**The Hartford’s California Workers’ Compensation Medical Provider Network (MPN)**

Accessing Anthem Blue Cross Prudent Buyer PPO

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**Employer Notification Guide**

Topics Covered are:

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The Hartford’s California Workers’ Compensation
Medical Provider Network (MPN)

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The Hartford’s California Workers’ Compensation Certified Medical Provider Network (MPN)

Workplace injuries can be costly to your business through direct and hidden costs, including medical expenses, lost wages, lost productivity, and decreased workplace morale. The Hartford’s California Workers’ Compensation Medical Provider Network (MPN) in collaboration with our in-house Nurse Case Managers aims to help alleviate these effects by managing all aspects of your workers’ compensation program.

Workers’ Compensation Medical Provider Networks in CA

In 2004, California passed Senate Bill 899, which allows employers or insurers on or after Jan. 1, 2005 to establish medical provider networks to treat injured employees for workers compensation. Then, the California passed Senate Bill 863, and effective 8/27/14, the network must meet certain standards. Effective 8/27/2014, the California Office of Administrative Law adopted the CA Division of Workers’ Compensation’s (DWC) new MPN regulations (SB863). Among the changes DWC noted:

- Unique MPN Identification numbers to be assigned to each MPN in order to identify a specific MPN.
- The introduction of regulatory standards that MPN Medical Access Assistants must meet to assist injured workers to find and schedule medical appointment with MPN physicians.
- Clarified access standards that require MPNs to have at least 3 available physicians from which an injured worker can choose, and a written policy permitting out-of-network treatment if the time and location access standards are not met.
- New physician acknowledgment requirements to ensure that physicians in the MPN have affirmatively elected to be a member of the network, and a streamlined process for obtaining acknowledgments from medical groups.
- A requirement that MPNs be approved for four years and procedural timelines for re-approvals.
- The adoption of a formal process for filing MPN complaints.

These include accessibility of care for common occupational injuries and illness, types of providers, continuity of care, medical decision making, and following treatment guidelines. The standards must also include a process for allowing employees a choice of provider in the network (after the first visit) and for getting second and third opinions. If an employer or insurer uses an approved medical provider network, covered employees would receive their medical care in this network, unless a predesignated physician is chosen prior to an injury. Medical provider networks must be approved by DWC before they can be used.

New MPN Employee Notification Documents and Processes

- MPN Employee Notifications are only required at time of injury or when the injury is reported.
- MPN Employee Notifications also required when transferring claims into a MPN.
- MPN Employee Notices for initial roll out and employee time of hire are **NO LONGER REQUIRED**.
- All California Employers are still required to adhere to California Regulations pertaining to the DWC-7 posting, Time of Hire Pamphlets, and Pre-designation Forms.
How It Works
The Hartford has filed state-certified MPN filed on behalf of all employers covered by a Hartford workers compensation policy, with the CA Department of Workers’ Compensation. This allows the employer/carer to direct employees to the network for medical care and workers’ compensation services. Our network, accessing Anthem Blue Cross, links medical management, treatment recommendation reviews, and disability management to provide the most appropriate care for your injured employees and get them back to work quickly and as safely as possible.

In most cases, an employee who has suffered a work-related injury or illness must select a “primary treating physician” or PTP from among the network’s participating providers. The “PTP” coordinates the medical treatment plan and manages overall medical care, including referrals to network specialists and facilities. A nurse case manager may be assigned to medically manage the claim using information technology such as online treatment protocols, disability duration guidelines, and a directory of jurisdictional requirements. As a claim moves forward, the nurse case manager exchanges medical information with The Hartford’s claim handler, who manages all other aspects of the claim. Once the injured worker improves to the point where he or she is capable of productive activity, the nurse case manager or claim handler can assist you in finding suitable work for the recovering employee. This integrated approach enables more effective resolution of claims and a more timely return to work.

The Employer’s Role
Every employee must have access to a copy of the Complete Written MPN Employee Notifications at the time of injury or when the injury is reported, and when you are transferring a claim into the MPN. Finally, as part of each injured worker’s recovery process, the employer helps develop a program to bring the employee back to work as quickly and safely as possible.

