

Patrick Hughes Risk Manager

Michelle R. Kirby, CPA Chief Financial Officer **Michael Jordan** Chief Administrative Officer

Ted Wheeler Mayor CITY OF PORTLAND Office of Management and Finance Risk Management 1120 SW 5th Avenue Suite 1040-Risk

Portland, OR 97204

P: (503) 823-5101 F: (503) 823-6120 TTY: (503) 823-6868 portlandoregon.gov/bfs

January 13, 2023

Pashalle Johnson 8830 Se Flavel Apt 15 Portland, OR 97266

Employer:City of PortlandClaim Number:2022-012951-10Date of Injury:November 02, 2022

Dear Pashalle Johnson:

Recently, a "Notice of Deferred Status and Notice of MCO" was sent to you, along with an MCO enrollment form. You were asked to check your MCO election on the form, sign it, and return it to us within ten days of the date of the letter.

It has been more than ten days. We have not received your signed election form; therefore, we have made your election for you. Your MCO for compensable treatment of your claimed condition is .

YOU ARE NOW SUBJECT TO THE PROVISIONS OF THE CITY OF PORTLAND'S MANAGED CARE ORGANIZATION (MCO), AND ONLY THOSE MEDICAL SERVICES WITHIN THE PROVISIONS OF THIS MCO WILL BE COVERED UNDER YOUR ABOVE-CAPTIONED CLAIM. REMEMBER, NOW THAT YOU ARE ENROLLED, YOU CANNOT CHANGE MCOs.

This letter is to notify you that you are now enrolled in Providence MCO and to advise you of how you may obtain medical care within the MCO. Oregon Workers' Compensation Law provides that although the compensability of your claim has not yet been determined, you are required to receive medical treatment within the MCO as described below. If your claim is later denied, any reasonable and necessary medical services that you receive from MCO providers that are not otherwise covered by health insurance will be paid until you receive actual notice of denial, or until three days after the notice of denial is mailed, whichever comes first.

As an MCO member:

You may receive immediate emergency medical treatment from a medical provider who is not a member of the MCO, but you must select a Providence MCO Physician who will direct all further care within the Providence MCO network of providers.

You may also select an MCO participating provider from one of the following categories: Authorized Nurse Practitioner, Chiropractic Physician, Naturopathic Physician or Physician Assistant. **Please see "Medical Provider Limitations" below.**



An Equal Opportunity Employer

To help ensure equal access to programs, services and activities, the Office of Management & Finance will reasonably modify policies/procedures and provide auxiliary aids/services to persons with disabilities upon request.

If your Primary Care Physician (PCP), Chiropractic Physician, or Authorized Nurse Practitioner is not a Providence MCO provider, this Physician or Nurse Practitioner may treat your work-related injury or illness if he/she meets the following qualifications:

Primary Care Physician:

- 1. Your Primary Care Physician is a M.D. or D.O. and is a General practitioner, Family Medicine practitioner, or Internal Medicine specialist.
- 2. This Physician treated you before your date of injury and/or you selected this Physician as your designated Primary Care Physician in your group health plan before your date of injury. Per OAR 436-015-0070(2) "The physician or authorized nurse practitioner who is not a member of the MCO will be deemed to have maintained the worker's medical records and established a documented history of treatment, if the physician's or nurse practitioner's medical records show treatment has been provided to the worker prior to the date of injury."
- 3. This Physician agrees to the terms and conditions of the MCO.

Chiropractic Physician:

- 1. The Chiropractic Physician must be authorized by the Workers' Compensation Division of the Department of Business and Consumer Services to provide compensable medical services.
- 2. Your claim is in "initial" status you have not yet been declared medically stationary and your claim has not yet been closed.
- 3. This Chiropractic Physician treated you before the date of your injury. Per OAR 436-015-0070(2) "The physician or authorized nurse practitioner who is not a member of the MCO will be deemed to have maintained the worker's medical records and established a documented history of treatment, if the physician's or nurse practitioner's medical records show treatment has been provided to the worker prior to the date of injury."
- 4. This Chiropractic Physician agrees to the terms and conditions of the MCO.
- 5. This Chiropractic Physician must refer you to an MCO Physician or your Primary Care Physician for care exceeding 18 visits or 60 days, whichever comes first.

