Workers' Compensation Benefits HealthCare Network FAQ

The University of Texas System Office of Risk Management

UT System / IMO IMO Med-Select Network

Beginning April 1, 2013 the University of Texas System will have a Certified Workers' Compensation HealthCare Network.

To assist you with obtaining prompt, appropriate medical treatment in the case you experience a work-related illness or injury, the University of Texas System has contracted with Injury Management Organization (IMO) Med-Select Network.

What is a Certified Texas Workers' Compensation Healthcare Network?

It is a program that has been certified by the State of Texas to provide healthcare services to you if you become injured at work.

What is Injury Management Organization (IMO)?

IMO is a certified Utilization Review Agent and the parent company to the IMO Med-Select Network®.

IMO provides Case Management, Pre-Authorization, Medical Bill Review, Industry Care Programs, along with other Healthcare Management Services

For more information about IMO:

- Visit <u>www.injurymanagement.com</u>. To watch the video, click "Provider Network FAQs" under the "Services" tab. Direct link: <u>www.injurymanagement.com/faqs</u>.
- Write to: IMO Med-Select Network, P.O. Box 118577, Carrollton, TX 75011
- Call the Network Main Line: 214-217-5939 or 888-466-6381
- Call the Customer Care Line: 214-217-5936 or 877-870-0638

Will I need to sign any forms to participate in the network?

An Acknowledgement Form will be presented at the time of injury for signature. If the employee is unavailable to sign at that time, the form will be signed as soon as the employee is able to do so.

What will happen if I choose not to sign the Acknowledgement Form?

If an employee receives the Notice of Network Requirements and refuses to sign the Acknowledgement Form, they are still required to participate in the network.

What is a service area?

A service area is any county where the Network operates with physicians and other healthcare providers to care for injured employees.

- If the Network lists a county as part of its service area there will be providers for all zip codes in that county ready to provide healthcare services to the injured employees.
- If you live in a county covered by a service area, you are required to use a network provider.

May I use a P.O. Box for my official address when I participate in the Network?

No. The Network requires a physical address in order to ensure all communication reaches the injured employee.

How is "Live" defined?

Where an employee lives includes:

- the employee's principal residence for legal purposes, including the physical address which the employee represented to the employer as the employee's address
- a temporary residence necessitated by employer; or
- a temporary residence taken by the employee for the purpose of receiving assistance with routine daily activities because of the compensable injury

What if I don't live in the service area?

If you do not live in the service area, you are not required to receive health care from the certified network.

What should I do if I move to a different zip code?

Notify your employer immediately to assist them in making sure that the Network has service area coverage for you.

Am I required to see a doctor close to my residence?

Although the Network must provide you with access to a treating doctor within a 30-mile radius of your residence, you may choose any treating doctor listed in the network provider list.

Can my chiropractor or my orthopedic surgeon be my treating doctor?

No. The Treating Doctor must be a specialist in Family Practice, General Practice, Internal Medicine, Occupational Medicine or Physical Medicine and Rehabilitation (in El Paso only).

For treatment by any other type of specialist, including a chiropractor or orthopedic surgeon, you must be referred by your treating doctor.

Do you have physician assistants or nurse practitioners in the Certified Network?

No. The Certified Network does not have Physician Assistants or Nurse Practitioners contracted to treat injured employees at this time. You may be treated by one of the above, if it is under the direction of a MD in the Certified Network.

How can I get a Network provider directory?

Your employer will have a Network Provider Directory available or you may visit the IMO Website at www.injurymanagement.com and click "Find a Provider".



How do I choose my treating doctor?

After an injury occurs, you must choose your treating doctor from the Network Provider list.



*If you need help, you may call a Network Customer Care Representative for assistance at 888.466.6381 Monday-Friday 8-5 p.m. CST or visit the IMO Website at www.injurymanagement.com and click "Find a Provider".

Who is responsible for paying for my medical care if I receive treatment outside of the network?

If you receive care from an out-of-network provider, you may be financially responsible for the health care services if it is determined that you live in the network service area.

How do I receive emergency care?

You should seek treatment from the <u>nearest</u> urgent care facility or hospital emergency room if emergency care is necessary.

*The Network Provider Directory lists urgent care centers and hospitals that participate in the network.

What is considered to be an emergency?

