

Medical Provider Network (MPN) Notification

If you are injured at work, California Law requires your employer to provide and pay for medical treatment. Your employer will provide this medical care through a Workers' Compensation Medical Provider Network (MPN). This document includes frequently asked questions about the program and your rights in choosing treatment for work-related injuries and illnesses.

1. What is a Medical Provider Network (MPN)?

A Medical Provider Network is a group of health care providers (physicians and other types of providers) that will manage and direct any *medical* care you receive if you are injured at work. The MPN also includes ancillary providers including a pharmacy network and durable medical equipment providers. The providers in the MPN specialize in work related injuries and illnesses and meet California required access to care standards.

The California Division of Workers' Compensation (DWC) MPN access to care standards require that an MPN plan provide at least three physicians of each specialty expected to treat workers compensation injuries; has primary treating providers within 15 miles or 30 minutes and specialty care providers within 30 miles or 60 minutes from either your work or residence; and that an injured employee will be able to get an appointment for non-emergency services within three business days and for specialist services within 20 business days following the insurer's receipt of request for treatment.

Further, the regulations require MPN providers to use medical treatment guidelines adopted by the DWC in making any decisions related to medical care or treatment. This MPN plan complies with DWC requirements and in the event that you need medical care in connection with a workers compensation claim, it is likely that you will receive this care from providers within the MPN.

2. How do I find out which doctors, pharmacies or other medical providers are in the MPN?

There are several methods for locating MPN providers. You may:

- Log on to the website at: www.myWCinfo.com and click the "Find a Local Network Provider" link
- Contact your Case Manager (Claim or Medical)
- Contact the MPN Medical Access Assistant
- Contact your employer

The Travelers MPN Medical Access Assistant will be able to help you find available MPN providers and/or help if you are having trouble getting an appointment with an MPN provider. The MPN Medical Access Assistant is available from 7:00 a.m. to 8:00 p.m. Pacific time, Monday through Saturday at 800-287-9682.

If you come across any inaccuracies in a provider listing, please report the inaccuracies to the MPN Medical Access Assistant by calling 800-287-9682 or by email to CAMPN@travelers.com.

3. What happens if I get injured at work?

If you suffer a work-related injury or illness that is an emergency, either call 911 or go to the nearest emergency medical center. You should notify your employer as soon as possible following any emergency treatment. If your injury or illness is not an emergency, notify your employer that you have a work-related injury in a reasonable time following the date of injury. Your employer or insurer will arrange an initial appointment with a doctor within the MPN.

4. How do I choose a provider?

After your first visit with an MPN provider to treat your work-related injury or illness, you may either continue treatment with this doctor or choose another MPN provider that is appropriate to treat your injury. If needed, you may choose a specialist or ask the treating doctor to refer you to a specialist for treatment. If you need help in choosing an MPN doctor or have trouble getting an appointment

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with a doctor within the MPN, please contact your Case Manager (Claim or Medical) or the MPN Medical Access Assistant for help.

5. What if there are no providers in my area?

The MPN has providers available throughout the state of California. If you are unable to find an appropriate treating physician or specialist available in your area, please contact your Case Manager (Claim or Medical) or the MPN Medical Access Assistant for help; you may have the right to see a provider or specialist outside of the MPN in this case.

6. What if I am authorized by my employer to temporarily work or travel outside of the MPN geographic service area?

If your employer has authorized you to temporarily work or travel outside the MPN geographic service area and the need for non-emergency medical care arises, you may treat with a provider of your choice. You may also contact the MPN Medical Access Assistant or your Case Manager (Claim or Medical). You will be provided with a choice of three physicians who are outside of the MPN geographic service area for care. These providers will be selected by either your primary treating physician, who is participating in the MPN, or by the MPN Medical Access Assistant. **If your injury requires emergency care, call 911 or go to the nearest emergency medical treatment center.**

7. What if I decide to temporarily or permanently reside outside of the MPN geographic service area during my recovery?

If you are a former employee whose employer has ongoing workers compensation obligations and you permanently reside outside of the MPN geographic service area and the need for non-emergency medical care arises, you may treat with a provider of your choice. You may also contact your Case Manager (Claim or Medical) or the MPN Medical Access Assistant. You will be provided with a choice of three physicians who are outside of the MPN geographic service area to choose from for care. These providers will be selected by your primary treating physician, who is participating in the MPN, your Case Manager, or by the MPN Medical Access Assistant. **If your injury requires emergency care, call 911 or go to the nearest emergency medical treatment center.**

8. What if I am already being treated for a work-related injury before my MPN coverage begins?

If your current treating doctor is a member of this MPN program, then you may continue to treat with this doctor and your treatment will be provided under the MPN.

