



# Texas Department of Insurance

Division of Workers' Compensation

7551 Metro Center Drive, Suite 100 • Austin, Texas 78744

512-804-4812 telephone • 512-804-4811 fax • [www.tdi.texas.gov/wc/mfdr](http://www.tdi.texas.gov/wc/mfdr)

## Memorandum

To: Texas Workers' Compensation System Participants

From: Matthew Zurek, Executive Deputy Commissioner for Health Care management and System Monitoring

Date: September 1, 2011

Subject: Format Revisions to Medical Fee Dispute Resolution Decisions and Orders

The Texas Department of Insurance, Division of Workers' Compensation (TDI-DWC) has made revisions to the format of the Medical Fee Dispute Resolution (MFDR) Decisions and Orders. Workers' compensation system participants should become familiar with the revised Decision and Order format as it contains the medical fee dispute decision, and important information in regards to the appeal process. An example of both the old and revised Decision and Order may be viewed at <http://www.tdi.texas.gov/wc/mfdr/index.html#format>.

TDI-DWC Decisions and Orders are posted to the TDI website at <http://www.tdi.texas.gov/wc/admindecisions.html>.

If you have any questions regarding the information in this memorandum, contact Martha Luevano at (512) 804-4858 or [Martha.Luevano@tdi.texas.gov](mailto:Martha.Luevano@tdi.texas.gov).