As defined by the Texas Insurance Code:

- The sudden onset of a medical condition manifested by acute symptoms of sufficient severity, including severe pain, that the absence of immediate medical attention could reasonably be expected to result in placing the patient's health or bodily functions in serious jeopardy; or
- Serious dysfunction of any body organ or part.

Can I change my Treating Doctor?

Yes, however, you are limited to the changes you can make.

Change #1: The alternative choice When you contact the Network you will be asked to complete the Request for Alternate Treating Doctor Form.

Change #2: Subsequent change
If you have used your alternate choice of Treating Doctor and you are still
dissatisfied, you must request and received permission from the Network for
the subsequent change of Treating Doctor.

*For more information you may call 888.466.6381 or email netcare@injurymanagement.com

What do I do if my Treating Doctor dies, retires, or leaves the network?

If your current treating doctor dies, retires or leaves the network, you are allowed a change of treating doctor at any time during your care.

Will medical services need prior approval?

Some medical services must be approved in advance.

Unless there is an emergency need, your treating doctor must contact the Network for approval prior to providing health care services such as hospital stays, surgical care, physical therapy, some diagnostic testing and rehabilitation programs.

*For a detailed list of services that will require prior approval, please refer to your IMO Med-Select Network® Employee Handbook.

What if I need a specialist that is not in the network?

If your treating doctor decides there is no provider or facility in the network that can provide the treatment you need for your compensable injury, he or she will contact the Network for permission to send you to a provider outside of the network.

*Your Treating Doctor is required to submit a completed referral called the Request for Out-of-Network Specialist form. The Network will approve or deny the request within seven (7) days of receiving this form from the Treating Doctor. You and your Treating Doctor will be notified by telephone and in writing if the request is not approved. The notice will also explain the appeal process.

How do I nominate a doctor?

The Network has a nomination form and credentialing process that must be completed prior to any doctor being considered as a network provider. The first step is to fill out a nomination form available on the IMO Website at www.injurymanagement.com or by contacting your employer.

The Network will contact your doctor about participating in the network. If your doctor does not agree or does not meet the certified network qualification requirements, you must choose another treating doctor from the network list.

What happens if I am unable to work?

Your Telephonic Case Manager will work with your doctor and employer to coordinate possible work programs to accommodate your restrictions while rehabilitating.

What is telephonic case management?

- When you are injured at work you will be provided with a Telephonic Case Manager (TCM) to assist with coordination of your medical needs.
- A TCM is a licensed and certified medical professional that will help coordinate the medical services that your doctor recommends.
- The TCM will also provide education and help with communication between you, your doctor and employer.

How do I file a complaint?

 If you are dissatisfied with any part of the Network, you may file a complaint by completing the Complaint Form # IMO MSN-3

You must file the complaint within 90 days of the event about which you are

dissatisfied.

To obtain and submit this form you can contact the NetComplaint Dept by:

Writing: 4100 Midway Road, Suite 1145, Carrollton, TX 75007

- Calling: 877.870.0638

E-mailing: netcomplaint@injurymanagement.com

 The Network will respond to your complaint with a letter of acknowledgement within <u>seven</u> (7) calendar days after receipt of the complaint.

Every complaint will be investigated and resolved within thirty (30) calendar

days after receipt of the complaint.

 The Network will send a letter to you explaining its decision and recommendations.

How do I file an appeal?

- If you are dissatisfied with the complaint response, you must submit your appeal either by calling the Network at 888.870.0638 or writing to the Network. This process does not require a form completion, but you may use the Complaint Form # IMO MSN-3 and check the appropriate box to indicate that you are filing an appeal.
 - IMO Med-Select Network® Attention:
 NetAppeal Committee
 P.O. Box 118577
 Carrollton, TX 75011
- File the appeal within 15 days of receiving the decision letter.
- The Network will send a letter when it receives the appeal and once again when the decision is made.

What should I do next if I do not agree with the Network's complaint or appeal resolution?

- If you are dissatisfied with the Network's complaint or appeal resolution, you may file a compliant with the Texas Department of Insurance (TDI). A complaint form can be accessed at:
 - TDI Website at <u>www.tdi.state.tx.us</u>, or
 - TDI HMO Division at the following address:
 HMO Division Mail Code 103-6A
 Texas Department of Insurance
 P.O. Box 149104
 Austin, TX 78714-9104