

Complete Written Employee Notification PRISM MPN

MPN Identification Number:

CareWorks Managed Care Services, Inc.

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Rancho Cucamonga, CA 91730
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Fax: (888) 620-6921
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Access to Medical Care

This brochure contains important information on how to access the PRISM MPN:

- Find out if you are covered
- Access medical care
- Learn about continuity of care
- Choose your own physician
- Transfer into the PRISM MPN
- Contact PRISM MPN



Welcome to PRISM MPN

Your employer has elected to provide you with the choice of a broad scope of medical services for work-related injuries and illnesses by implementing a Medical Provider Network (MPN), called PRISM MPN. PRISM MPN delivers quality medical care through your choice of a provider who is part of an exclusive network of healthcare providers, each of whom possess a deep understanding of the California workers' compensation system and the impact their decisions have on you. Your employer has received the approval from the State of California to cover your workers' compensation medical care needs through the PRISM MPN. You are automatically covered by the PRISM MPN if your date of injury or illness is on or after your employer's MPN implementation date and if you have not properly pre-designated a personal physician prior to your injury or illness.

Initial Care

In case of an emergency, you should call 911 or go to the closest emergency room.

If you are unable to reach your supervisor or employer, please contact Careworks Managed Care Services, Inc. For non-emergency services, the MPN must ensure that you are provided an appointment for initial treatment within 3 business days of your employer's or MPN receipt of request for treatment within the MPN.

Subsequent Care

If you still need treatment following your initial evaluation, you may be treated by a physician of your choice, or the initial physician may refer you to a medically and geographically appropriate specialist within the network who can provide the appropriate treatment for your injury or condition. Your employer is required to provide you with at least three physicians of each specialty expected to treat common injuries experienced by injured employees based on your occupation or industry. These physicians will be available within 30 minutes or 15 miles of your workplace or residence and specialists will be available within 60 minutes or 30 miles of your residence or workplace. For a directory of providers, please visit prismmpn.prismrisk.gov or call Careworks Managed Care Services, Inc. Patient Services.

Emergency Care

In an emergency, defined as a medical condition starting with the sudden onset of severe symptoms that without immediate medical attention could place your health in serious jeopardy, go to the nearest healthcare provider regardless of whether they are a PRISM MPN participant. If your injury is work-related, advise your emergency care provider to contact PRISM MPN to arrange for a transfer of your care to a PRISM MPN provider at the medically appropriate time.

Hospital and Specialty Care

Your primary treating provider in the PRISM MPN can make all of the necessary arrangements and referrals for specialists, inpatient hospital, outpatient surgery center services, and ancillary care services.

Choosing a Treating Physician

If you still require treatment after your initial evaluation with your employer's designated provider, you may access the PRISM MPN Directory and select an appropriate physician of your choice who can provide the necessary treatment for your condition or illness. For assistance determining physician options, please contact the Medical Access Assistant at Careworks Managed Care Services, Inc. or discuss your options with your initial care provider. Physicians who provide only

tele-health services will not be counted when determining if an MPN has met access standards, if the injured covered employee does not consent to see the tele-health physician. The physician, who provides only tele-health services or also provides services at a physical location and tele-health, will be counted when determining if an MPN has met access standards, if the injured covered employee consents to see the tele-health physician. The physician, who provides only tele-health services or also provides services at a physical location and tele-health, will not be counted when determining if an MPN has met access standards, if the injured covered employee retracts consent to received tele-health services prior to delivery of tele-health treatment. The physician who provides both physical location and tele-health services will be counted under the access standards if the physician's physical location is within the required access standards in accordance with 8 CCR §9767.5(a)(1) and (a)(2).

Changing Primary Treating Physician

If you find it necessary to change your treating physician and it is determined that you require ongoing medical care for your injury or illness, you may select a new physician from the PRISM MPN Directory and schedule an appointment. Once your appointment is scheduled, immediately contact Careworks Managed Care Services, Inc. Patient Services who will then coordinate the transfer of your medical records to your new provider.

Scheduling Appointments

If you are having difficulty scheduling an appointment with your initial provider or subsequent provider, please contact the Medical Access Assistant at Careworks Managed Care Services, Inc. or your Claims Examiner.

Obtaining a Specialist Referral

If you continue to require medical treatment for your injury or illness, there are alternatives for obtaining a referral to a specialist:

1. Your primary treating provider in the PRISM MPN can make all the necessary arrangements for referrals to a specialist. This referral will be made within the network or outside of the network if needed.
2. You may select an appropriate specialist by accessing the PRISM MPN Directory.
3. You may contact the Medical Access Assistants in the Careworks Managed Care Services, Inc. Patient Services who can help coordinate necessary arrangements.

