



# Fast Facts

## Medical Forms

*Texas Department of Insurance, Division of Workers' Compensation*

For specific details on these medical forms, refer to the Texas Department of Insurance, Division of Workers' Compensation (TDI-DWC) adopted rules or call TDI-DWC for assistance at 1-800-372-7713 extension 3. You may also download TDI-DWC forms and rules from the TDI website at [www.tdi.texas.gov/forms/form20all.html](http://www.tdi.texas.gov/forms/form20all.html) and [www.tdi.texas.gov/wc/rules/index.html](http://www.tdi.texas.gov/wc/rules/index.html).

## Medical Forms

Form	Title	Submitted By	Submitted To	When	28 Texas Admin. Code	Network (HCN)/ Non-Network (HCN)/Informal/ Voluntary Network
DWC045	Request for a Benefit Review Conference (BRC)	Injured employee, employer, health care provider (with sub claimant status), health care insurer or workers' compensation insurance carrier	TDI-DWC Field Office handling claim	To request a BRC when benefits have been denied for compensability or extent	140.1 - 140.3, 140.6, 140.8, 141.1 - 141.7	All
DWC045A	Request for a Medical Contested Case Hearing (CCH) or SOAH Hearing	Injured employee, workers' compensation insurance carrier, employer, sub claimant, health care provider, or health care	TDI-DWC Chief Clerk of Proceedings	To request a medical CCH or SOAH hearing to resolve disputed medical issues	140.1 - 140.3, 140.6, 140.8, 141.1 - 141.7	All
DWC053	Employee's Request to Change Treating Doctor – Non-Network	Injured employee	TDI-DWC Field Office handling claim	Before receiving treatment from the new treating doctor. Form requires new treating doctor's signature.	126.9	Non-network only
DWC060	Request for a Medical Fee Dispute	Injured employee, health care provider, qualified pharmacy processing agent, sub claimant as described by 409.0091	TDI-DWC Medical Fee Dispute Resolution	No later than 1 year from date of service with exceptions as described in 133.307	133.305, 133.307	Non-Network (HCN) & Informal/Voluntary Network



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Form	Title	Submitted By	Submitted To	When	28 Texas Admin. Code	Network (HCN)/ Non-Network (HCN)/Informal/ Voluntary Network
LHL009	Request for a Review By an Independent Review Organization (IRO) (for resolution of medical necessity dispute)	Injured employee or health care provider	Workers' compensation insurance carrier	Not later than the 45th calendar day after receipt of the denial of reconsideration. compensation insurance carrier	133.308	All
DWC066	Statement of Pharmacy Services	Pharmacy	Workers' compensation insurance carrier	By the 95th day after the date of service	133.10, 133.20	All
DWC069	Report of Medical Evaluation	Examining doctor	TDI-DWC Central Office, insurance carrier, injured employee and injured employee representative, and treating doctor (TD), if the exam was given by a doctor other than the TD	By the 7th working day after the date of the certifying exam	102.4(b) 126.6(f), 126.7(n), 130.1, 130.2, 130.3	All



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Form	Title	Submitted By	Submitted To	When	28 Texas Admin. Code	Network (HCN)/ Non-Network (HCN)/Informal/ Voluntary Network
DWC070	Instructions for completing the ADA J515 Dental Claim Form	Dentists	Workers' compensation insurance carrier	By the 95th day after the date of service	133.10, 133.20	All
DWC073	Work Status Report	Treating doctor, referral doctor, designated doctor or RME doctor	Workers' compensation insurance carrier, employer, injured employee and injured employee representative	By the end of the second working day following the exam (to the insurance carrier or employer) or at the time of the exam (to the injured employee)	102.4(b), 126.6(g), 126.7(o), 129.5, 129.6(b)	All
Professional Medical, Hospital, Dental and Pharmacy Billing	Standard forms prescribed by 133.10	Health care provider or a qualified agent for the health care provider as described by 133.20	Workers' compensation insurance carrier	No later than the 95th day after the date of service with exceptions as described in 133.20	133.10, 133.20	All

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For one-on-one assistance to the health care provider community who serve injured employees, contact Comp Connection for Health Care Providers at 1-800-372-7713. Health care providers can obtain practical information and guidance on issues commonly encountered when treating injured employees, such as treatment guidelines, billing and reimbursement, workers' compensation forms, licensing and certification requirements, and monitoring, compliance and enforcement.