Covered Employee Notification of Rights Materials

Regarding

Rio Hondo Community College District administered by Keenan & Associates

PRIME Advantage – Medical Provider Network ("MPN")

This pamphlet contains important information about your medical care in case of a work-related injury or illness.

YOU ARE IMPORTANT TO US

Keeping you well and fully employed is important to us. It is your employer's goal to provide you employment in a safe working environment. However, should you become injured or ill, as a result of your job, we want to ensure you receive prompt quality medical treatment. Our goal is to assist you in making a full recovery and returning to your job as soon as possible. In compliance with California law, we provide workers' compensation benefits, which include the payment of all appropriate medical treatment for work-related injuries or illnesses. If you have any questions regarding the MPN, please contact Keenan's MPN Coordinator at 800-654-8102.

PRIME ADVANTAGE MEDICAL NETWORK - "MPN"

Rio Hondo Community College District administered by Keenan & Associates provides workers' compensation coverage for you in the event you sustain a work-related injury. PRIME Advantage Medical Provider Network accesses medical treatment through selected Anthem Blue Cross Prudent Buyer PPO ("Blue Cross of California") providers. Anthem Blue Cross contracts with doctors, hospitals and other providers to respond to the special requirements of on-the-job injuries or illnesses.

ACCESS TO CARE

If you should experience a work-related injury or illness, you should:

Notify your employer:

- Immediately notify your supervisor or employer representative so you can secure medical care. Employers are required to authorize medical treatment within one working day of your filing of a completed claim form (DWC-1). To ensure your rights to benefits, report every injury and request a claim form.

Initial or Urgent Care:

- If medical treatment is needed, your employer will direct you to an MPN provider upon initial report of injury. Access to medical care should be immediate but in no event longer than 3 business days.

For Emergency Care:

- In the case of emergency* go to the nearest healthcare provider. Once your condition is stable, contact your employer, Keenan's MPN Coordinator at 800-654-8102, or call 866-700-2168 for assistance in locating a MPN provider for continued care.

**Emergency care is defined as a need for those health care services provided to evaluate and treat medical conditions of a recent onset and severity that would lead a lay person, possessing an average knowledge of medicine, to believe that urgent care is required.*

Subsequent Care:

- All medical non-emergencies, which require ongoing treatment, in-depth medical testing or a rehabilitation program, must be authorized by your claims examiner and based upon medically evidenced based treatment guidelines (California Labor Code §5307.27, and as set forth in title 8, California Code of Regulations, section 9792.20 *et seq.*).
- Access to subsequent care, including specialist services, shall be available within no more than twenty (20) business days.
- If you relocate or move outside of California or outside of PRIME Advantage Medical Provider Network geographic service area and require continued care for your work related injury or illness, you may select a new physician to provide ongoing care or you may contact your claims examiner for assistance with locating a new primary care physician.

If your relocation or move is temporary upon your return to California should you require ongoing medical care, immediately contact your claims examiner or your employer so arrangements can be made to return you to your prior MPN provider or, if necessary, for assistance in locating a new MPN provider for continued care.

If you are temporarily working outside of California and are injured:

- If you are working outside of California and experience work related injury or illness, notify your employer. For initial, urgent or emergency care, or follow up care, go to the nearest healthcare provider for medical treatment.
- If you need assistance locating a physician or should the physician you select need authorization to provide care to you, call Keenan's MPN Coordinator at 800-654-8102 and we will assist you. Upon your return to California, should you require ongoing medical care, immediately contact your claims examiner or your employer for referral to a MPN provider for continued care.

HOW TO CHOOSE A PHYSICIAN WITHIN THE MPN

The MPN has providers for the entire state of California. The MPN must give you a regional list of providers that includes at least 3 physicians in each specialty commonly used to treat work related injuries or illnesses in your industry. The MPN must provide access to primary physicians within 15 miles and specialists within 30 miles. To locate a participating provider or obtain a regional listing:

Provider Directories:

- On-line Directories – if you have internet access, you may obtain a regional directory or locate a participating provider near you by visiting www.keenan.com and click on "Access the MPN Provider Finder". Please enter you user name and password to enter the provider finder. Your user name and password are below.
    - User ID: special
    - Password: access
- A copy of the complete provider listing is also available in writing upon request.
- If you do not have internet access, you may request assistance locating an MPN provider or obtaining an appointment by calling 866-700-2168.
- Promptly contact your claims examiner to notify us of any appointment you schedule with an MPN provider.

