

Handling Insurance Company Requests



Reading time:
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Q. Can I ignore correspondence from an insurance company?

A. No. Ignoring these requests in certain situations may lead to a complaint to the regulatory bodies or may be to the detriment of your patient. Ensure you read all correspondence from insurance companies. Here are a couple of examples of the types of requests you might receive:

- A travel insurance company requesting a patient's medical history prior to evacuation from an overseas destination
- An insurance company seeking notes of a deceased patient in order to pay out life insurance.

Q. Must I to comply with an insurance company's request for patient notes?

A. If a patient requests that a copy of the notes be provided to an insurance company, then the practitioner should comply. It is important to ascertain that there is a recent signed patient consent and to check exactly what the consent agrees to being provided. Practitioners should NOT send a full copy of the notes if the patient has only agreed to the relevant notes being provided.

Q. Should I send specialist correspondence as part of the 'notes'?

A. The 'notes' constitute any entries or documents that form part of the patient's treatment. This includes all specialist correspondence including those that say 'not to be released'. The 'notes' do NOT include any reports written by private specialists that were requested for a purpose other than the patient's medical treatment (eg independent medical evaluation reports on a worker's compensation claim).

Q. Do I have to write reports for insurance companies?

A. Legally this is not mandatory although the patient may complain or be disadvantaged if you decline to do so. Non-compliance may also result in a subpoena to give an opinion in court. The exception occurs if a patient consultation has been billed to Workcover, then there is an obligation to provide information. You may charge a fee for the time researching and writing a treating doctor's report.

Q. An insurance company has sent me a surveillance video of one of my regular patients and asked me to comment?

A. This is a tricky one that MIPS is increasingly asked about. We would recommend returning the footage unwatched if you feel it is likely to affect your doctor/patient relationship. Often, by the time they contact MIPS, practitioners have already watched the footage. They are then asked to comment as to whether the footage seen is compatible with their clinical assessment of their patient. In MIPS' opinion there is no obligation to provide a report analysing the footage and as Occupational Medicine is often not a member's area of expertise, we would suggest that if the footage does not assist your management, a response to the insurance company stating this and recommending a referral to an independent specialist in that area who can assess the patient should be made.

Handling requests for clinico-legal reports

MIPS has observed an increasing frequency of solicitors requesting a clinico-legal report regarding a patient being legally represented by them.

Often the nature of the request for the report is quite non-specific and at times does not even disclose the purpose for which the report is being requested. Is the solicitor developing a case against you, an insurer or even another doctor? This can often be very relevant and may influence the manner in which the report is written.

Always consider at the time of writing any report, that just about anyone will have access to it, can read it and may even be asked to comment on it. Once you have committed something to a report, it is very difficult to later withdraw or modify it.

Any clinico-legal report should adhere to the principles of stating only the clinically sustainable facts and where asked, answering only those questions in a factual manner. Where asked for an opinion, this should be limited to the facts and only reflect your clinical expertise. It should be written in a passive sense and ignore any non-clinical observations, hearsay or emotional language.

The report should never be written as a patient advocate.

MIPS recommends the following for any proposed clinico-legal report written to a lawyer acting for a patient:

- you review your notes and prepare a draft;
- submit the draft to MIPS for perusal and feedback; and
- send the final copy (with any enhancements) to the lawyer and a copy to MIPS.

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