

New York Form C4.3 - Doctor's Report of MMI/Permanent Impairment

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For workers' claims in New York that result in the permanent impairment of a patient, the C4.3 form, or *Doctor's Report of MMI/Permanent Impairment* form is required. This form is built into your DrChrono account and is easily accessible through the patient's appointment.

1. Navigate to the patient's appointment
2. Make sure the payment profile is set to Workers' Comp. Also, ensure all fields are filled in under the Workers' Comp section under the patient's insurance.
3. Select **Other Forms** on the right side of the screen

The screenshot displays the DrChrono interface for an Institutional Claim. The 'Billing' tab is active, and the 'Other Forms' dropdown menu is selected. The 'Payment Profile' is set to 'Workers' Comp' and is highlighted with an orange box. The 'HCFA Box 10 - Is patient's condition related to:' section is visible, with an orange arrow pointing to the 'Other Forms' dropdown menu.

Field	Value
Billing Status	[Dropdown]
ICD Version	ICD-10
Primary Insurer	Case #: Accident Date: null
Secondary Insurer	Case #: Accident Date: null
Patient Payment	\$ 175.00
Pre Authorization Approval	[Text Field]
Referral #	[Text Field]
Payment Profile	Workers' Comp
Billing Profile	[Dropdown]
Billing Pick List	Choose Codes from Pick List
Diagnosis Pick List	Choose Codes from Pt Problems

HCFA Box 10 - Is patient's condition related to:

Employment	No
Auto Accident	No
Other Accident	No
Onset Date Type	Onset of Current Symptoms o
Onset Date	[Text Field]
Other Date Type	- Other Date Type -
Other Date	[Text Field]

Here you can select and print a couple of related forms.

HCFA/1500 - This is a regular 1500 form that will print on plain white 8.5" X 11" paper

HCFA/1500 (text) - This will print just the text. Select this option if you have the red pre-printed HCFA paper in your printer.

New York: C4.3 - Doctor's Report of MMI/Permanent Impairment

New York: NF3 - New York Motor Vehicle No-Fault Insurance Law Verification of Treatment by Attending Physician or Other Provider of Health Service

The screenshot shows a dropdown menu with the following options: HCFA/1500 02/12, HCFA/1500 02/12 (text), New York: C4.3, and New York: NF3. The menu is open, and the options are listed vertically.

Doctor's Report of MMI/Permanent Impairment

When you select the C4.3 form from the dropdown, many fields will pre-populate if the information is listed in the patient's Workers' Compensation insurance section. If it is not, or you need to update the information shown, you can click into the box and it will let you free text.

The screenshot shows the 'Doctor's Report of MMI/Permanent Impairment C-4.3' form. The form includes the New York State Workers' Compensation Board logo, instructions, and fields for patient and doctor information. The form is titled 'Doctor's Report of MMI/Permanent Impairment C-4.3'. The instructions state: 'Use this form: 1. When rendering an opinion on MMI and/or permanent impairment; or 2. In response to a request by the Workers' Compensation Board to render a decision on MMI and/or permanent impairment. Please answer all questions completely, attaching extra pages if necessary, and submit promptly to the Board, the insurance carrier and to the patient's attorney or licensed representative, if he/she has one; if not, send a copy to the patient. Failure to do so may delay the payment of necessary treatment, prevent the timely payment of wage loss benefits to the patient, create the necessity for testimony, and jeopardize your Board authorization. You may also fill out this form online at www.wcb.ny.gov.' The form includes fields for Date(s) of Examination (04 / 07 / 22), WCB Case # (if known), and Carrier Case #. Section A, 'Patient's Information', includes fields for Name (Harris Jenny), Date of Birth (9 / 1 / 2020), SSN, Address (Main St, Curtis Bay, MD 21226, United States), Home phone #, Date of injury/illness, and Patient's Account # (HAJE000002). Section B, 'Doctor's Information', is also present.

All patient data listed in this article is sample data. This is not a real person or real patient data.

Source: https://www.dfs.ny.gov/apps_and_licensing/property_insurers/nofault