Step 1
Supply a copy of the “Locating Preferred Providers” document (attached) in this guide to any employee who asks about the providers in the network. We have a group called the Network Referral Unit (NRU) that is dedicated to locating medical providers, as well as online tools available to our employers and their employees. Our online provider search tool, available at www.talispoint.com/htfd/external, allows you to search by the employee’s address to ensure you find providers local to the employee’s home. You may also contact the local claim office for assistance.

Step 2
Going forward, provide a copy of the Complete Written MPN Employee Notification to any employee who is injured on the job. The Hartford sends this information out to the injured worker as well once we receive notice of the claim.

Step 3
Report any workplace injuries to The Hartford at 1.800.327.3636, prompt 4, as soon as possible.
Dealing with Workplace Injuries

☐ In a medical emergency, get the employee to the nearest emergency care facility as quickly as possible.

☐ Provide a second copy of the Complete Written MPN Employee Notification and advise the employee of his or her rights and responsibilities.

☐ After emergency care is provided, or if no emergency care is needed, direct the injured employee to a network physician by referring them to the list of participating network providers, or your designated clinic. You can obtain an updated list at www.talispoint.com/htfd/external, or by calling The Hartford’s Network Referral Unit at 1-800-327-3636, prompt 4. You may also contact a Medical Access Assistant at the toll-free telephone number of 855-299-7830.

☐ As soon as you learn about a work-related injury or illness, report the claim to The Hartford’s Loss Connect at 1.800.327.3636.

Employee Rights and Responsibilities

All injured employees who have been notified of the network must seek medical care with network providers, unless the employer has a valid predesignation form on file for the employee. In most cases, this includes workers who are already receiving treatment for a work-related injury. Employees who seek care outside the network may be required to pay for those services themselves. Some exceptions to these requirements are detailed in the next section, as well as the Complete Written MPN Employee Notification.

Predesignation of Personal Physician

Predesignation of a Personal Physician is an employee’s right, and a way to opt out of treating with providers in the MPN. To predesignate a personal physician an employee must meet certain criteria and return the completed form to the employer prior to an injury. Please refer to the Predesignation form in the Complete Written MPN Employee Notification for more information. The employer has no responsibility to follow up on or collect these forms as it is an employee choice.

Information and Assistance

The state DWC Information and Assistance Unit provides information and assistance to employees, employers, labor unions, insurance carriers, physicians, attorneys and other interested parties concerning rights, benefits and obligations under California's workers' compensation laws. The unit plays a major role in reducing litigation before the Workers' Compensation Appeals Board.

Network Providers/Access Standards

Attachment A, Locating Preferred Providers, of the Complete Written MPN Employee Notification provides information on how to access the most current listing of network providers. After the initial visit, employees may change physicians within the MPN at any time as long as the provider is appropriate to treat the injury.

MPN Medical Access Assistants (“MAAs”) are available, at a minimum, from Monday through Saturday (excluding Sundays and holidays) from 7 am to 8 pm, Pacific Time, to provide covered employee assistance with access to medical care under the MPN. The assistance includes but is not
limited to contacting provider offices during regular business hours to find available MPN physicians of your choice, and scheduling and confirming physician medical appointments. Assistance is available in English and Spanish.

At least one MPN medical access assistant is available to respond at all required times, with the ability for callers to leave a voice message. Medical access assistants will respond to calls, faxes or messages by the next day, excluding Sundays and holidays. MAAs work in coordination with the MPN Contact and the claims adjuster(s) to ensure timely and appropriate medical treatment is available to you. The injured worker may contact the Medical Access Assistant at: 1) toll-free telephone number 855-299-7830, 2) email at thehartfordmaa@anthemwc.com, or 3) toll-free fax number at 855-273-6839. The injured worker should contact the Medical Access Assistant if he or she is having trouble getting an appointment with a provider within the MPN.