If your primary treating provider makes a referral to a type of specialist not included in the network, you may select a specialist from outside the network. For non-emergency specialist services, the MPN must ensure that you are provided an appointment within 20 business days of your employer's or MPN receipt of a referral to a specialist within the MPN.

Continuity of Care

What if I am being treated by a PRISM MPN doctor and the doctor leaves PRISM MPN?

Your employer has a written "Continuity of Care" Policy that may allow you to continue treatment with your doctor if your doctor is no longer actively participating in PRISM MPN.

If you are being treated for a work-related injury in the PRISM MPN and your doctor no longer has a contract with PRISM MPN, your doctor may



be allowed to continue to treat you if your injury or illness meets one of the following conditions:

- **(Acute)** A medical condition that includes a sudden onset of symptoms that require prompt care and has a duration of less than 90 days.
- **(Serious or Chronic)** Your injury or illness is one that is serious and continues for at least 90 days without full cure or worsens and requires ongoing treatment. You may be allowed to be treated by your current treating doctor for up to one year, until a safe transfer of care can be made.
- **(Terminal)** You have an incurable illness or irreversible condition that is likely to cause death within one year or less.
- **(Pending Surgery)** You already have a surgery or other procedure that has been authorized by your employer or insurer that will occur within 180 days of the MPN contract termination date.

If any of the above conditions exist, PRISM MPN may require your doctor to agree in writing to the same terms he or she agreed to when he or she was a provider in the PRISM MPN. If the doctor does not, he or she may not be able to continue to treat you.

If the contract with your doctor was terminated or not renewed by PRISM MPN for reasons relating to medical disciplinary cause or reason, fraud or criminal activity, you will not be allowed to complete treatment with that doctor. For a complete copy of the Continuity of Care policy in English or Spanish, please visit prismmpn.prismrisk.gov or call Careworks Managed Care Services, Inc. Patient Services.

Transfer of Ongoing Care

What if you are already being treated for a work-related injury before the PRISM MPN begins?

Your employer has a "Transfer of Care" policy which describes what will happen if you are currently treating for a work-related injury with a physician who is not a member of the PRISM MPN.

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

If your current treating physician is not a participating physician within PRISM MPN and you have not yet been transferred into the MPN, your physician can make referrals to providers within or outside the MPN. Your current doctor may be allowed to become a member of PRISM MPN.

You will not be transferred to a doctor in PRISM MPN if your injury or illness meets any of the following conditions:

- **(Acute)** The treatment for your injury or illness will be completed in less than 90 days.
- **(Serious or Chronic)** Your injury or illness is one that is serious

and continues without full cure or worsens over 90 days. You may be allowed to be treated by your current treating doctor for up to one year from the date of receipt of the notification that you have a serious chronic condition.

- **(Terminal)** You have an incurable illness or irreversible condition that is likely to cause death within one year or less. Treatment will be provided for the duration of the terminal illness.
- **(Pending Surgery)** You already have a surgery or other procedure that has been authorized by your employer or insurer that will occur within 180 days of the MPN effective date.

For a complete copy of the Transfer of Care policy in English or Spanish, please visit prismmpn.prismrisk.gov or call Careworks Managed Care Services, Inc. Patient Services.

Care Disputes

Notice of determination, from the employer or claims examiner, shall be sent to the covered employee's address and a copy of the letter shall be sent to the covered employee's primary treating physician. The notification shall be written in English and Spanish and use layperson's terms to the maximum extent possible.

If PRISM MPN is going to transfer your care and you disagree, you may ask your treating doctor for a report that addresses whether you are in one of the categories listed above. Your treating physician shall provide a report to you within twenty calendar days of the request. If the treating physician fails to issue the report, then you will be required to select a new provider from within the MPN.

If either PRISM MPN or you do not agree with your treating doctor's report, this dispute will be resolved according to Labor Code Section 4062. You must notify Careworks Managed Care Services, Inc. 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 believes that your condition does meet one of those listed above, you may continue to treat with him or her until the dispute is resolved. For a complete copy of the Transfer of Care policy, please visit: prismmpn.prismrisk.gov or call Careworks Managed Care Services, Inc. Patient Services.

Second Opinion, Third Opinion and Independent Medical Review Process

If you disagree with your doctor or do not like your doctor for any reason, you may always choose another doctor in the MPN.

