

Qualified Medical Evaluator (QME) Practice Exam (Sample)

Study Guide



Everything you need from our exam experts!

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Introduction

Preparing for a certification exam can feel overwhelming, but with the right tools, it becomes an opportunity to build confidence, sharpen your skills, and move one step closer to your goals. At Examzify, we believe that effective exam preparation isn't just about memorization, it's about understanding the material, identifying knowledge gaps, and building the test-taking strategies that lead to success.

This guide was designed to help you do exactly that.

Whether you're preparing for a licensing exam, professional certification, or entry-level qualification, this book offers structured practice to reinforce key concepts. You'll find a wide range of multiple-choice questions, each followed by clear explanations to help you understand not just the right answer, but why it's correct.

The content in this guide is based on real-world exam objectives and aligned with the types of questions and topics commonly found on official tests. It's ideal for learners who want to:

- Practice answering questions under realistic conditions,
- Improve accuracy and speed,
- Review explanations to strengthen weak areas, and
- Approach the exam with greater confidence.

We recommend using this book not as a stand-alone study tool, but alongside other resources like flashcards, textbooks, or hands-on training. For best results, we recommend working through each question, reflecting on the explanation provided, and revisiting the topics that challenge you most.

Remember: successful test preparation isn't about getting every question right the first time, it's about learning from your mistakes and improving over time. Stay focused, trust the process, and know that every page you turn brings you closer to success.

Let's begin.

How to Use This Guide

This guide is designed to help you study more effectively and approach your exam with confidence. Whether you're reviewing for the first time or doing a final refresh, here's how to get the most out of your Examzify study guide:

1. Start with a Diagnostic Review

Skim through the questions to get a sense of what you know and what you need to focus on. Your goal is to identify knowledge gaps early.

2. Study in Short, Focused Sessions

Break your study time into manageable blocks (e.g. 30 - 45 minutes). Review a handful of questions, reflect on the explanations.

3. Learn from the Explanations

After answering a question, always read the explanation, even if you got it right. It reinforces key points, corrects misunderstandings, and teaches subtle distinctions between similar answers.

4. Track Your Progress

Use bookmarks or notes (if reading digitally) to mark difficult questions. Revisit these regularly and track improvements over time.

5. Simulate the Real Exam

Once you're comfortable, try taking a full set of questions without pausing. Set a timer and simulate test-day conditions to build confidence and time management skills.

6. Repeat and Review

Don't just study once, repetition builds retention. Re-attempt questions after a few days and revisit explanations to reinforce learning. Pair this guide with other Examzify tools like flashcards, and digital practice tests to strengthen your preparation across formats.

There's no single right way to study, but consistent, thoughtful effort always wins. Use this guide flexibly, adapt the tips above to fit your pace and learning style. You've got this!

Questions

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- 1. What is the standard for determining a worker's temporary disability?**
 - A. Assessment of the worker's previous employment history**
 - B. Evaluation of the worker's inability to perform work duties due to the injury for a temporary period**
 - C. Reviewing medical treatment effectiveness over time**
 - D. Determining whether the worker can perform any type of work**

- 2. How does a QME ensure objectivity in their assessments?**
 - A. By discussing concerns with peers before writing reports**
 - B. By maintaining independence from financial relationships with involved parties**
 - C. By accepting all referrals from a single insurer**
 - D. By utilizing only one method of evaluation**

- 3. Which of the following disclosures could lead to the issuance of a replacement QME panel?**
 - A. Change of address of the injured worker**
 - B. Injury severity increased**
 - C. Claims administrator requested it**
 - D. Final decision was rendered by the WCALJ**

- 4. What is the minimum time frame in which QMEs must notify the medical director of their unavailability?**
 - A. At least 15 days**
 - B. At least 30 days**
 - C. At least 60 days**
 - D. At least 90 days**

- 5. How many days before providing information to the evaluator must a party serve that information on the opposing party?**
 - A. 10 days**
 - B. 20 days**
 - C. 30 days**
 - D. 5 days**

