



JOEL M. PRESSMAN
Commissioner

The Commonwealth of Massachusetts

Department of Industrial Accidents

*600 Washington Street
Boston, Mass. 02111*

CIRCULAR LETTER NUMBER 251

TO: All Interested Parties

FROM: Joel M. Pressman, Commissioner

RE: Requirements for Filings under §36

DATE: February 1990

In order to ensure that claims for specific compensation are not filed prematurely and are filed in accordance with statute, the following procedures have been established:

1. Prior to filing a claim for specific compensation for disfigurement under §36, if six months have not passed from the date of injury, a physician's report must be submitted to the insurer indicating the employee has reached maximum medical improvement. The report must be attached to the Employee's Claim for Specific Permanent Injury Compensation FORM 111.

If no physician's report is attached, the department will not accept a claim unless six (6) months have passed from the date of injury. If the physician's report does not contain the required information and is deemed insufficient and six months have not passed, the claim can be withdrawn at conciliation.

2. Physicians' reports on loss-of-function benefits must state that the evaluations they have conducted are based on and consistent with AMA guidelines. This is a statutory requirement which has not consistently been followed. Again, any §36 loss of function claim without a medical report meeting this requirement will be withdrawn by the department at conciliation at the discretion of the conciliator.

See C152 §36 {2}. "Where applicable, losses under this section shall be determined in accordance with standards set forth in the American Medical Association Guides to the Evaluation of Permanent Impairments."