



MEDICAL PROVIDER HANDBOOK for MPN PROVIDERS

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MPN Information

What is a MPN?

A MPN or Medical Provider Network is a network of providers that has been approved by the State of California Department of Workers' Compensation to provide medical treatment to injured workers under the law and regulations for MPNs. EK Health MPNs have met specific state requirements and all providers within the MPN have been selected to meet specific health care delivery standards. ***Each physician has acknowledged that they will participate in the specific MPN in accordance with the California Labor Code.***

Why Participate in a MPN?

As a participating provider in the EK Health MPNs, injured workers from many different clients will be directed to you for treatment related to their workers' compensation claim. As a provider, you will oversee all treatment for the injured worker as a Primary Treating Physician (PTP) or provide specialty treatment. Workers are able to change physicians during the life of the claim and select other physicians within the MPN.

EK Health Provider Network

Welcome

Welcome to EK Health Services' (EKHS) workers' compensation provider network! EK Health asks you to render high quality, efficient, timely, reasonable and necessary medical care to all injured workers whose employers add you to their MPN.

The goal of EK Health Services is to cooperatively work with employers, providers and injured workers to promote timely and effective return to work for all injured employees.

EK Health Services Special Requirements

EK Health Services provides a directory of credentialed physicians for MPN clients throughout California. Occasionally, clients of EK Health Services may add additional MPN specific guidelines that will supplement those in this handbook. You will be provided written notice if you are impacted by client specific requirements that are different from or are in addition to those provided in this handbook. A written summary of changes or additional requirements will be provided to you, with 30 days notice of the effective date of any changes and additions.

General Guidelines for Providers (GGP) in the MPNs

The MPN Provider shall adhere to the General Guidelines for Providers in the MPNs.

All references to “physician” mean a health care provider as defined by Labor Code Section 3209.3 and Section 3209.5.

Physicians agree to assume the role of a Primary Treating Physician, when requested by an MPN-covered injured employee or EKHS client.

Physician’s practice shall be in compliance with applicable California Workers’ Compensation Law, Labor Code, Insurance Code, and Business and Professions Code and regulations.

Physician must hold an unrestricted license to practice medicine in the State of California, be actively engaged in the practice of medicine, and have no sanctions or restrictions to practice by the state licensing authority.

Physician shall have no felony or misdemeanor convictions involving the qualifications, functions, or duties of a physician.

Physician must maintain professional liability coverage of at least the minimum amount of 1,000,000 / 3,000,000.

Physician must maintain general liability coverage of at least the minimum amount of 1,000,000 / 3,000,000.

Physician shall have no medical condition, other physical condition, or problem that substantially impairs or prevents the essential functions of a physician, and must disclose to EKHS immediately if one develops.

There shall be timely and cooperative communication from the physician with EKHS, employers, and the injured employees. Communication should be within two business days or pursuant to Labor Code and/or California Code of Regulations.

Physician or representing group administrators shall respond to requests regarding quality assurance issues as identified by EKHS within 14 days or other mutually agreeable period confirmed in writing as agreed to by the parties.

The physician shall not dispense medications from his/her office; except during first visit for first fill not exceeding a 72-hour supply. This provision does not apply to injections related to in-office procedures.

The provider's facility must be clean, neat, and safe. The facility must have adequate parking. There must be appropriate equipment with up-to-date inspection certificates posted. EKHS reserves the right to conduct an onsite evaluation of the provider's facility at any time during normal business hours.

For non-emergency services, the physician shall ensure the availability of an initial appointment within 3 business days in accordance with Title 8, California Code of Regulations, Section 9767.5(f).

For non emergency specialist services, the physician shall ensure the availability of an appointment for treatment within 20 business days in accordance with Title 8, California Code of Regulations, and Section 9767.5(g).

The physician shall have no history of violation of Labor Code Section 139.3; Referral to person with whom physician has financial interest unlawful, nor shall physician have any history of fraudulent practices.

The physician must show evidence of expertise in the preparation and timely submission of legible treating physician reports. Workers' Compensation reports shall be prepared in accordance with Title 8, California Code of Regulations, Sections 9785, 10606, 14003, 14007, and Labor Code Sections 4055, 4061.5, 4068, 4628, and 6409.

Treatment requests must be submitted via UR Treatment Request Form or be clearly documented on a Doctor's First Report of Occupational Injury or Illness (DFR-1) or Progress Report (PR-2) form.

