

MEMORANDUM

TO: All interested parties

FROM: Charles D. Bond, Workers' Compensation Director

DATE: November 20, 1996

SUBJECT: Clarification of Payment to Medical Providers

The employer/insurance carrier is responsible for payment of medical treatment for work-related injuries in accord with 21 V.S.A. §640(a). Payment shall be billed to the employer/insurance carrier. In accord with Rule 40.021(B) of Vermont's Workers' Compensation Fee Schedule, in no event shall the employee be required to provide additional reimbursement for medical services subject to the fee schedule. The provider may, however, send a copy of the statement to the employee for information purposes only.

Payments are to be made by the employer/insurer within **30 days** from receipt of the bill and supporting documentation. If the bill, with supporting documentation, if the employer/insurer cannot make payment within the 30 days, then the employer/insurer must notify the provider in writing as to the status of the claim.

If an employer/insurer has denied the claim but has received bills relative to the claim, they must notify the provider in writing in accord with Rule 40.021(C) of its position on the claim. Should a provider receive such a notice, the provider may then bill the claimant for the service. The claimant has a right to appeal a carrier's decision to deny a claim through the Department of Labor and Industry.