

DEPARTMENT OF INDUSTRIAL RELATIONS

**DWC – Medical Unit**

P. O. Box 71010

Oakland, CA 94612

Tel. No.: (510) 286-3700 or 1-(800) 794-6900 Fax No.: (510) 622-3467



## NOTICE OF QME COMPETENCY EXAM

**April 16-23, 2022 Computer Based Testing at Pearson VUE Testing Centers**

The Division of Workers' Compensation (DWC) will administer the next Qualified Medical Evaluator (QME) Competency Examination from April 16-23, 2022

Physicians who wish to take the exam in April 2022 must submit a completed original [Application for Appointment as Qualified Medical Evaluator](#) (QME Form 100). Send all documentation/fees required and complete the registration for the QME Competency Examination (please see attached QME Form 102 on page two).

The application and all required documentation must be reviewed and approved by the DWC before a physician can be registered for the exam (Title 8, California Code of Regulations §§10, 11). The application must be **postmarked by March 3, 2022** in order to qualify for this exam. Qualified registrants will receive a confirmation letter along with a Candidate Information Booklet by email/mail. Please keep a copy for your records. The DWC is not responsible for late or lost applications.

**All physicians are required to pay a \$125.00 fee to sit for any upcoming QME examination (Title 8, California Code of Regulations § 11(f)(2)). Before appointment as a QME, the physician shall complete a 12-hour course in disability evaluation report writing approved by the Administrative Director (Labor Code § 139.2).**

The DWC will assess your annual QME fee after you have successfully passed the QME Competency Exam in order to activate your QME status.

Please call 1-800-794-6900 or (510) 286-3700 or email [QMETest@dir.ca.gov](mailto:QMETest@dir.ca.gov) for further assistance. For additional information regarding the qualifications to become a QME, please visit the DWC [website](#). You may also obtain additional application [forms](#) on the website.

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# REGISTRATION FOR QME COMPETENCY EXAMINATION

April 16-23, 2022 In-Person Computer Based Testing

PLEASE COMPLETE THIS REGISTRATION FORM AND RETURN POSTMARKED NO LATER THAN **March 3, 2022**. THE DIVISION OF WORKERS' COMPENSATION (DWC) IS NOT RESPONSIBLE FOR LATE OR LOST APPLICATIONS. PLEASE SEND YOUR REGISTRATION AND APPLICATION FORMS TO:

**DIVISION OF WORKERS' COMPENSATION - ATTN: QME EXAM MEDICAL UNIT**

MAILING ADDRESS:

P. O. BOX 71010

OAKLAND, CA 94612

STREET ADDRESS FOR EXPRESS DELIVERY:

1515 CLAY STREET 18TH FLOOR.

OAKLAND, CA 94612

LAST NAME: \_\_\_\_\_ FIRST NAME: \_\_\_\_\_ MI: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ CA ZIP \_\_\_\_\_

PHONE NUMBER: (\_\_\_\_) \_\_\_\_\_ FAX NUMBER : (\_\_\_\_) \_\_\_\_\_

PHYSICIAN'S LICENSE NUMBER: \_\_\_\_\_

**EXAM LOCATION: Various Pearson VUE Testing Center locations**

**DO YOU HAVE ANY NEED FOR ACCOMMODATIONS DUE TO A DISABILITY OR RELIGIOUS CONFLICT?**

NO  YES (*Please see the Special Administration Procedures at the back of this page.*)

### AFFIRMATIONS AND VERIFICATION

I have used all reasonable diligence in preparing and completing this application. I have reviewed this completed application and to the best of my knowledge the information contained herein and in the attached supporting documentation is true, correct and complete. I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct. I understand that I must keep my license to practice active and that it currently is active. I certify that I am not currently on probation with my licensing board nor on any court-ordered probation. I certify I will notify the DWC of any of the following events: a) change in my license status; b) any past or future conviction related to the conduct of my practice or for any crime of moral turpitude; and c) upon being placed on probation by my licensing board or by any court-ordered probation.

I certify that all the information and supporting documentation which I have previously submitted to the DWC with earlier QME application(s) is bona fide, true and correct.

Applicant's Signature: \_\_\_\_\_ Date: \_\_/\_\_/\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

## REGISTERING FOR SPECIAL ADMINISTRATION PROCEDURES

### Examinee with a Disabling Condition or Religious Conflict

Special administration arrangements can be provided for examinees who, due to a disability or religious conflict, would not be able to take the test under standard conditions. Requests for special arrangements must be made by the REGULAR REGISTRATION DEADLINE. It may not be possible to honor requests for special testing arrangements received after the regular registration deadline.

Individuals whose religious convictions prohibit them from taking tests on Saturdays or religious holidays may request a special test administration

All of the following must be submitted if special arrangements are needed due to a disability:

- A letter from you describing the condition and the specific special arrangements requested; and
- A completed registration form.

YOUR PROFESSIONAL LICENSE NUMBER AND TELEPHONE NUMBER MUST APPEAR ON ALL CORRESPONDENCE.

If you need special facilities (e.g., wheelchair accessible building or restrooms), please notify by letter, Cooperative Personnel Services (CPS) at 241 Lathrop Way, Sacramento, CA 95815. In this case, it is not necessary to submit any medical documentation.