Obtaining Second and Third Opinions

If you disagree with the diagnosis or treatment plan determined by your treating physician or your second opinion physician, and would like a second or third opinion, you must take the following steps:

- Notify your claims examiner who will provide you with a regional area listing of physicians and/or specialists within the PRISM MPN who have the recognized expertise to evaluate or treat your injury or condition.
- Select a physician or specialist from the list.
- Within 60 days of receiving the list, schedule an appointment with your selected physician or specialist from the list provided by your claims examiner. Should you fail to schedule an appointment within 60 days, your right to seek another opinion will be waived.
- Inform your claims examiner of your selection and the appointment date so that we can ensure your medical records can be forwarded

in advance of your appointment date. You may also request a copy of your medical records.

- You will be provided information and a request form regarding the Independent Medical Review (IMR) process at the time you select a third opinion physician. Information about the IMR process can be found in the MPN Employee Handbook.

If the second/third opinion doctor feels that your injury is outside of the type of injury he or she normally treats, the doctor's office will notify your employer or insurer. You will get another list of MPN doctors or specialists so you can make another selection.



If the 2nd/3rd opinion doctor agrees with your need for a treatment or test, you may be allowed to receive that recommended treatment or test from a provider inside or outside the MPN, including the 2nd or 3rd opinion physician.

Obtaining an Independent Medical Review (IMR)

If you disagree with the diagnosis or treatment plan determined by the third opinion physician, you may file the completed MPN Independent Medical Review Application form with the Administrative Director of the Division of Workers' Compensation. You may contact your claims examiner or the Careworks Managed Care Services, Inc. medical access assistants for information about the Independent Medical Review process and the form to request an Independent Medical Review.

If the second opinion, third opinion or IMR agrees with your treating doctor, you will need to continue to receive medical treatment with a network physician if MPN contains a physician who can provide the recommended treatment. If the IMR does not agree with your treating network physician, you will be allowed to receive that medical treatment from a provider either inside or outside of the PRISM MPN.

Any physician chosen outside of the PRISM MPN must be within reasonable geographic area. The treatment or diagnostic test is limited to the recommendation of the MPN/IMR.

Treatment Outside of the Geographic Area

PRISM MPN has providers throughout California. If a situation arises which takes you out of the coverage area, such as temporary work, travel for work, or living temporarily or permanently outside the MPN geographic service area, please contact Careworks Managed Care Services, Inc., your claims examiner, or your primary treating provider, and they will provide you with a selection of at least 3 approved out-of- network providers from whom you can obtain treatment or get second and third opinions from the referred selection of physicians.

Covered Medical Services

The following is a summary of Workers' Compensation medical services that are available to employees covered by the PRISM MPN.

Primary Treating and Specialty Services including Consultations and Referrals

Examples of primary treating or specialty providers include general medical practitioners, chiropractors, dentists, orthopedists, surgeons, psychologists, internists, psychiatrists, cardiologists, neurologists.

Inpatient Hospital and Outpatient Surgery Center Services

Examples of inpatient hospital and outpatient surgery center providers include acute hospital services, general nursing care, operating room and related facilities, intensive care unit and services, diagnostic lab or x-ray services, necessary therapies.

Ancillary Care Services

Examples of ancillary care providers include: diagnostic lab or x-ray services, physical medicine, occupational therapy, medical and surgical equipment, counseling, nursing, medically appropriate home care, medication.

Emergency Services including Outpatient and Out of Area Emergency Care

Examples include outpatient and out-of-area emergency care.

PRISM MPN Provider Directory

For more information about the PRISM MPN including access to a roster of all treating physicians in the PRISM MPN, go to prismmpn.prismrisk.gov where you can search by medical specialty, zip code, physician or provider group. For website assistance or to access a hard copy of the regional area listing and/ or an electronic copy of the complete PRISM MPN directory, please contact Careworks Managed Care Services, Inc. (your employer's designated medical provider network administrator).

Tele-Health Option

PRISM MPN has also made available providers who provide tele-health services. This service is optional and visible on our website designated by TH in the search results or using the Tele-health search option. You may also call the network for assistance in finding a tele-health provider/and or facilitating an appointment. Our complete Tele-health policy is visible on our website downloads.



Prior to delivery of health care via tele-health, the health care provider initiating the use of tele-health shall obtain verbal or written consent from the patient (Injured Covered Employee) for the use of tele-health as an acceptable mode of delivering health care services and public health. The consent shall be documented. (Pursuant to Business and Professions Code section 2290.5 (b))

PRISM MPN Information

For questions about the use of the PRISM MPN or complaints, the PRISM MPN contact is: MPN Manager (800) 544-8150. PRISM MPN has individuals available to answer questions, provide website assistance, and generate provider listings. Medical Access Assistants are available to assist with finding a PRISM MPN physician of your choice, including scheduling and confirming physician appointments. Assistants are available 7am to 8pm Pacific Standard Time, Monday through Saturday at the contact information below:

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