If your current treating doctor is either not a member of the MPN or is not allowed to become an MPN member, then you may be required to go to an MPN doctor for treatment. In the event you must go to a new MPN doctor you and your doctor will be sent an explanation letter. The MPN "Transfer of Care" policy describes what will happen if you are currently treating for a work-related injury with a physician who is not a member of the MPN. You can request a copy of the "Transfer of Care" policy from the MPN Medical Access Assistant or from your Case Manager (Claim or Medical).

You may be able to postpone the transfer of your care if your injury or illness meets any of the following conditions:

- (a) **Acute** - The treatment for your injury or illness is expected to be completed **within 90 days**.
- (b) **Serious chronic** - Your injury or illness is one that is serious in nature and persists without full cure or worsens **over 90 days** and requires ongoing treatment. Once it has been determined that you have a serious chronic condition, you may be allowed to continue treatment by your current physician for up to one year, until a safe transfer of care can be made. The one year period for the completion of treatment starts from the

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date you receive notification of the determination that you have a serious chronic condition.

- (c) **Terminal illness** - You have an **incurable or irreversible condition** that is likely to cause death within one year or less. If it is determined that you have such an illness, you will be allowed to treat with the current provider for the duration of the terminal illness.
- (d) **Pending surgery or other procedure** - You already have a surgery or other procedure that has been authorized by Travelers that will occur **within 180 days** of the MPN effective date.

If your care is going to be transferred into the MPN, you and your physician will be notified in writing. If you disagree with the decision to transfer your care into the MPN, you may ask your treating doctor for a report that states why you should be considered to be in one of the categories listed above. Your treating physician must respond to your request within **20 calendar days**. If your treating physician fails to issue the report, then the determination to transfer your care into the MPN shall apply.

If you or the MPN do not agree with your treating doctor's report, this dispute will be resolved according to Labor Code Section 4062. You must notify your Case Manager (Claim or Medical) if you disagree with this report. If your treating doctor agrees that your condition does not meet one of those listed above, the transfer of care will go forward while you continue to disagree with the decision. If your treating doctor states that your condition does meet one of those listed above, you may continue treatment with him or her until the dispute is resolved.

Until you are transferred into the MPN, your treating physician may make referrals for additional care to providers within or outside the MPN.

If your current treating doctor does become an MPN provider, then you and your provider will be notified in writing that your treatment will now be provided under the provisions of the MPN.

Employees who have **properly** pre-designated a personal physician will not be transferred into the MPN.

9. What if I am being treated by an MPN provider and the provider leaves the MPN?

If your physician stops participating in the MPN, your Case Manager (Claim or Medical) will advise you of your options for continued treatment based on the approved MPN "Continuity of Care Plan." Please contact your Case Manager (Claim or Medical) for questions on your options. A copy of the "Continuity of Care Plan" will be made available upon request.

If your provider is no longer in the MPN because the MPN terminated his or her contract for issues relating to medical disciplinary cause or reason, fraud, or criminal activity, you will not be allowed to continue treatment with that provider, and you will be required to choose a provider within the MPN.

If your provider has been terminated for another reason, the MPN will contact you and your provider in order to determine rights and responsibilities to complete treatment with the terminated provider. If you have one of the following conditions, you may qualify to continue treating with your treating provider even though the provider has terminated the MPN:

- (a) **Acute** - The treatment for your injury or illness is expected to be completed within 90 days.
- (b) **Serious chronic** - Your injury or illness is one that is serious in nature and persists without full cure or worsens over 90 days and requires ongoing treatment. Once it has been determined that you have a serious chronic condition, you may be allowed to continue treatment by your current physician for up to one year, until a safe transfer of care can be made. Completion of treatment shall not exceed 12 months from the contract's termination date.
- (c) **Terminal illness** - You have an incurable or irreversible condition that is likely to cause death within one year or less. If it is determined that you have such an illness, you will be allowed to treat with the current provider for the duration of the terminal illness.

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- (d) **Pending surgery or other procedure** - You already have a surgery or other procedure that has been authorized by Travelers that will occur within 180 days of the contract's termination date.