Special arrangements for the following conditions can be accommodated at ALL test sites:

- special seating (e.g., due to pregnancy)
- wheelchair accessible facilities
- use of magnifying devices or large-print tests (e.g., for those with visual impairments).

Arrangements that require SUBSTANTIAL CHANGES IN TESTING CONDITIONS may be accommodated only at selected test sites. If it is necessary to relocate you to accommodate any other type of request, you will be contacted directly to discuss the arrangement.

QME Form 102

Rev: - 01/04/2022

# ALL PHYSICIANS REQUIRED TO PAY \$125.00 FEE

Effective with the September 20, 2003 QME exam, all physicians are required to pay a \$125.00 fee to sit for any upcoming Qualified Medical Evaluator examination. (Title 8, California Code of Regulations §11(f) (2)).

If you have any questions regarding the fee, please call 1-800-794-6900 or 510-286-3700 or email [QMETest@dir.ca.gov](mailto:QMETest@dir.ca.gov) for further information.

Please send this completed form with a \$125.00 check payable to “**Division of Workers’ Compensation**” along with your application for appointment as QME, QME competency exam registration form and documentation to:

**Division of Workers’ Compensation Medical**

P O Box 71010

Oakland, CA 94612

**Attn: Examination Coordinator**

NAME: \_\_\_\_\_ CA PHYSICIAN’S NUMBER: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

PHONE: \_\_\_\_\_ FAX NUMBER: \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_

## **12-HOUR REPORT WRITING COURSE PROVIDERS**

Effective January 1, 2001, a physician seeking appointment as a Qualified Medical Evaluator on or after January 1, 2001, shall also complete prior to appointment, a course on disability evaluation report writing approved by the administrative director. (LC§139.2.)

<https://www.dir.ca.gov/dwc/MedicalUnit/RprtWritingProv.html>

These are the only report writing course providers approved at this time. You must attend a report writing course prior to being appointed as a QME, but are **not** required to take the course prior to the QME examination, unless you wish to.

If you have any further questions, you may call the DWC Medical Unit at 1-800-794-6900. Thank you for your interest in the Qualified Medical Evaluator Program

### **44-hour IDE provider for the QME Exam for Chiropractors.**

The International Chiropractic Association of California (ICAC) is the only approved provider for the 44 Hour Industrial Disability Evaluator (IDE) course. This course must be completed prior submitting your application packet for the QME exam. You may contact Eric Banta at 916-362-8816 or [ICACHome@gmail.com](mailto:ICACHome@gmail.com) to enroll.

## **SUGGESTED REFERENCES**

### **(For Physicians planning to take the QME Examination)**

**Physician's Guide to Medical Practice in the California Workers' Compensation System, 2016, 4th ed.** Available through the Internet at [www.dir.ca.gov/dwc/medicalunit/toc.pdf](http://www.dir.ca.gov/dwc/medicalunit/toc.pdf). or [www.dwc.ca.gov](http://www.dwc.ca.gov), click "Publications", click "The Physician's Guide to Medical Practice in the California Workers' Compensation System".

**Provisions of the California Code of Regulations; Title 8, Industrial Relations.** Information is available through the DWC's website, [www.dwc.ca.gov](http://www.dwc.ca.gov), click "Laws and Regulations". (A copy is included with the purchase of "The Physician's Guide to Medical Practice").

**DWC Medical Unit, QME Competency Examination Study Guide**  
<http://www.dir.ca.gov/dwc/MedicalUnit/QualificationForQME.html>

**Herlick, SD. The California Workers' Compensation Handbook 40th Ed.** Available from Lexis/Nexis, Matthew Bender & Co., Inc.  
(To order: 1-800-223-1940 or [www.lexisnexis.com/store](http://www.lexisnexis.com/store) , approximately \$288.00, product #80283).

**Workers' Compensation Laws of California, 2022 Ed. Matthew Bender**  
(To place an order: 1-800-223-1940 or [www.lexisnexis.com/store](http://www.lexisnexis.com/store) ; \$157.00, product #00840). Especially sections: 139.2, 139.3, 139.31, 4060, 4061, 4062, 4062.2, 4600, 4628. Information is available through the DWC's website, [www.dwc.ca.gov](http://www.dwc.ca.gov), click "Laws and Regulations".

**Thurber, P. Evaluation of Industrial Disability, 2<sup>nd</sup> ed., 1960**  
(Purchase from Amazon.com. [http://www.amazon.com/Evaluation-Industrial-Disability-California-Association/dp/0195011430/ref=sr\\_1\\_2?s=books&ie=UTF8&qid=1387299653&sr=1-2&keywords=Evaluation+of+Industrial+Disability%2C](http://www.amazon.com/Evaluation-Industrial-Disability-California-Association/dp/0195011430/ref=sr_1_2?s=books&ie=UTF8&qid=1387299653&sr=1-2&keywords=Evaluation+of+Industrial+Disability%2C) \$27.99)

**SB 863 (2013), SB 899 (2004), SB 228 (2003), AB 749 (2002).**The senate and assembly bills are located at <http://www.leginfo.ca.gov/bilinfo.html>

**AMA Guides to the Evaluation of Permanent Impairment, 5<sup>th</sup> Edition,**  
(To order: 1-800-621-8335 or <http://www.ama-assn.org> or [www.amazon.com](http://www.amazon.com) (especially chapters 1, 2 and 18)