Workers Compensation Training Manual for Independent Practice Physicians in Florida

# Proper Completion of Workers’ Compensation Forms

## Section 1: Introduction to Workers’ Compensation in Florida

### 1.1 Overview

Florida’s Workers’ Compensation system provides medical care and wage replacement benefits to employees injured in the course of employment. As a physician in independent practice, your role is crucial in initiating treatment, documenting medical progress, and communicating with the insurer.

### 1.2 Your Role as an Authorized Treating Provider

- Evaluate and treat the injured worker.  
- Document the relationship between injury and work.  
- Clearly define work status.  
- Coordinate with case managers, insurers, and employers.  
- Complete and submit required forms in a timely and compliant manner.

## Section 2: Required Forms for Independent Practices

### 2.1 DWC-25 Form

Florida Workers’ Compensation Uniform Medical Treatment/Status Reporting Form

* When to Use:

- At initial visit  
- At each follow-up visit  
- When there is a change in treatment, diagnosis, or work status

* How to Complete:

- Section I: Employee details and insurance information  
- Section II: Diagnoses (use ICD-10 codes), objective findings, and treatment rendered  
- Section III: Work status – MUST include whether the patient can return to work and under what restrictions  
- Section IV: Treatment plan, referrals, next appointment

* Best Practice Tips:

- Be clear with restrictions (e.g., “no lifting over 10 lbs,” not just “light duty”)  
- Submit via electronic means if possible  
- Keep a DWC-25 form template accessible in your EHR system

### 2.2 CMS-1500 Billing Form

Used for submitting medical charges for reimbursement.

* Independent Practice Requirements:

- Ensure each billed service is authorized by the carrier  
- Include: Rendering provider’s NPI, Carrier’s claim number, Authorized CPT/HCPCS codes, ICD-10 diagnosis codes, Modifier codes as needed

Tip: Attach medical records or DWC-25 forms to avoid claim denials or delays.

### 2.3 Narrative Reports

Requested in complex or litigated claims. Often requested by insurers, case managers, or attorneys.

* Must Include:

- Detailed history and mechanism of injury  
- Diagnostic findings  
- Treatment rationale  
- MMI status (if applicable)  
- Functional impairments  
- Return-to-work recommendations

## Section 5: Best Practice Tips for a Doctor's Office

Implementing best practices within your office workflow will improve efficiency, compliance, and patient outcomes.

* Administrative Best Practices:

- Designate a workers’ compensation coordinator or point person.  
- Maintain up-to-date contact lists for insurers and case managers.  
- Develop a checklist for intake, follow-up, and discharge visits.  
- Use standardized templates in your EHR for DWC-25 and narrative reports.  
- Keep a log of form submission dates to monitor timeliness.

* Clinical Documentation Best Practices:

- Clearly document the mechanism of injury.  
- Use functional, task-specific language for work restrictions (e.g., “no repetitive wrist motion” vs. “no work”).  
- Keep progress notes concise, objective, and tied to the injury.  
- Always update the treatment plan and work status at every visit.

* Communication Best Practices:

- Provide prompt updates to adjusters and case managers.  
- Clarify with insurers whether additional services require pre-authorization.  
- Set expectations with patients about their responsibilities, including attending follow-ups.  
- Ensure all team members are trained in WC documentation protocols.

## Section 6: Working Smoothly with Workers’ Compensation Adjusters and Case Managers

Maintaining a collaborative and professional relationship with adjusters and case managers ensures smoother claim handling, timely authorizations, and better patient outcomes. Here are tips for effective communication and coordination:

* Communication Strategies:

- Respond promptly to emails, calls, and documentation requests.  
- Use secure methods for sharing patient records (fax, encrypted email, or portal).  
- Clarify expectations around report timing, especially after key events like MMI or surgery.  
- Be clear and consistent with terminology used in forms and reports.

* Documentation and Reporting Tips:

- Submit DWC-25 and CMS-1500 promptly and ensure completeness.  
- Provide detailed, objective narrative reports upon request.  
- Keep records organized and accessible for quick reference during audits or disputes.

* Building Long-Term Relationships:

- Maintain professionalism and mutual respect in all interactions.  
- Invite feedback on form quality and timeliness.  
- Understand each adjuster’s or case manager’s preferences for communication and reporting.  
- Be proactive—notify them of changes in diagnosis, treatment plan, or patient compliance issues.