- 6. Which term refers to a lasting impairment from a workplace injury that affects an employee's work ability?**
- A. Temporary disability**
 - B. Permanent disability**
 - C. Occupational hazard**
 - D. Work-related injury**
- 7. What is required for an injury to be considered for compensation regarding psychiatric claims?**
- A. The sole cause must be employment-related**
 - B. Injury must involve difficult personal circumstances**
 - C. Injury must be the result of sudden and extraordinary events of employment**
 - D. The employee must have had prior warning of the injury**
- 8. Who has the first right to request a QME examination?**
- A. The employer**
 - B. Claims administrator**
 - C. Injured worker regardless of representation**
 - D. The insurance company handling the claim**
- 9. Who has the authority to appoint physicians as Qualified Medical Evaluators (QME)?**
- A. Administrative Coordinator**
 - B. Administrative Director**
 - C. Medical Review Board**
 - D. Practice Management Committee**
- 10. What does 'reasonable medical probability' refer to in workers' compensation?**
- A. The opinion of a single physician on causation**
 - B. A standard requiring absolute certainty of injury causation**
 - C. A combination of medical knowledge and the worker's history to determine causation**
 - D. A financial prediction of future medical expenses**

Answers

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1. B
2. B
3. A
4. B
5. B
6. B
7. C
8. C
9. B
10. C

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Explanations

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1. What is the standard for determining a worker's temporary disability?

- A. Assessment of the worker's previous employment history**
- B. Evaluation of the worker's inability to perform work duties due to the injury for a temporary period**
- C. Reviewing medical treatment effectiveness over time**
- D. Determining whether the worker can perform any type of work**

The standard for determining a worker's temporary disability is primarily focused on evaluating the worker's inability to perform work duties due to an injury for a temporary period. This assessment is critical because it directly relates to the worker's capacity to work in their specific job or any job for a certain time frame as they recover from their injury. In the context of temporary disability benefits, this standard ensures that workers receive compensation during the time they are unable to earn wages due to their condition. The evaluation often involves medical assessments, which determine the extent of the injury and its impact on the worker's ability to fulfill their job responsibilities. By concentrating on the direct relationship between the injury and the work capabilities, this approach aligns with workers' compensation laws, which are designed to provide financial support to injured workers during their recovery process.

2. How does a QME ensure objectivity in their assessments?

- A. By discussing concerns with peers before writing reports**
- B. By maintaining independence from financial relationships with involved parties**
- C. By accepting all referrals from a single insurer**
- D. By utilizing only one method of evaluation**

The correct approach for a Qualified Medical Evaluator (QME) to ensure objectivity in their assessments is by maintaining independence from financial relationships with involved parties. This independence is crucial because financial incentives can create biases that influence the evaluation process. If a QME has a financial relationship with a party involved in the case, their impartiality may be compromised, which would cast doubt on the validity of their findings and conclusions. By remaining independent, the QME can objectively assess the medical conditions and disabilities of the individual without outside pressure or financial motivations impacting their judgment. This adherence to professionalism and ethical standards is fundamental to the role of a QME, as it helps uphold the integrity of the evaluation process and ensures that results are based solely on clinical evidence and thorough analysis. The other options do not foster objectivity in the same crucial way. Discussing concerns with peers can be beneficial for professional development but does not directly enhance the objectivity of the assessment itself. Accepting all referrals from a single insurer could create a dependency that risks impartiality, while utilizing only one method of evaluation limits the comprehensiveness of the assessment and may not capture the full picture of the individual's medical issues.

