

California law allows employers to direct injured employees to a Medical Provider Network (MPN) for medical treatment. Liberty Mutual Managed Care (LMMC) offers several state-approved MPNs comprised of a customized subset of the Anthem Blue Cross PPO and the Kaiser On-the-Job occupational program.

As an MPN participant, it is important that you review and understand the following information and your responsibilities regarding the program. Non-compliance with state rules and regulations or with the protocols in this document could result in disruption of payment of medical bills and/or removal from the MPNs.

LMMC has identified a select group of medical providers for inclusion in these MPNs and, as a result, expects them to provide timely and appropriate health care to injured workers in accordance with evidence-based medicine practices including but not limited to California's Medical Treatment Utilization Schedule (MTUS). It is paramount to coordinate clinical case management with the employer and the MPNs.

What clinical practices does the MPN require of you?

- Use of reasonable, evidence-based medicine practices (e.g., for procedures, diagnostic tests and any prescriptions) and clear descriptions of work capacity to facilitate safe and timely Return-to-Work
- Submission of timely and appropriate communications (including answering and returning calls from Claims staff, Peer Reviewers, Nurse Case Managers, and/or Regional Medical Directors, as well as timely responding to written requests for information)
- Providing case strategy and expected outcomes for treatment requests (e.g. document treatment requests, describe anticipated results and document outcomes)
- Additional details on the Clinical Practice Requirements are available on our Provider Support website.

What are the administrative requirements?

- Comply/cooperate with California Workers' Compensation rules and regulations, including but not limited to:
 - Medical Treatment Utilization Schedule (MTUS) and Utilization Review (UR)
 - Reporting requirements as outlined in CCR 9785 et al.
- Comply/cooperate with all contractual terms and conditions. This includes but is not limited to:
 - Accepting new patients
 - Treating only accepted work-related injuries or illnesses, specific to the accepted body part
 - Referring within the MPN for specialty care. This includes but is not limited to referrals to specialists, surgery centers, diagnostics, physical therapy, or other ancillary services.
 - Compliance/cooperation with LMMC's medical management procedures. This includes but is not limited to LMMC's pharmacy benefit program. We recommend that physicians provide patients with a written prescription which the patient can fill using his or her prescription card. This allows the

claimant access to the MPN pharmacy network to procure his/her medication and to avoid out of pocket expenses. It also ensures that prescriptions are checked for potentially dangerous interactions, and are consistent with evidence-based guidelines and/or formularies.

- Using appropriate and up-to-date billing practices (e.g., use of coding based on services provided).
 - Reimbursement rates are determined by the provider's network contract, so any concerns should be addressed with the network's contracting team. Our California Billing Guidelines, available on our Provider Support website, list the situations in which we may pay for services that are not ordinarily covered under California's Official Medical Fee Schedule (OMFS). Providers should not ask for additional payment outside of these guidelines.
 - Billing disputes must be handled through the dispute-resolution process outlined in the network contract. MPN providers should never submit bills on a lien basis.
- Uphold high ethical standards. Physicians should not refer to facilities or programs in which the physician has a financial interest, except when expressly allowed by law and/or when prior authorization is given.

How should a provider request authorization for treatment?

California law requires Requests for Authorization to be submitted in writing, using DWC Form RFA. This form is available on our Provider Support website. Please fax the completed form to (603) 334-8141.

How does LMMC determine which providers should be included in an MPN?

Providers are evaluated based on the criteria listed above. For details on the selection and evaluation process, you may refer to our Provider Support website under Frequently Asked Questions.

LMMC measures patient outcomes through Provider Performance Evaluations (PPE's). LMMC provides all impacted providers with their PPE results. If these results show areas of concern, LMMC may ask providers to provide a plan to address them. In addition, Claims staff and other stakeholders may file Provider Incident Forms (PIF's) to report issues or concerns. LMMC strives to resolve these PIF's as amicably as possible, so in most cases, the provider will be contacted by the network to resolve any misunderstandings or opportunities for improvement.

If a provider fails to adequately address areas of concern in a PPE, or if a provider receives three or more PIF's within a rolling 12-month period, LMMC will review to determine if further action is warranted. This may include, but is not limited to, removal from the MPN. Providers may be removed immediately upon notification of the filing of any formal indictment, accusation, charge, order or judgment by any governmental or regulatory entity, law enforcement agency, licensing agency and/or court of competent jurisdiction involving failure to meet the proper standard of care, patient safety, allegations of fraud, criminal conduct, or other deceitful or intentional conduct.

What do you do if you need additional information?

- Our Provider Support website includes more detailed information at www.libertymutualprovidersupport.com.
- To review our MPN listings:
 - The Liberty Mutual Group MPN listings are available at www.libertymutualprs.com.
 - A complete listing of all MPNs managed by LMMC is available at business.libertymutualgroup.com/business-insurance/claims-process/provider-networks.
- Anthem's Workers Compensation website is at www.anthemwc.com.
- The State of California's home page regarding Workers' Compensation is at www.dir.ca.gov/dwc.

Thank you for your participation/cooperation in our MPNs. If you have questions or feel you cannot meet the requirements of the MPN program, please contact us immediately by e-mail at LMGMPN@libertymutual.com.