The physician shall provide medical treatment to injured employee consistent with the Medical Treatment Utilization Schedule (MTUS) as adopted and amended by the Administrative Director of the Division of Workers' Compensation CCR §9792.20 to .26. Physicians acknowledge that the Medical Treatment Utilization Schedule (MTUS) is presumptively correct. In the event the physician provides treatment for conditions or injuries not addressed by the MTUS, the treatment must be in accordance with other nationally-recognized peer-reviewed medical treatment guidelines or evidence-based medicine. In all cases, legible medical reports must

include supporting documentation and the rationale for the prescribed treatment.

The physician and their staff shall communicate with Peer Reviewers, Nurses, the client's Claims Adjusters, Case Managers, employers and injured employees within two business days or as pursuant to Labor Code and/or California Code of Regulations.

The physician shall comply with the Utilization Review Process, pursuant to Labor Code Section 4610 and Title 8, California Code of Regulations, Section §9792.6 to .10, for prospective, retrospective, and concurrent review of medical care for work-related injury and/or illness.

The physician agrees to the use of appropriate billing practices and accepts reimbursement in accordance with the official medical fee schedule and not filing liens for any balance. EKHS expects MPN providers to comply with billing standards promulgated by the DWC.

The primary treating physician shall have knowledge of and use the AMA Guides 5th Edition for Impairment Rating, or any Guide currently approved and promulgated by the DWC; in accordance with Title 8, California Code of Regulations, Section 9785(g).

Physician Assistants and Nurse Practitioners shall only be used in accordance with Labor Code 3209.10.

Physical Therapy service shall be administered under the direction of a Registered Physical Therapist in accordance with professionally-recognized standards, Labor Code Sections 3209.3 and 3209.5, and Business and Professions Code.

The physician shall utilize and refer to other providers, hospitals, ambulatory surgery centers, and other services in the EKHS Medical Provider Network as listed on the relevant MPN portal, subject to the emergent medical needs of the injured employee, in accordance with Title 8, California Code of Regulations, Sections 9767.5 and 9767.6 (e).

The physician shall refer all prescribed Home Health Care to the EKHS' client's Claims Adjuster to schedule an assessment. Once the assessment has been completed and physician has reviewed the assessment report, the physician's final order for Home Health Care may be prescribed. This prescription for Home Health Care should include the necessary provided services, but not specify hours of care unless attendant care is required for the patient's safety.

The physician shall utilize and refer, as necessary, to all other approved ancillary networks which have been incorporated into the EKHS MPN filed with the Department of Workers' Compensation (DWC).

The physician shall prescribe generic drugs in lieu of brand name drugs when generic drugs are available, pursuant to Labor Code Section 4600.1, subject to the emergent medical needs of the injured employee.

The physician shall not prescribe compounded medications without prior authorization. This excludes the combining of medication for injections related to in-office procedures, and/or placing active prescription medication in a cream if the active prescription medication is the only item billed.

EKHS reserves the right to modify the GGP upon giving the physician and/or provider thirty (30) days notice of such modification in writing. If the physician and/or provider fail to agree to the modifications to the GGP, the physician and/or provider will be automatically removed from EKHS' MPN.

No waiver of a breach, failure of any condition, or any right or remedy contained in or granted by this GGP will be effective unless it is in writing by EKHS waiving the breach, failure, right, or remedy. No waiver of any breach, failure, right, or remedy will be deemed a waiver of any other breach, failure, right, or remedy, whether or not similar, nor will any waiver constitute a continuing waiver unless the writing so specifies.

Tools for Locating a Participating Provider

EK Health provides the following network tools:

- Electronic directory services via the Internet at the relevant MPN portal site, which is URL specific for each client.
- Telephonic directory services via the toll-free number 888-848-9055.
- The electronic directory is easy to use and allows clients and injured workers to search for a physician or clinic in the EK Health Network. Search functions for a provider include by zip code within a user-defined radius, county, city or provider name. The application also supplies users with the ability to produce maps. Electronic directory requires only basic Internet access and print capabilities.

Provider Education and Compliance

EK Health will provide specific educational activities to help promote provider compliance as needed and may include supplying access to the website for reference purposes, mailings of educational materials, and on-site meetings to provide an overview and instructions regarding compliance with the EK Health network. EK Health also employs Provider Services staff that is specially educated about the California MPN requirements. They will provide resources to network providers via the Provider Services 800 number, via the EK Health website, and are available to answer concerns. If providers call a client for information, please refer them to the Provider Relations' number at 888-848-9055 or to providerrelations@ekhealth.com.

MPN Standards

Treatment Guidelines

Injured employees shall be treated with medically necessary treatment that is reasonably required to cure or relieve the injured employee of the effects of his or her injury and based on the following standards, which shall be applied in the order listed, allowing reliance on a lower ranked standard only if the higher ranked standard is inapplicable to the employee's medical condition;

- (A) The CA MTUS.
- (B) Peer-reviewed scientific and medical evidence regarding the effectiveness of the disputed service.
- (C) Nationally recognized professional standards.
- (D) Expert opinion.
- (E) Generally accepted standards of medical practice.
- (F) Treatment that is likely to provide a benefit to a patient for conditions for which treatments are not clinically efficacious.