3. Which of the following disclosures could lead to the issuance of a replacement QME panel?

- A. Change of address of the injured worker**
- B. Injury severity increased**
- C. Claims administrator requested it**
- D. Final decision was rendered by the WCALJ**

A change of address for the injured worker can indeed lead to the issuance of a replacement QME panel. This is because the workers' compensation system involves specific procedural requirements that can be influenced by the geographic location of the injured worker. When the address changes, it may affect the selection or availability of qualified evaluators who are geographically appropriate to perform the evaluation. In the context of the workers' compensation system, the QME process is designed to ensure that evaluations are conducted fairly and that parties involved have reasonable access to their evaluators. If an injured worker moves, it could potentially impact the validity of the panel that was previously issued, leading to the need for a replacement to ensure compliance with statutory and regulatory mandates. Other potential choices, while they hold importance in different contexts, do not typically trigger the need for a new QME panel in the same way that a change of address does. For example, whether the severity of an injury has increased or if a claims administrator has requested a change does not, by themselves, necessitate the issuance of a new panel. Similarly, a final decision from the Workers' Compensation Appeals Law Judge (WCALJ) is an endpoint in the claims process and does not relate directly to the issuance of a new Q

4. What is the minimum time frame in which QMEs must notify the medical director of their unavailability?

- A. At least 15 days**
- B. At least 30 days**
- C. At least 60 days**
- D. At least 90 days**

The minimum time frame for Qualified Medical Evaluators (QMEs) to notify the medical director of their unavailability is at least 30 days. This requirement ensures that there is adequate notice for scheduling purposes, allowing the medical director to arrange for alternative evaluators if needed and minimize disruptions in the evaluation process. This policy helps maintain the efficiency and integrity of the medical evaluation system by ensuring that all parties involved have sufficient time to manage their schedules and obligations effectively. The rule also reflects the importance of timely communication in the operational logistics of medical evaluations, which is crucial in maintaining the flow of the Workers' Compensation system.

5. How many days before providing information to the evaluator must a party serve that information on the opposing party?

- A. 10 days
- B. 20 days**
- C. 30 days
- D. 5 days

The requirement for serving information to the opposing party before providing it to the evaluator is set to ensure that both parties have a fair chance to review and respond to the information being presented. According to the regulations governing the Qualified Medical Evaluator process, a party must serve the opposing party with any information they intend to present to the evaluator at least 20 days in advance. This timeline promotes transparency and allows adequate time for the opposing party to prepare their arguments or counterarguments, contributing to a more equitable evaluation process. The other options do not satisfy the minimum advance notice required by the regulations, making them unsuitable for ensuring fairness and thorough preparation in the evaluation process. Hence, the correct answer is based on adherence to established guidelines aimed at maintaining procedural integrity.

6. Which term refers to a lasting impairment from a workplace injury that affects an employee's work ability?

- A. Temporary disability
- B. Permanent disability**
- C. Occupational hazard
- D. Work-related injury

The term that refers to a lasting impairment from a workplace injury that affects an employee's work ability is permanent disability. This condition indicates that the worker has sustained a permanent reduction in their ability to perform work-related tasks due to an injury or illness incurred in the course of employment. Permanent disability can impact an individual's capacity to return to their previous role or any other work, affecting their earning potential and quality of life. It is important in the context of workers' compensation as it often leads to different benefits and considerations than temporary conditions or disabilities. In contrast, the other options represent different concepts. Temporary disability refers to a short-term condition where an employee cannot work but is expected to recover fully and return to their job. Occupational hazard signifies a risk inherent to a particular job or profession that could lead to injury or illness. A work-related injury describes injuries that happen at work, but it does not specify the lasting effects or permanent nature of the impairment.

7. What is required for an injury to be considered for compensation regarding psychiatric claims?
- A. The sole cause must be employment-related
 - B. Injury must involve difficult personal circumstances
 - C. Injury must be the result of sudden and extraordinary events of employment**
 - D. The employee must have had prior warning of the injury

The requirement for an injury to be considered for compensation regarding psychiatric claims is that the injury must be the result of sudden and extraordinary events of employment. This understanding is rooted in the legal framework governing workers' compensation, which typically requires a distinct and clear causal link between the employment circumstances and the psychological injury sustained. In the context of psychiatric claims, the nature of the event is critical; it should be an unexpected and significant occurrence in the workplace, such as a traumatic incident, which clearly distinguishes it from ordinary workplace stressors. This specificity helps ensure that only those psychological injuries that can be tied to acute and unexpected workplace conditions are eligible for compensation, thereby preventing the system from being overwhelmed by claims that do not meet the necessary criteria for severity or direct impact on the job. Other options do not accurately reflect the requirements set forth for compensation in these scenarios. For instance, claiming that the sole cause must be employment-related overlooks the reality that multiple factors can influence mental health, while difficult personal circumstances or prior warnings do not necessarily correlate with the qualifying criteria for a compensable psychiatric injury.

