

Texas Health Care Network

Employee's guide to the implementation of the
Texas Health Care Network



Topics to be Discussed

- ◆ What is the Texas Health Care Network (HCN)?
- ◆ Employee responsibilities under the HCN.



Texas Health Care Network (TX HCN)

What is it?

- ◆ The Texas Health Care Network (HCN) is a certified network of medical providers trained to treat on-the-job injuries.
 - ◆ These providers focus on ensuring injured workers receive appropriate medical treatment needed to treat the work-related injury in a timely and effective manner.
 - ◆ They also focus on returning the injured employee back to work as soon as it is safe for the employee to do so.
- ◆ All medical providers in the Texas HCN have been certified to treat your work related injury by the Texas Department of Insurance.

Employee's Roles and Responsibilities

- ◆ If you are injured at work, tell your supervisor or employer immediately and seek appropriate medical care.
- ◆ If the injury is a “medical emergency” seek medical care immediately at the closest medical facility.
- ◆ After you receive initial emergency care, and require ongoing care, you will need to select an in-network doctor if you live within the service area from the list provided by your employer.

Employee's Rights and Responsibilities - continued

- ◆ The doctor you choose will oversee the care you receive for your work related injury. Except for the initial emergency care, if necessary, you must obtain all health care and specialist referrals through your treating doctor, who acts as the treatment “gatekeeper.”
- ◆ A list of in network providers are posted in your workplace or can be obtained from your employer.

Ongoing Medical Care

- ◆ If you choose to obtain medical care (except for initial emergency care) outside of the network, you may be responsible for payment for these services.
- ◆ If you were injured before your employer's insurer contracted with the network and you live in the service area, you must choose a network treating doctor within 14 days of completion of this training.
 - ◆ There are some exceptions to this which are noted in the implementation documents and will be discussed during this presentation.
- ◆ At the time of injury you will be given a letter to take to your provider acknowledging your participation in the Texas HCN.

Exceptions to the HCN Provider Selection Process

- ◆ You can access non-network health care providers and remain eligible for coverage of your medical costs if one of the following situations occurs:
 - ◆ Required emergency care or services for your work related injury.
 - ◆ You live outside the service area of the network.
 - ◆ Your in-network treating doctor refers you to an out-of-network provider or facility.
 - ◆ This referral must be approved by the insurer or the Workers' Comp Network.
 - ◆ If you are a member of a Health Maintenance Organization (HMO).

If You Are Part of an HMO

- ◆ If you are part of an HMO at the time you are injured, you have the right to choose your HMO primary care doctor as your treating doctor.
- ◆ To do this, you must have chosen the doctor as your primary care doctor BEFORE your work related injury occurred and had received treatment from this provider prior to the injury.
- ◆ Additionally, your HMO doctor must agree to abide by the terms of the workers' compensation network contract and comply with required laws.

Referrals and Complaint Process

- ◆ Your primary treating doctor is responsible for referring you to other medical specialists as necessary.
- ◆ If you seek specialist services without this referral, you may be financially responsible to pay for these services.
- ◆ If you should become dissatisfied with your medical provider or medical treatment, there is a formal grievance process in place.
 - ◆ Additional information is included within the implementation documents.

Notification Process

- ◆ Following this presentation you will receive a document called “Employee Notification.” This document will explain in more detail your responsibilities and rights related to the Texas HCN.
- ◆ You will receive this document or a similar document at one of the following times:
 - ◆ **Time of network implementation**
 - ◆ **When you report an injury**
 - ◆ **If you are a new hire post network implementation**

Notification Process - continued

- ◆ You will be required to sign an acknowledgement form noting your understanding of the Texas HCN requirements and your responsibilities following one or more of the above situations.
- ◆ Return the signed acknowledgment document to your supervisor or employer immediately.
- ◆ If you choose not to sign the acknowledgement document, you will still be subject to all network requirements.

Questions?

- ◆ If you have questions regarding the Texas Health Care Network, please contact your immediate supervisor.
- ◆ Thank you for your participation.