Authorized Nurse Practitioner:

- 1. The Nurse Practitioner must be authorized by the Workers' Compensation Division of the Department of Business and Consumer Services to provide compensable medical services.
- 2. Your claim is in "initial" status you have not yet been declared medically stationary and your claim has not yet been closed.
- 3. This Authorized Nurse Practitioner treated you before your date of injury and/or you selected this nurse practitioner as your designated Primary Care Provider in your group health plan before your date of injury. Per OAR 436-015-0070(2)"The physician or authorized nurse practitioner who is not a member of the MCO will be deemed to have maintained the worker's medical records and established a documented history of treatment, if the physician's or nurse practitioner's medical records show treatment has been provided to the worker prior to the date of injury."
- 4. This Authorized Nurse Practitioner agrees to the terms and conditions of the MCO.

5. The authorized Nurse Practitioner must refer you to an MCO Physician or your Primary Care Physician for care exceeding 180 days.

MCO TERMS AND CONDITIONS:

- EARLY RETURN TO WORK: The Physician, Chiropractic Physician, or Authorized Nurse Practitioner is required to describe the worker's physical capacities at each appointment and cooperate with all efforts to return the worker to light or modified duty. In order to monitor and update work status appropriately, Providence MCO requires injured workers be seen every two weeks when completely off work, and every month when on light duty. Exceptions must be well documented in the chart note.
- **REFERRALS:** The Physician, Chiropractic Physician, or Authorized Nurse Practitioner is required to make all referrals for specialty care, including physical therapy, to Providence MCO panel providers. **Panel providers can be found at** <u>www.providence.org/php/mco</u> or by calling the MCO at 503-574-7640 or 1-800-947-4707.
- **PRECERTIFICATION:** The Physician, Chiropractic Physician, or Authorized Nurse Practitioner is required to request precertification from Providence MCO for all nonemergency surgical procedures, invasive diagnostic tests, and non-emergency admissions. A list of procedures/treatments requiring precertification may be obtained by calling Providence MCO at 503-574-7640. Surgical criteria may be obtained by the medical provider on Provlink or by calling 503-574-7640 or 1-800-947-4707.
- **DISPUTE RESOLUTION:** The Physician, Chiropractic Physician, or Authorized Nurse Practitioner is required to cooperate with the Providence MCO Dispute Resolution Policy with regard to medical treatment plans, surgical disapproval, and administrative issues. A copy of the MCO Dispute Resolution Policy may be obtained on Provlink or by calling 503-574-7640 or 1-800-947-4707.
- **TIMELY RESPONSE TO REQUESTS FOR INFORMATION:** The Physician, Chiropractic Physician, or Authorized Nurse Practitioner is required to respond to requests for information from the workers' compensation insurer or from Providence MCO in a timely manner.
- **STATE OF OREGON LAWS AND RULES:** The Physician, Chiropractic Physician, or Authorized Nurse Practitioner or Physician Assistant is required to adhere to all statutes and workers' compensation administrative rules of the State of Oregon.

If your Primary Care Physician, Chiropractic Physician or Authorized Nurse Practitioner does not agree to these terms and conditions, he/she must notify your claims examiner or Providence MCO. You or your physician may contact Providence MCO for assistance in accessing an MCO provider. If your Primary Care Physician, Chiropractic Physician, or Authorized Nurse Practitioner continues to treat you for your work-related condition after being notified that you are enrolled by copy of this letter, it will constitute agreement to the terms and conditions of the MCO.

MEDICAL PROVIDER LIMITATIONS

MCO Chiropractic Physicians may act as attending physician and determine work status for 20 visits or 60 days, whichever comes first on the initial claim. Further treatment must be approved by the MCO. The MCO Chiropractic Physician may continue as Attending Physician and determine work status as long as care is approved by the MCO.