Utilization Review

Utilization review (UR) is the process used by claims administrators on behalf of employers to determine if treatment is medically reasonable and necessary to cure or relieve the injured worker from the industrial injury or illness. Employers or the insurance companies handling the workers' compensation claims are required by law to utilize a UR program. Using the approved medical treatment guidelines which incorporate evidence based medicine, the utilization review process determines whether or not to approve medical treatments for injured workers. The UR process is governed by Labor Code section 4610 and the regulations written by the California Division of Workers' Compensation Code of Regulations, section 9792.6 et seq.

Physicians should document and substantiate requests for treatments based on the above treatment guidelines.

Updating Participating Provider Information

In the interest of efficient communications, accurate provider directory listings, and patient referrals between EKHS, Clients, Employers and Patients, participating providers are asked to keep EKHS updated on the following minimum level of information and renewals:

- Tax Identification Number
- NPI Number
- State licensure expiration date with supplied copies
- Any specialty certification expiration date with supplied copies
- DEA Number and expiration date with supplied copies
- Current expiration date of Medical Professional Liability Insurance policy with supplied copies
- Current expiration date of General Liability Insurance policy with supplied copies
- Practice Addresses, Telephone and Fax Numbers
- Billing Addresses, Telephone and Fax Numbers
- E-mail and Website Addresses

EKHS may use information from your California Standard State Application (CPPA), CAQH Application, EKHS Provider Network Application, or information provided from you to EKHS' Credentialing Department and/or any credentialing Verification Organization contracted with EKHS, to update your information for credentialing, communications, and directory purposes. (This information will not be shared outside EK Health.)

Provider Change Requests or Referrals

Injured workers may change providers at any time within the MPN. There are no restrictions to changing providers as long as the physician selected by the injured worker is appropriate for the injury. The new provider must be chosen from within the established MPN.

Bill Submission

Please submit complete and accurate bills to the payer within 30 days of providing services.

Continuity of Care

EK Health will provide all employees entering the workers' compensation system with notice of its written Continuity of Care policy and with information regarding the process for an employee to request a review under the policy. Health will also provide, upon request, a copy of the written policy to any employee.

Procedure:

1) **Completion of treatment by a terminated medical provider.** EK Health will, at the request of an injured employee, provide the completion of treatment as set forth in this exhibit by a terminated medical provider.

a) The treatment being provided by a medical provider whose membership in the MPN terminates will be provided by a terminated medical provider to an injured employee who, at the time of the contract's termination, was receiving services from that provider for one of the conditions described in paragraph 1.b) below.

b) EK Health will provide for the completion of treatment for the following conditions subject to coverage through the workers' compensation system before transferring further medical treatment to a physician in the MPN. At that time, the employee will have the same rights to select a new physician or contest the opinion of the primary treating physician as has been previously described:

i) An acute condition. An acute condition is a medical condition that involves a sudden onset of symptoms due to an illness, injury, or other medical problem that requires prompt medical attention and that has a limited duration. Completion of treatment will be provided for the duration of the acute condition. An acute condition shall have duration of less than ninety days.

ii) A serious chronic condition. A serious chronic condition is a medical condition due to a disease, illness, or other medical problem or medical disorder that is serious in nature and that persists without full cure or worsens over an extended period of time or requires ongoing treatment to maintain remission or prevent deterioration. Completion of treatment will be provided for a period of time necessary to complete a course of treatment and to arrange for a safe transfer to another provider, as determined by EK Health in consultation with the injured employee and the terminated medical provider and consistent with good professional practice. Completion of treatment under this paragraph will not exceed 12 months from the contract termination date. An "extended period of time" with regard to a serious and chronic condition means a duration of at least ninety days.

iii) A terminal illness. A terminal illness is an incurable or irreversible condition that has a high probability of causing death within one year or less. There will be no transfer of care in such circumstances, and completion of treatment will be provided for the duration of a terminal

illness.

iv) Surgery or other procedure. Performance of surgery or other procedure that is authorized by the Employer/Insurer as part of a documented course of treatment and has been recommended and documented by the provider to occur within 180 days of the contract's termination date.

2) **Contractual terms and conditions.** EK Health may require the terminated medical provider whose services are continued beyond the contract termination date pursuant to this section, to agree in writing to be subject to the same contractual terms and conditions that were imposed upon the provider prior to termination. If the terminated medical provider does not agree to comply or upon agreement does not comply with these contractual terms and conditions, then EK Health is not required to continue the provider's services beyond the contract termination date.

