

# Elective Surgery Notification

RE:

Dear \_\_\_\_\_ :

## Insurer's response \_\_\_\_\_

We received your request for elective surgery for this worker.

- We approve your request for (list specific surgery): \_\_\_\_\_
- We have scheduled a consultant examination with \_\_\_\_\_ on \_\_\_\_\_ to evaluate whether the proposed treatment is medically reasonable to treat the compensable injury. The consultation should be completed within 28 days from the date of this letter. You will be notified of the consultant's findings within seven days of the completed consultation.
- No consultant examination is requested. (If the request is not approved, parties may request administrative review by the director of the Department of Consumer and Business Services, Workers' Compensation Division, 350 Winter St. NE, P.O. Box 14480, Salem, Oregon 97309-0405.)

## Insurer's consultant report \_\_\_\_\_

When you receive the consultant's findings, if you disagree and continue to recommend the proposed surgery, or wish to proceed based on the recommendations proposed by the consultant, please call or write to me using the phone number or address below.

## Failure to agree \_\_\_\_\_

If agreement cannot be reached, and further effort to resolve the request for elective surgery appears to be futile, please sign and date below. Return a copy of this letter to me, retain a copy for your records, and provide copies to all parties listed below.

I believe further efforts to reach agreement will be futile.

X \_\_\_\_\_  
*Physician's or authorized nurse practitioner's signature      Date*

**If the insurer believes the proposed elective surgery is excessive, inappropriate, or ineffectual, the insurer must request administrative review by the director of the Department of Consumer and Business Services within 21 days of the medical provider's notice of failure to reach agreement. Failure of the insurer to timely respond to the physician's or authorized nurse practitioner's elective surgery request or to timely request administrative review bars the insurer from later disputing whether the surgery is or was excessive, inappropriate, or ineffectual.**

CC:

