation administrative law judge (WCJ)
15 found that the utilization review (UR) decisions issued by defendant on August 6, 2013 did not violate
16 Labor Code section 4610¹ or Administrative Director (AD) Rule 9792.9 (Cal. Code Regs., tit. 8,
17 § 9792.9).² Defendant's UR decisions denied Dr. Mealer's July 26, 2013 request for authorization of a
18 lumbar MRI and an EMG of the lower extremities.

19 In her Petition for Reconsideration, applicant contends that: (1) the UR physician, Albert Bisson,
20 M.D., was not qualified to conduct the UR because he is not an orthopedist or an orthopedic surgeon, as
21 required by section 4610(e) and AD Rule 9792.9(f); (2) Dr. Bisson was not qualified to conduct the UR
22 because he is not licensed in California, as required by section 4610(e) and AD Rule 9792.9(f); (3) the
23 UR decisions were not communicated by phone/fax within 24 hours, in violation of section
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25 ¹ All other statutory references are to be Labor Code.

26 ² All references to Rules of the AD are two regulations found in Title 8 of the California Code of
27 Regulations.

1 4610(g)(3)(A) and AD Rule 9792.9(b)(4); and (4) the UR decisions were not signed by Dr. Bisson as
2 required by section 4610(e) and AD Rule 9792.7(b)(1).

3 No Answer to the petition was received. However, the WCJ prepared a Report and
4 Recommendation on Petition for Reconsideration (Report) recommending that the petition be denied.

5 Applicant's first, second, and fourth contentions may be quickly resolved. In *Dubon v. World*
6 *Restoration, Inc.* (2014) 79 Cal.Comp.Cases 1298 (Appeals Board en banc opinion) (*Dubon II*), the
7 Appeals Board held that a UR decision may be invalid only if it is untimely and that all other disputes
8 concerning a UR decision must be resolved by independent medical review (IMR). Accordingly, we
9 lack the authority to address applicant's first, second, and fourth contentions.³

10 We turn now to applicant's third contention.

11 In *Bodam v. San Bernardino County/Department of Social Services* (2014) 79 Cal.Comp.Cases
12 ___ [2014 Cal. Wrk. Comp. LEXIS 156], the Appeals Board held that, under the provisions of section
13 4610(g)(1) and (g)(3)(A) and AD Rule 9792.9.1(e)(3): (1) a defendant is obligated to comply with all
14 time requirements in conducting UR, including the timeframes for communicating the UR decision;
15 (2) a UR decision that is timely made but is not timely communicated is untimely; and (3) when a UR
16 decision is untimely and, therefore, invalid, the necessity of the medical treatment at issue may be

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18 ³ In passing, however, we do observe the following.

19 With respect to applicant's first contention, section 4610(e) and AD Rule 9792.6.1(w) provide that the UR
20 reviewer must be "a licensed physician who is competent to evaluate the specific clinical issues involved in the
21 medical treatment services" and that the requested services must be "within the scope of the physician's practice."
22 There is no requirement that the UR physician must be an orthopedist or orthopedic surgeon if the requesting
23 physician is one. Here, defendant's UR decisions reflect that Dr. Bisson is a physician who specializes in physical
24 medicine and rehabilitation. Applicant has presented no evidence, or even argument, that a physician who
25 specializes in physical medicine and rehabilitation is not competent to assess whether a lumbar MRI or an EMG of
26 the lower extremities is medically necessary, or that such services are outside the scope of the practice of a
27 physician who so specializes.

24 With respect to applicant's second contention, section 4610(d) and AD Rule 9792.6.1(o) require only that
25 the "Medical Director" who oversees a defendant's UR program must be licensed in California. Moreover, AD
26 Rule 9792.6.1(w) expressly provides that a UR physician may be "licensed by any state or the District of
27 Columbia." Here, defendant's UR decisions reflect that Dr. Bisson is licensed in Oklahoma and Texas.

26 With respect to applicant's fourth contention, AD Rule 9792.9.1(e)(5) requires that a UR decision "shall
27 be signed by either the claims administrator or the reviewer." Therefore, contrary to applicant's assertion, Dr.
Bisson's signature was not legally required.

1 determined by the WCAB based upon substantial evidence. (2014 Cal. Wrk. Comp. LEXIS 156, at *3.)

2 Under section 4610(g)(1), a prospective UR decision must be made within “five working days
3 from the receipt of the information reasonably necessary to make the determination, but in no event
4 more than 14 days from the date of the medical treatment recommendation by the physician.” However,
5 under section 4610(g)(3)(A), as clarified by AD Rule 9792.9.1(e)(3), there are the additional
6 requirements that: (1) within 24 hours after the UR decision has been made, the decision must be
7 communicated to the treating physician either by telephone, fax, or email; and (2) within two business
8 days after the decision has been made, written notice of it must be sent to the treating physician, the
9 injured employee, and the injured employee’s attorney (if represented). (See *Bodam, supra*, 2014 Cal.
10 Wrk. Comp. LEXIS 156 at *5-*8.) These time limits start running from the date the UR decision is
11 actually made, even if the UR decision is made in a shorter timeframe than that permitted by section
12 4610(g)(1). (*Id.* at *6-*7.) Moreover, both the 24-hour and two business day requirements must be met;
13 it is not sufficient to meet only one of them. (*Id.* at *5, *7-*8.)