Qualifying **Non- MCO Chiropractic Physicians** may act as Attending Physician for 18 visits or 60 days, whichever comes first, on the initial claim, and may determine work status for not more than 30 days. If further treatment is needed this Chiropractic Physician must then refer you to an MCO Physician or Authorized Nurse Practitioner or a qualifying Non-MCO Primary Care Physician.

MCO Naturopathic Physicians may act as Attending Physician for 20 visits or 60 days, whichever comes first, from the first visit to any Naturopathic Physician or Physician Assistant on the initial claim and may determine work status for not more than 30 days. If further treatment/work status determination is needed, the Naturopathic Physician must refer you to an MCO Physician or Authorized Nurse Practitioner or a qualifying Non-MCO Primary Care Physician. Naturopathic Physicians may not make findings of permanent impairment.

MCO Physician Assistants may act as Attending Physician for 20 visits or 60 days, whichever comes first, from the first visit to any Naturopathic Physician or Physician Assistant on the initial claim and may determine work status for not more than 30 days. If further treatment/work status determination is needed, the MCO Physician Assistant must refer to his/her Supervising MCO Physician. The MCO Physician Assistant may then participate in your care as a Physician Extender under the direction of the Attending Physician. Physician Assistants may not make findings of permanent impairment.

MCO Authorized Nurse Practitioners and Qualifying Non-MCO Authorized Nurse Practitioners may provide compensable medical services for 180 days from the first Authorized Nurse Practitioner visit on the initial claim and may determine work status for not more than 180 days. If further treatment is needed the Authorized Nurse Practitioner must refer to an MCO Physician or a Qualifying Non-MCO Primary Care Physician. If the Authorized Nurse Practitioner is an MCO provider and working with an MCO Physician, he/she may continue to participate in your care as a Physician Extender under the direction of the MCO Attending Physician. Authorized Nurse Practitioners may not make findings of permanent impairment.

- If you live outside the MCO geographic service area, you may treat with a non-MCO medical service provider who is closer to your residence than a MCO provider of the same category. This provider must agree to the MCO's terms and conditions. However, if there is a Providence MCO provider closer to your residence than the non-MCO provider, you are required to treat with the MCO provider.
- Oregon law requires that enrolled workers have a choice of at least three providers in the following categories: M.D., D.O., Chiropractic Physician, Naturopathic Physician, Acupuncturist, Podiatrist, Optometrist, Psychologist, and Dentist. If there are not three providers in a category in your area, you may choose a provider in that category who is not a member of the MCO panel. You should verify with us that there are not three providers in that category within your geographic service area and advise us of your choice of medical provider. Treatment will be governed by the MCO's terms and conditions.

• All non-emergency inpatient hospitalizations or elective procedures must be pre-certified as medically indicated by the Providence MCO Utilization Management.

A directory of Providence MCO panel physicians and clinics may be found online at <u>www.providence.org/php/mco.</u> If you choose, you may obtain a printed version of this directory by calling Providence MCO at (503) 574-7640 or (800) 947-4707. For further assistance locating an eligible MCO provider, please contact Providence MCO.

DISPUTE RESOLUTION:

If you have a complaint about your medical treatment within the MCO, or if you believe that it would be medically detrimental for you to change to an MCO provider, you must submit your dispute to the MCO in writing within 30 days of the date of the disputed action. Failure to appeal to the MCO within 30 days of the disputed action will result in the loss of the right to appeal to the Director of Consumer and Business Services. Any party that disagrees with the MCO's final decision may request administrative review from the director within 60 days of the MCO's decision.

All disputes must be submitted to:

Providence MCO Dispute Resolution Coordinator PO Box 4347 Portland, OR 97208

The Dispute Resolution Coordinator may also be reached by phone at: 1-800-947-4707 or 503-574-7640.

If you have further questions about the MCO or need help accessing medical treatment, you may contact your claims examiner or the Providence MCO staff at 1-800-947-4707 or 503-574-7640.

Sincerely, RISK MANAGEMENT SERVICES

Viki Bisby

Viki Bisby Senior Workers' Compensation Disability Analyst

cc: Providence MCO Randolph Cribbs, MD-Providence Occupational Medicine

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