5220.1802 COMMUNICATIONS.

Subpart 1. Legibility and content of required reports. All required rehabilitation reports and required progress records prepared by a rehabilitation provider shall be legible and show the employee's name, department file number, and date of injury.

Subp. 2. **Submission of reports.** All required rehabilitation reports shall be submitted on department forms prescribed by the commissioner.

Subp. 3. **Copies of reports and records.** The assigned qualified rehabilitation consultant shall file all required rehabilitation reports with the commissioner, and provide copies to all parties and their attorneys as the reports are created by the consultant. The qualified rehabilitation consultant shall provide a copy of required progress records to the employee, the insurer, and their attorneys, and also to the employer upon the employer's request. The qualified rehabilitation consultant may not charge for the initial copy or photocopy of required rehabilitation reports or required progress records. If additional copies are requested by any party, the qualified rehabilitation consultant is entitled to reasonable compensation for cost from the requesting party. A dispute about cost is not a basis for a provider to withhold required reports or records when requested.

The requesting party shall pay for reasonable costs incurred by a rehabilitation provider in creating a report not required by rule or requested by the commissioner or compensation judge.

Subp. 4. **Registered rehabilitation vendor reporting.** At least each 30 days, the registered rehabilitation vendor shall submit all required progress records, required rehabilitation reports and cost information on an employee's case directly to the assigned qualified rehabilitation consultant with copies to the employee, the insurer, and their attorneys, and also to the employer upon the employer's request.

Subp. 4a. **Transfer of information.** Whenever there is a change of assigned qualified rehabilitation consultants or consultant firms, the former qualified rehabilitation consultant firm shall cooperate in transferring to the new assigned qualified rehabilitation consultant or qualified rehabilitation consultant firm all data, required rehabilitation reports, required progress records, and incurred rehabilitation cost information along with other relevant information within 15 days from the receipt of notice that a new consultant is assigned under part 5220.0710 and Minnesota Statutes, section 176.102. The former qualified rehabilitation to the new assigned qualified rehabilitation to the new assigned qualified rehabilitation to the new assigned qualified rehabilitation to report the transfer of information to the new assigned qualified rehabilitation consultant firm may not charge a party for the transfer of information to the new assigned qualified rehabilitation consultant or qualified consultant firm.

Subp. 5. **Data privacy.** A rehabilitation provider must comply with Minnesota Statutes, chapters 175 and 176, the rules adopted under those chapters, Code of Federal Regulations, title 42, part 2, Minnesota Statutes, sections 129A.05; 144.291 to 144.298;

144.651; 147.091; 181.954; 181.960; 268A.05; 363A.20, subdivision 8; and 595.02, as applicable, and all other applicable data privacy laws.

A rehabilitation provider shall not engage in communications with health care providers about an employee without the written consent of the employee.

A rehabilitation provider shall safeguard and maintain under conditions of security all information obtained in the course of providing rehabilitation consultation and services and shall limit records access to those parties for whom access is prescribed by Minnesota Statutes, section 176.102, subdivision 7, this chapter, or other applicable law.

When permitted by data privacy laws, disclosure of information obtained in the course of providing rehabilitation services is restricted to what is necessary, verified, and relevant to implementation of the rehabilitation plan.

A rehabilitation provider shall request only the information and data that will assist the parties in developing and carrying out the rehabilitation plan.

Subp. 6. [Repealed, 16 SR 2520]

Subp. 7. [Repealed, 16 SR 2520]

Subp. 8. [Repealed, 16 SR 2520]

Subp. 9. [Repealed, 16 SR 2520]

Subp. 10. **Providing records.** The rehabilitation provider assigned to a case shall maintain all required progress records and copies of all required rehabilitation reports regarding a case and shall make these records available upon request to the commissioner. This subpart shall not apply to the reinsurance association, unless the reinsurance association has assumed primary responsibility for the claim pursuant to Minnesota Statutes, section 79.35, clause (g).

Subp. 11. Access to medical and rehabilitation reports. The assigned qualified rehabilitation consultant shall furnish other rehabilitation providers designated by the rehabilitation plan with copies of all appropriate medical and rehabilitation reports necessary for effective service provision by the other providers.

Subp. 12. Communication with certified managed care plan. When the employee is covered by a certified managed care plan, the assigned qualified rehabilitation consultant shall communicate with the assigned medical case manager who is providing services in accordance with part 5218.0760.

Statutory Authority: MS s 176.102; 176.83

History: 8 SR 1777; 9 SR 1478; 16 SR 2520; 17 SR 3361; 29 SR 1480; L 2007 c 147 art 10 s 15

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