Choosing a Physician (for all initial and subsequent care):

- Your employer will direct you to an MPN provider upon initial report of injury. You have the right to be treated by a physician of your choice within the MPN ***after your initial visit***
- If you wish to change your MPN physician after your initial visit, you may do so by:
    - Accessing the on-line provider directories (see above)
    - Call the toll free number to locate an MPN provider: 866-700-2168
- If you select a new physician, immediately contact your claims examiner and provide him or her with the name, address and phone number of the physician you have selected. You should also provide the date and time of your initial evaluation.
- If it is medically necessary for your treatment to be referred to a specialist, your MPN physician can make the appropriate referral within the network or you may select a specialist of your choice within the MPN.
- If a type of specialist is needed, or recommended by your MPN physician, but is not available to you within the network, you will be allowed to treat with a specialist outside of the network. Your claims examiner can assist you to identify appropriate specialists if requested. Once you have identified the appropriate specialist outside of the network, schedule an appointment and notify your primary care physician and claims examiner of the appointment date and time. Your MPN physician, who is your primary care physician, will continue to direct all of your medical treatment needs.
- If the MPN cannot provide access to a primary treating physician within 15 miles of your workplace or residence, the MPN may allow you to seek treatment outside the MPN. Please contact your claims examiner for assistance.

SECOND AND THIRD OPINIONS

Second Opinion:

- If you disagree with the either the diagnosis or the treatment prescribed by your MPN physician, you may

obtain a second opinion within the MPN. During this process you are required to continue your treatment with an MPN physician of your choice. In order to obtain a second opinion you and the MPN share responsibilities:

- Inform your claims examiner of your dispute regarding your treating physician's opinion either orally or in writing.
- You are to select a physician or specialist from a regional list of available MPN providers, which will be provided to you by your claims examiner upon notification of your request for a second opinion.
- You are to make an appointment within 60 days.
- You are to inform your claims examiner of the appointment date and time.
- You may waive your right to a second opinion if you do not make an appointment within 60 days from receipt of the list.
- You have the right to request a copy of the medical records sent to the second opinion physicians.
- If the second opinion doctor feels that your injury is outside of the type of injury he or she normally treats, the doctor's office will notify you and your employer or insurer. You will get another list of MPN doctors or specialists so you can make another selection.

Third Opinion:

- If you disagree with either the diagnosis or the treatment prescribed by the second opinion physician, you may obtain a third opinion within the MPN. During this process you are required to continue your treatment with a MPN physician of your choice. In order to obtain a third opinion you and the MPN share responsibilities:

  - Inform your claims examiner of your dispute regarding your treating physician's opinion either orally or in writing.
  - You are to select a physician or specialist from the list of available MPN providers previously provided or you may request a new regional area list.
  - You are to make an appointment within 60 days.
  - You are to inform your claims examiner of the appointment date and time.
  - You may waive your right to a third opinion if you do not make an appointment within 60 days from receipt of the list.
  - You have the right to request a copy of the medical records sent to the third opinion physician.
  - If the 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 you and your employer or insurer. You will get another list of MPN doctors or specialists so you can make another selection.

- At the time of selection of the physician for a third opinion, your claims examiner will notify you about the Independent Medical Review process and provide you with an application for the Independent Medical Review process (see below).

INDEPENDENT MEDICAL REVIEW (IMR)

If you disagree with the diagnosis service, diagnosis or treatment prescribed by the third opinion physician, you may request an Independent Medical Review (IMR). An IMR is performed by a physician selected for you by the Administrative Director (AD) with the Division of Workers' Compensation Medical Unit of the State of California. To request an IMR you will be required to complete and file Independent Medical Review Application form with the AD. The AD will select an IMR who has the appropriate specialty necessary to evaluate your dispute. The AD will send you written notification of the name, address and phone number of the IMR.

You may choose to be seen by the IMR in person or you may request that the IMR only review your medical records. Whichever you choose, you will be required to contact the IMR for an appointment or to arrange for a medical record review. Your IMR should see you within 30 days from your request for an appointment. The IMR will send his/her report to the AD for review and a determination will be made regarding the dispute.

You may waive your right to the IMR process if you do not schedule an appointment within 60 calendar days from receiving the name of the IMR from the AD.