The MPN has primary treating providers available within 15 miles or 30 minutes; or, specialty care providers within 30 miles or 60 minutes from your place of business or employee’s residence. If an injured worker’s primary treating physician refers them to a specialist type that is not available within the MPN, he/she shall be able to select a specialist outside of the MPN. If there is not a particular specialist available within the MPN in the area, please contact the MAA or MPN Contact. If an employee is injured while traveling outside of CA, contact The Hartford’s Network Referral Unit at 1-800-327-3636, prompt 4, and we will assist in locating providers.

Pharmacy benefits are provided through the use of The Hartford’s Pharmacy Benefit Management vendor statewide with access and coordination performed by claim handlers.

Translation services and transportation services are provided through the use of The Hartford’s translation vendors and transportation vendors with access and coordination completely performed by claim handlers.

Durable medical equipment services are provided through the use of The Hartford’s durable medical equipment vendors statewide with access and coordination completely performed by claim handlers.

Radiology / diagnostic services are provided through the use of radiology /diagnostic vendor statewide with access and coordination performed by claim handlers.

Physical therapy services are provided through the use of physical therapy vendor statewide with access and coordination performed by claim handlers.

**Utilization Review**

Certain treatment recommendations are subject to Utilization Review. Utilization review (UR) is the process used by employers or claims administrators to review treatment to determine if it is medically necessary. All employers or their workers’ compensation claims administrators are required by law to have a UR program. This program is used to decide whether or not to approve medical treatment recommended by a physician based on medical appropriateness. Requests for treatment will be coordinated by the primary treating physician, nurse case manager, and claim handler.
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It is important to understand that within the UR process, the insurance carrier makes no decisions to deny treatment requested. The requests are sent to an independent third-party doctor who does a “peer review” of the PTP’s request, in addition to a comprehensive review of the patient’s medical history, and makes a decision based on the treatment guidelines set forth by the state. If an employee is unsure whether a treatment/procedure has been reviewed and approved he/she should contact the assigned adjuster or nurse.

Returning the Employee to Work
If the employee’s injury or illness results in time out of work, the nurse case manager or claim handler will contact you to discuss the employee’s specific job duties. This may result in the development of a modified or alternate job description. The nurse case manager or claim handler will coordinate with the primary treating physician in order to recommend a return-to-work plan based upon the employee’s progress.

Complaints
An injured employee who is dissatisfied with the network’s service or care may file a complaint with the network by mail, e-mail, or telephone. Complaints can be submitted to the MPN Contact below:

Medical Management Leader
12009 Foundation Place
Rancho Cordova, CA  95670
Toll Free Phone # (866) 401.9222 ext. 2304195
Email Box: CAMPN.Claim@thehartford.com
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Locating Preferred Providers
Best Outcomes for Your Business

The Hartford is ready to help you locate the appropriate medical providers in your area who are experienced in treating occupational injuries. You can obtain medical provider information for your employees in several ways.

Toll-Free Access to Network Healthcare Provider Information and Participating Pharmacies -
A listing of conveniently located healthcare providers and participating pharmacies is readily available.

- Internet Access- Online Medical Provider Search Tool -
  Go to www.talispoint.com/htfd/external.

- Mileage search will allow you to find the nearest type of provider selected based on the address you provide.

- Name search will allow you determine if a particular provider is in-network by searching for their name, phone number, etc.

- Simply call our toll free number (1-800-327-3636, prompt 4) and provide the address of your work location or employee’s home address.

- Network Referral Unit staff are ready to serve you Monday through Friday 7:00 am – 5:00 pm CST.

Contact the Local Claim Office and Speak with a Claim Administrator
Western WC Claim Center: 866-401-9222

For assistance with contacting provider offices during regular business hours to find available MPN physicians of your choice, and scheduling and confirming physician medical appointments, Medical Access Assistants are ready to serve you from Monday through Friday 7 am – 8 pm PT (excluding Sunday and holidays). Simply call the MAA toll-free number:

1) toll-free telephone number 855-299-7830, or
2) e-mail at thehartfordmaa@anthemwc.com, or
3) toll-free fax number at 855-273-6839.