Transfer of Care Plan Overview for Employees

Medical Provider Network (MPN)
MPN Identification Number

Your employer, in conjunction with your workers' compensation insurance carrier, has chosen to provide medical care by using a Medical Provider Network (MPN) for any work related injuries its employees may sustain.

MPN Applicant through its employer or insurer clients will provide for the completion of treatment for injured covered employees who are being treated outside of the Medical Provider Network (MPN) for an occupational injury or illness that occurred prior to the coverage of the MPN as described below.

Until the injured covered employee is transferred into the MPN, the employee's physician may make referrals to providers within or outside the MPN.

This overview will provide information about your employer's MPN Transfer of Care Plan (TOCP) and the responsibilities under this plan.

If an injured covered employee is being treated for an occupational injury or illness by a physician or provider prior to coverage of a MPN, and the employee's physician or provider becomes a provider within the MPN that applies to the injured employee the insurer will inform the employee and his or her physician or provider if his/her treatment is being provided by his/her physician or provider under the provisions of the MPN.

The employer or insurer shall authorize completion of treatment for injured covered employees who are being treated outside of the MPN for an occupational injury or illness that occurred prior to the coverage of the MPN, and whose treating physician is not a provider within the MPN, including injured covered employees who pre-designated a physician and do not fall within the Labor Code section 4600(d), for the following conditions:

a. **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 duration of less than 90 days. Completion of treatment will be provided for the duration of the acute condition.

b. **Serious chronic condition**. A serious chronic condition is a medical condition due to a disease, illness, catastrophic injury, or other medical problem or medical disorder that is serious in nature and that persists without full cure or worsens over 90 days and requires ongoing treatment to maintain remission or prevent deterioration. Completion of treatment will be provided for a period of time, up to one year, necessary to complete a course of treatment approved by the employer or insurer and to arrange for transfer to another provider within the MPN, as determined by the employer or insurer. The one year period for completion of treatment starts from the date of the injured covered employee's receipt of the notification of the determination that the employee has a serious chronic condition.

c. **Terminal illness**. A terminal illness is an incurable or irreversible condition that has a high probability of causing death within one year or less. Completion of treatment will be provided for the duration of a terminal illness.

d. **Surgery or other procedure**. Performance of a surgery or other procedure that is authorized by the employer or insurer as part of a documented course of treatment and has been recommended and documented by the provider to occur within 180 days from the MPN coverage effective date.

Employer or insurer may transfer the injured covered employee into the MPN for medical treatment, if the injured covered employee's injury or illness does not meet the conditions set forth in paragraphs (a) through (d).

If the employer or insurer decides to transfer the injured covered employee's medical care to the MPN, the employer or insurer or entity that provides physician network services shall notify the covered employee of the determination regarding completion of treatment and the decision to transfer medical care into the MPN.. Notice will be sent to the employee's address and a copy of the letter will be sent to the covered employee's primary treating physician. The notification will be written in English and Spanish and use layperson's terms to the maximum extent possible.

If the injured covered employee disputes the medical determination regarding transfer of care into the MPN, he/she must 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 paragraphs (a) through (d). If the treating physician fails to provide the report to the injured covered employee within 20 calendar days of the request, the determination made by the employer or insurer shall apply.

If the employer or insurer or the injured covered employee objects to the medical determination made by the treating physician, the dispute regarding the medical determination concerning the transfer of care shall be resolved pursuant to Labor Code section 4062.

If the treating physician agrees with the employer's or insurer's determination that the employee's medical condition does not meet the stated conditions, the transfer of care will go forward during the dispute resolution process.

If the treating physician does not agree with the employer's or insurer's determination that the employee's medical condition does not meet the stated conditions, the transfer of care will not go forward until the dispute is resolved.

Nothing in this policy shall preclude an insurer or employer from agreeing to provide medical care with providers outside the MPN.

Zurich
1299 Zurich Way, Schaumburg, Illinois 60196-1056
www.zurichna.com
Zurich American Insurance Company

v06052024

A1-112004207-B 112010184