14 The defendant has the affirmative burden of proving that its UR process was timely. (§§ 3202.5,
15 5705.)

16 Here, the documents in evidence reflect that, on July 30, 2013, defendant received the July 29,
17 2013 request for authorization (RFA) from the treating physician, Dr. Mealer, together with copies of his
18 July 26, 2013 narrative report and his July 26, 2013 PR-2.

19 In response, defendant issued two UR decisions (Exhibits 4 & 5), which both listed a
20 “Determination Date” of “08/06/2013.” Also, the IMR applications attached to each of the UR
21 decisions similarly specify a “Date of UR Decision” of “08/06/2013.” We conclude, therefore, that
22 defendant made its UR decisions on August 6, 2013, which was within five *business* days of its July 30,
23 2013 receipt of the RFA because the third and fourth calendar days were a Saturday and a Sunday
24 (August 3 and 4, 2013).

25 Accordingly, the two UR decisions themselves were timely. Therefore, the question becomes
26 whether the UR decisions were timely communicated.

1 The evidence establishes that, on the same date that defendant issued its August 6, 2013 UR
2 decisions, it mailed these decisions to applicant, her attorney, and Dr. Mealer. Therefore, defendant met
3 the two business days requirement of section 4610(g)(3)(A) and AD Rule 9792.9.1(e)(3).

4 Thus, the only remaining question is whether the two August 6, 2013 UR decisions were
5 communicated by phone, fax, or email to Dr. Mealer within 24 hours after the decisions were made.

6 The only evidence presented regarding this question is as follows: (1) both UR decisions refer to
7 a "peer to peer" "contact date" of "08/06/2013" (i.e., the same date as the UR decisions); (2) both UR
8 decisions state that the "[p]eer to peer [contact] was unsuccessful"; and (3) both UR decisions state that
9 the "contact type" was "phone - left message" and that the "contact person" was "Jennifer D." whose
10 "contact role" is "requesting provider."

11 We conclude that this evidence is not sufficient to sustain defendant's burden of proof that it
12 timely communicated its August 6, 2013 UR decisions to Dr. Mealer by phone, fax, or email within 24
13 hours after the decisions were made. Most significantly, the two August 6, 2013 UR decisions merely
14 state that a phone message was "left," *without specifying the nature or content of the phone messages.*
15 Therefore, defendant has not shown that the messages it left gave notice to Dr. Mealer that it had made
16 UR decisions denying his treatment requests. Additionally, the statements that "[p]eer to peer [contact]
17 was unsuccessful" further failed to prove that the UR decisions were communicated to Dr. Mealer by
18 phone within 24 hours after the decisions were made.

19 Under *Dubon II* and *Bodam*, defendant's August 6, 2013 UR decisions are rendered invalid
20 because of its failure to timely communicate those decisions to Dr. Mealer by phone, fax, or email
21 within 24 hours and, therefore, the issue of medical necessity must be determined by the WCAB, not
22 IMR.

23 Accordingly, we will rescind the WCJ's November 27, 2013 Finding of Fact and substitute a
24 new finding that the two UR decisions are invalid. We will return the matter to the trial level for the
25 WCJ to determine in the first instance whether the lumbar MRI and the EMG of the lower extremities
26 are medically necessary.

1 For the foregoing reasons,

2 **IT IS ORDERED** as the Decision After Reconsideration of the Workers' Compensation
3 Appeals Board that the Finding of Fact issued by the workers' compensation administrative law judge
4 on November 27, 2013 is **RESCINDED** and that the following Finding of Fact is **SUBSTITUTED**
5 therefor:

6 **FINDING OF FACT**

7 1. Defendant's two utilization review decisions of August 6, 2013, which,
8 respectively, denied Dr. Mealer's request for lumbar MRI and for an EMG of the
9 lower extremities, are invalid because defendant failed to carry its burden of
proving that they were timely communicated to Dr. Mealer by phone, fax, or
email within 24 hours after the decisions had been made.

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9 **COMPANY,**

9 *Defendants.*

OPINION AND ORDER
GRANTING PETITION FOR
RECONSIDERATION

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11 Reconsideration has been sought by applicant, with regard to a decision filed on November 27,
12 2013.

13 Taking into account the statutory time constraints for acting on the petition, and based upon our
14 initial review of the record, we believe reconsideration must be granted in order to allow sufficient
15 opportunity to further study the factual and legal issues in this case. We believe that this action is
16 necessary to give us a complete understanding of the record and to enable us to issue a just and reasoned
17 decision. Reconsideration will be granted for this purpose and for such further proceedings as we may
18 hereinafter determine to be appropriate.

19 For the foregoing reasons,

20 **IT IS ORDERED** that the Petition for Reconsideration is **GRANTED**.

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