3) **Compensation.** Unless otherwise agreed by the terminated medical provider and EK Health, the services rendered pursuant to this section will be compensated at rates and methods of payment similar to those used by EK Health for currently contracted providers providing similar services who are practicing in the same or a similar geographic area as the terminated medical provider. EK Health is not required to continue the services of a terminated medical provider if the provider does not accept the payment rates provided for in this paragraph.

4) **Termination for medical disciplinary cause or reason.** This policy will not require EK Health to provide for completion of treatment by a provider whose contract with EK Health has been terminated or not renewed for reasons relating to a medical disciplinary cause or reason, as defined in paragraph (6) of subdivision (a) of Section 805 of the Business and Profession Code, or fraud or other criminal activity.

5) **Continuity of care beyond requirements.** Nothing in this exhibit will preclude EK Health from providing continuity of care beyond the requirements of this exhibit.

6) **Dispute resolution process.**

a) Following EK Health's determination of the injured covered employee's medical condition, EK Health shall notify the covered employee of the determination regarding the completion of treatment and whether or not the employee will be required to select a new provider from within the MPN. The notification shall be sent to the covered employee's residence 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.

b) If the terminated provider agrees to continue treating the injured covered employee in accordance with Labor Code section 4616.2 and if the injured covered employee disputes the medical determination, the injured covered employee shall request a report from the covered employee's primary treating physician that addresses whether the covered employee falls within any of the conditions set forth in Labor Code section 4616.2(d)(3): an acute condition; a

serious chronic condition; a terminal illness; or a performance of a surgery or other procedure that is authorized by the insurer or employer as part of a documented course of treatment and has been recommended and documented by the provider to occur within 180 days of the contract's termination date. The treating physician shall provide the report to the covered employee within twenty calendar days of the request. If the treating physician fails to issue the report, then the determination made by EK Health referred to in 6.a) shall apply.

c) If EK Health or injured covered employee objects to the medical determination by the treating physician, the dispute regarding the medical determination made by the treating physician concerning the continuity of care shall be resolved pursuant to Labor Code section 4062.

d) If the treating physician agrees with EK Health's determination that the injured covered employee's medical condition does not meet the conditions set forth in Labor Code section 4616.2(d) (3), then the employee shall choose a new provider from within the MPN during the dispute resolution process.

e) If the treating physician does not agree with EK Health's determination that the injured covered employee's medical condition does not meet the conditions set forth in Labor Code section 4616.2(d)(3), the injured covered employee shall continue to treat with the terminated provider until the dispute is resolved.

7) **Replacement of continuity of care policy.** EK Health will file a revision of the continuity of care policy with the Administrative Director if it makes a material change to this policy

MPN Provider Suspension and Termination

Upon receiving information from a credible public source concerning an MPN Provider's arrest or indictment for any felony or any notice regarding the impairment of the MPN Provider's license, the Medical Director may suspend that Provider from any and all EK Health MPNs. A suspension notice letter shall be sent to the suspended Provider via email and regular US Mail. The suspended Provider shall be suppressed from all MPN Provider lists concurrently with the Suspension letter Notice. Continuity of Care procedures shall be implemented within 24 hours of the Suspension letter Notice.

At the conclusion of all legal proceedings involving a Suspended Provider or six months from the date of the Suspension letter Notice, the MPN Credentials Committee may take further action, up to and including termination of the Provider from the MPN.

Upon receiving a written complaint that a MPN Provider has not conformed to either the Provider Contract provisions, the Physician's Acknowledgment Letter provisions, or any provision in the Medical Provider Handbook for MPN Providers, a Warning Letter shall be sent to the Provider detailing the incident(s) and/or circumstances. The Warning Letter may contain

corrective action steps. The MPN Provider shall have fourteen (14) days from the date of the Warning Letter to respond to the allegations contained in the letter.

The Warning Letter and the MPN Provider's response, if any, shall be reviewed at a monthly Meeting of the MPN Credentials Committee. Upon review, the MPN Credentials Committee may take further action, up to and including termination of the Provider from the MPN.

After termination by the MPN Credentials Committee, a Termination Letter shall be sent to the subject Provider via email and regular US Mail. The terminated Provider shall be deleted from all MPN Provider lists concurrently with the Termination Letter. Continuity of Care procedures shall be implemented immediately with the Termination Letter.

In all cases, the decision of the MPN Credentials Committee is final and non-appealable.

Questions and Concerns

For questions or concerns not answered in this handbook or the EK Health Workers' Compensation Provider agreement, please contact EK Health Provider Relations at 888-848-9055 or via email at providerrelations@ekhealth.com.