If you qualify under one of the above listed treatment conditions and request to continue to treat with the terminated provider, the MPN will contact the provider to affirm the provider's willingness and capability to continue treatment under the same contractual terms and conditions that existed prior to termination. If the provider is unwilling or incapable of continuing treatment, the MPN will advise you to seek treatment from another provider within the network. In such circumstances, the MPN will not be obligated to authorize continued services beyond the contract termination date, and will communicate the timeframe with the terminated provider.

If you have chosen to continue treatment with a terminated provider and the provider has agreed to continue to treat, the MPN will be responsible for payment of completion of the medically necessary treatment. The MPN will not be responsible for unauthorized treatment.

If you choose not to continue with the terminated provider, you will be advised of how to choose a new provider within the MPN.

If the MPN has determined that no further treatment will be authorized with the terminated physician and you disagree, you may ask your treating doctor for a report that addresses whether you have one of the conditions listed above. Your treating physician must respond to your request **within 20 calendar days**. If your treating physician fails to issue the report, then the determination made by the MPN shall apply.

If either you or the MPN do not agree with your treating doctor's report, this dispute will be resolved according to Labor Code Section 4062. If your treating doctor agrees that your condition does not meet one of those medical conditions listed above, you will choose a new provider from within the MPN until the dispute is resolved. If the treating physician does not agree with the MPN's determination that you do not meet one of the medical conditions listed above, you will continue treatment with the terminated provider until the dispute is resolved.

10. What if I disagree with my doctor about medical treatment?

If you disagree with either the diagnosis or treatment prescribed by your provider, you may ask for a second opinion from another doctor within the MPN. If you want a second opinion, you must contact your Case Manager (Claim or Medical) either orally or in writing to tell them you want a **second opinion**. Your Case Manager (Claim or Medical) will make sure that you have a regional area listing of MPN providers, based on the specialty or recognized expertise in treating the particular injury or condition in question, for you to choose from. Then, you may choose a doctor from the MPN list, make an appointment **within 60 days** of receipt of the list, and notify your Case Manager (Claim or Medical) of your appointment date. If you do not make an appointment **within 60 days** of receipt of the list of MPN providers, you will not be allowed to have a second opinion with regard to this disputed diagnosis or treatment.

Upon notification of the appointment date, your Case Manager (Claim or Medical) will contact the physician selected to perform the second opinion, inform them of the nature of the dispute and their role, and provide them with any necessary medical records needed for their review. You may request a copy of the medical records that are sent to the second opinion provider. If the second opinion provider that you chose feels that your injury or illness is outside the type of injury or illness he or she normally treats, the provider's office will notify your Case Manager (Claim or Medical) and you will receive an additional list of MPN providers from which to make your selection. During this process, you will be required to continue treatment with your treating physician or with another physician of your choice within the MPN.

After you receive the outcome of the second opinion, if you still disagree with the diagnosis or treatment, you may seek a **third opinion** from another appropriate MPN provider. If you want to obtain a third opinion, you must contact your Claim Case Manager (either orally or in writing) and tell them you want a third opinion. Your Claim Case Manager will make sure that you have a

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regional area listing of MPN providers, based on the specialty or recognized expertise in treating the particular injury or condition in question, for you to choose from. Then you may choose a doctor from the MPN list, make an appointment **within 60 days** of receipt of the list and notify your Claim Case Manager of your appointment date. If you do not make an appointment within 60 days of receipt of the list of MPN providers, you will not be allowed to have a third opinion with regard to this disputed diagnosis or treatment. During this process, you will be required to continue treatment with your treating physician or with another physician of your choice within the MPN.

Upon notification of the appointment date, your Claim Case Manager will contact the physician selected to perform the third opinion, inform them of the nature of the dispute and their role and provide them with any necessary medical records needed for their review. You may request a copy of the medical records that are sent to the third opinion provider. If the third opinion provider that you chose feels that your injury or illness is outside the type of injury or illness he or she normally treats, the provider's office will notify your Claim Case Manager and you will receive a new list of MPN providers from which to make another selection.

You may obtain any recommended treatment indicated by the second and/or third opinion physician(s) by either changing physicians to the second opinion physician, third opinion physician, or other physician within the MPN.

If upon receipt of a third opinion, you still disagree with your provider's diagnosis or treatment of your illness or injury, you may ask for an **Independent Medical Review (IMR)**. Your Claim Case Manager will have given you the information on requesting an IMR and provided you with the IMR Application at the time you requested a third opinion.