8. Who has the first right to request a QME examination?
- A. The employer
 - B. Claims administrator
 - C. Injured worker regardless of representation**
 - D. The insurance company handling the claim

The correct choice indicates that the injured worker holds the first right to request a Qualified Medical Evaluator (QME) examination. This principle is grounded in the rights of injured workers under California's workers' compensation system, which is designed to ensure that employees who have sustained work-related injuries have equitable access to medical evaluations. When an injured worker feels that their medical condition necessitates an independent assessment, they can formally request a QME examination regardless of whether they have legal representation or not. This empowers the worker to seek clarity and an objective medical opinion regarding their condition and the potential impact of their injury on their employment. Understanding this process underscores the importance of the injured worker's autonomy in the evaluation process, allowing them to advocate for their health and compensation without needing to rely solely on the employer or insurance entities. It also reflects the regulatory framework that is intended to balance the interests of both the injured worker and the employer while facilitating an unbiased and thorough assessment of the worker's medical issues related to their claims.

9. Who has the authority to appoint physicians as Qualified Medical Evaluators (QME)?

- A. Administrative Coordinator**
- B. Administrative Director**
- C. Medical Review Board**
- D. Practice Management Committee**

The authority to appoint physicians as Qualified Medical Evaluators (QME) lies with the Administrative Director. This position involves overseeing the appointment process to ensure that qualified physicians meet the necessary requirements and standards stipulated by regulatory frameworks. The Administrative Director plays a crucial role in maintaining the integrity of the QME system, ensuring that the evaluations carried out are both fair and compliant with established guidelines. In contrast, the other entities listed do not have the designated authority to make such appointments. The Administrative Coordinator typically handles administrative tasks and support functions rather than appointment decisions. The Medical Review Board generally engages in oversight or review functions concerning medical evaluations but does not have the power to appoint QMEs. The Practice Management Committee focuses on managing and guiding practice operations but is not involved in the regulatory appointments of QMEs. This delineation of roles underscores the importance of the Administrative Director in this specific context.

10. What does 'reasonable medical probability' refer to in workers' compensation?

- A. The opinion of a single physician on causation**
- B. A standard requiring absolute certainty of injury causation**
- C. A combination of medical knowledge and the worker's history to determine causation**
- D. A financial prediction of future medical expenses**

The term 'reasonable medical probability' in the context of workers' compensation refers to a combination of medical knowledge and the worker's history to determine causation. This standard is vital in evaluating claims, as it assists in establishing a connection between the worker's injury and their employment. It emphasizes the need for a sound basis in medical fact and the use of available evidence from the worker's medical history, rather than relying solely on the opinion of a single physician or requiring absolute certainty regarding causation. In the decision-making process, it helps ensure that the conclusions drawn are not merely speculative but grounded in a reasonable understanding of the facts presented, thus allowing for better judgment regarding the legitimacy of the claim. This balance reflects both the complexities of medical interpretations and the necessity for thorough, fact-based evaluations in workers' compensation cases.

Next Steps

Congratulations on reaching the final section of this guide. You've taken a meaningful step toward passing your certification exam and advancing your career.

As you continue preparing, remember that consistent practice, review, and self-reflection are key to success. Make time to revisit difficult topics, simulate exam conditions, and track your progress along the way.

If you need help, have suggestions, or want to share feedback, we'd love to hear from you. Reach out to our team at hello@examzify.com.

Or visit your dedicated course page for more study tools and resources:

<https://qualifiedmedicaleval.examzify.com>

We wish you the very best on your exam journey. You've got this!

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