CONTINUITY OF CARE POLICY

Your employer or insurer has a written "*Continuity of Care*" policy that will determine whether you can temporarily continue treatment for an existing work injury with your doctor if your doctor is no longer participating in the MPN.

If your employer decides that you do not qualify to continuing your care with the non-MPN provider, you

and your primary treating physician must receive a letter of notification.
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If you meet certain conditions, you may qualify to continue treating with this doctor for up to a year before you must switch to MPN physicians. These conditions are:

(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 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 termination of contract date between the MPN and your doctor.

You can disagree with your employer's decision to deny you Continuity of Care with the terminated MPN provider. If you want to continue treating with the terminated doctor, ask your primary treating physician for a medical report on whether you have one of the four conditions stated above to see if you qualify to continue treating with your current doctor temporarily.

Your primary treating physician has 20 days from the date of your request to give you a copy of his/her medical report on your condition. If your primary treating physician does not give you the report within 20 days of your request, the employer can transfer your care to another physician within the MPN.

You will need to give a copy of the report to your employer if you wish to postpone the transfer of your care into the MPN. If you or your employer disagrees with your doctor's report on your condition, you or your employer can dispute it. See the complete Continuity of Care policy for more details on the dispute resolution process.

For a copy of the entire Continuity of Care policy, ask your MPN Contact or your claims examiner.

TRANSFER OF CARE POLICY

Your employer or insurer has a "*Transfer of Care*" policy which will determine if you can continue being temporarily treated for an existing work-related injury by a physician outside of the MPN before your care is transferred into the MPN.

If you have properly predesignated a primary treating physician, you cannot be transferred into the MPN. (If you have questions about predesignation, ask your supervisor.) If your current doctor is not or does not become a member of the MPN, then you may be required to see a MPN physician.

If your employer decides to transfer you into the MPN, you and your primary treating physician must receive a letter notifying you of the transfer.

If you meet certain conditions, you may qualify to continue treating with a non-MPN physician for up to a year before you are transferred into the MPN. The qualifying conditions to postpone the transfer of your care into the MPN are:

- **(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 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 effective date.

You can disagree with your employer's decision to transfer your care into the MPN. If you don't want to be transferred into the MPN, ask your primary treating physician for a medical report on whether you have one of the four conditions stated above to qualify for a postponement of your transfer into the MPN.

Your primary treating physician has 20 days from the date of your request to give you a copy of his/her report on your condition. If your primary treating physician does not give you the report within 20 days of your request, the employer can transfer your care into the MPN and you will be required to use a MPN physician.

You will need to give a copy of the report to your employer if you wish to postpone the transfer of your care.

If you or your employer disagrees with your doctor's report on your condition, you or your employer can dispute it. See the complete transfer of care policy for more details on the dispute resolution process.

For a copy of the entire transfer of care policy, ask your MPN Contact or your claims examiner.

FOR QUESTIONS OR MPN INFORMATION

What if I have questions or need help:

- **MPN Contact**: You may always contact the MPN Contact if you need help or an explanation about your medical treatment for your work-related injury or illness. Keenan's MPN Coordinator at 800-654-8102. Also, you can contact your claims examiner if one has been assigned to your case.
- **Division of Workers' Compensation (DWC)**: If you have concerns, complaints or questions regarding the MPN, the notification process or your medical treatment after a work-related injury or illness, you can call DWC's Information and Assistance Unit at 800-736-7401. You can also go to DWC's website at www.dir.ca.gov/dwc and click on "Medical provider networks" for more information about MPNs.
- **Independent Medical Review**: If you have questions about the Independent Medical Review process contact the Division of Workers' Compensation Medical Unit at:

  DWC Medical Unit
  P.O. Box 71010
  Oakland CA 94612
  (510)286-3700 or (800)794-6900

KEEP THIS INFORMATION IN CASE YOU HAVE A WORK RELATED INJURY OR ILLNESS

KEENAN & ASSOCIATES ADJUSTING LOCATIONS

Torrance
800-654-8102

Eureka
707-268-1616

Pleasanton
925-225-0611

Rancho Cordova
800-343-0694

Redwood City
650-306-0616

Riverside
800-654-8347

San Jose
800-334-6554

MEDICAL DIRECTORY USER ID AND PASSWORD INFORMATION

When locating participating providers on-line, through the Internet, a user id and password is required to ensure that you are provided correct information.

User ID: special
Password: **access**