An IMR will be performed by a provider who will be selected by the DWC Administrative Director based upon the specialty of the treating provider and other information submitted with the IMR Application. If the IMR provider agrees with the treating physician, you will be required to continue to receive medical treatment from within the MPN. If the IMR provider does not agree with your treating provider's diagnosis or treatment of your illness or injury, you can receive treatment from either an MPN provider or a non-MPN provider. If you choose a provider that is outside of the MPN, the treatment you receive from that provider can only be for the treatment or diagnostic service recommended by the IMR provider. Once any treatment provided to you related to the disputed diagnosis or treatment is completed, you must seek any further care from an MPN provider.

11. What if I have a prescription I need to fill?

The Travelers MPN includes pharmacies as well as doctors. If your MPN treating physician prescribes a medication, you must obtain your prescriptions through a network pharmacy. Healthsystems®, our Pharmacy Benefit Manager, will electronically process your prescription with no out-of-pocket expense to you. To access a complete listing of MPN pharmacies, please log on to www.mywcinfo.com and click on the "Find a Network Provider" link.

You can also visit the Healthsystems website at www.healthsystems.com. If you need assistance finding an MPN pharmacy, please contact your Case Manager (Claim or Medical) or the MPN Medical Access Assistant.

To assist you and the pharmacists with processing your medication online you will need the following:

- **Member ID (Claim Number + TRV)**
- **Bin Number – 012874**
- **Healthsystems Pharmacy Help desk: 877-528-9497**

If you have questions or concerns regarding your pharmacy benefits, please contact your case manager (Claim or Medical).

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12. What if I have questions or need help understanding the MPN?

You may always contact your Case Manager or the MPN Medical Access Assistant if you need help or further explanation about your medical treatment. **The MPN Medical Access Assistant can be reached at 800-287-9682.**

DWC Information & Assistance Officer: If you have concerns, complaints or questions regarding the MPN, the notification process, or your medical treatment of a work-related injury or illness, you can call the **Information and Assistance Officer at the Division of Workers' Compensation at 800-736-7401.**

Independent Medical Review: If you have questions about the Independent Medical Review process or the Independent Medical Reviewer, you may contact the Division of Workers' Compensation's Medical Unit at:

Division of Workers' Compensation's Medical Unit

P.O. Box 71010

Oakland, CA 94612

510-286-3700 or 800-794-6900

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MPN Log#	Underwriting co./Carrier/Self-insured	MPN
0180	ACE American Insurance Company	TCT MPN
0173	American Guarantee & Liability Insurance Company	TCT CA MPN
0483	American Home Assurance Company	TCT CA MPN
0438	American Zurich Insurance Company	TCT CA MPN
0257	Athena Assurance Company	TCT CA MPN
0259	Discover Property & Casualty Insurance Company	TCT CA MPN
0245	Farmington Casualty Company	TCT CA MPN
0260	Fidelity & Guaranty Insurance Company	TCT CA MPN
0261	Fidelity & Guaranty Insurance Underwriters, Inc	TCT CA MPN
0376	Masco Corporation	TCT CA MPN
0237	NIPPONCOA Insurance Company, LTD (US Branch)	TCT CA MPN
0177	Old Republic Insurance Company	TCT CA MPN
0254	St. Paul Fire and Marine Insurance Company	TCT CA MPN
0256	St. Paul Guardian Insurance Company	TCT CA MPN
0255	St. Paul Mercury Insurance Company	TCT CA MPN
0263	St. Paul Protective Insurance Company	TCT CA MPN
0522	The Insurance Company of the State of Pennsylvania	TCT CA MPN
1713	THE PEP Boys Manny, Moe and Jack of California	TCT CA MPN
0241	The Standard Fire Insurance Company (FH)	TCT CA MPN
0233	The Travelers Indemnity Company of Connecticut	TCT CA MPN
0239	Travelers Casualty & Surety Company	TCT CA MPN
0247	Travelers Casualty & Surety Company of America	TCT CA MPN
0251	Travelers Casualty Company of Connecticut	TCT CA MPN
0243	Travelers Casualty Insurance Company of America	TCT CA MPN
0235	Travelers Property Casualty Company of America	TCT CA MPN
0174	Zurich American Insurance Company	TCT CA MPN

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ACKNOWLEDGEMENT OF RECEIPT OF MPN INFORMATION

I acknowledge that I have received information regarding my employer's use of a Medical Provider Network for Workers' Compensation claims.

Employee's Name (please print)

Employee's Signature

Today's Date

Employee: Please return this form to your employer

Employer: Please place in Employee's Personnel file