Independent medical examinations and the fuzzy politics of disclosure

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In Brief

The number of third-party independent medical examinations is increasing, and so is the controversy surrounding them. Dorothy Grant of the Medical Society of Nova Scotia provides advice on how physicians should address this potentially contentious issue.

En bref

En même temps que le nombre d’examens médicaux exigés par des tiers indépendants ne cesse d’augmenter, la controverse à ce sujet s’intensifie également. Dorothy Grant, de la Société médicale de la Nouvelle-Écosse, offre des conseils aux médecins sur la façon d’aborder ce problème controversé.

When they call me at the Medical Society of Nova Scotia their anger is palpable. They are the growing number of men and women frustrated that they have been denied access to information contained in third-party medical reports. In most cases the problem relates to an independent medical examination (IME) done by a physician chosen by a third party; they are very popular with insurance companies, which use IMEs to determine a claimant’s eligibility for long-term disability.

A 1992 Supreme Court ruling (McInerney v MacDonald) had a dramatic effect on both the patient–physician relationship and IMEs. Many patients are now aware that, with few exceptions, they can no longer be denied reasonable access to medical information doctors compile about them (see sidebar).

Because of this well-publicized access to medical information, it isn’t surprising that those subject to third-party exams now believe they have a right to read what an IME says about them. Many patients who call the medical society are incredulous when told they are not entitled to examine or receive a copy of such a report. “The report is about me and my body,” they say. “I think I have every right to see what the doctor said about me.”

The anger is heightened if the person concludes that the IME is responsible for a decision to deny a disability claim. It is not unusual for disgruntled patients to threaten to go to a physician’s office to demand a copy of a third-party report. Some have even talked to me about taking it by force.

Physicians who do IMEs are expected to inform patients that their primary role is to help a third party determine disability or physical impairment. It is assumed they will also explain that they are acting on behalf of the third party, which is paying for their professional services. However, doctors can state — and often do — that there is a possibility their report may contain recommendations for further investigation or treatment.

Physicians should advise these patients that they will not be able to obtain the results of the examination from the doctor, since the findings become the property of the third party.

What to tell patients about third-party exams

Physicians who conduct examinations on behalf of a third party should inform patients:

• Whoever pays for a third-party examination owns it and controls its release. It is not the same as an examination done under a provincial health insurance plan and patients will only see the results if the third party that paid for the report releases them.

• In some cases physicians pass along information resulting from a third-party examination to the patient’s doctor, but rules are fuzzy and vary according to the physicians and third parties involved. In most cases patients will not be allowed to see these reports.