

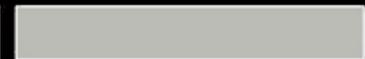
total managed care solutions.



Kentucky Managed Health Care Plan

Commonwealth of Kentucky

Program Overview 2007



Commonwealth of Ky offers a KY MHCP:

- The MHCP program is provided by comp mc.
- The program includes comprehensive clinical, Network, Bill Review and quarterly Quality Improvement services.
- The program is voluntary and is available in all 120 counties plus four Indiana counties (Clark, Floyd, Harrison and Vanderburgh)
- There will be network direction at the onset of injury through RTW.
- Claims on or after 7/1/07 will be managed under this program.

Proposed Implementation Plan:

- Target date of implementation is 7/1/07.
- Cases with dates of injury after 6/30/07 will be managed through this program.
- Employer should submit First Report of Injuries (FROI) to your claim administrator, CCMSI.
- Allow injured worker to choose a Gatekeeper
- Employer and Adjusters need to review responsibilities and determine who will perform activities.

Employer Responsibilities:

- Train employees (as needed)
- Complete First Report of Injury (FROI)
- Channel to the Gatekeeper
- If injured worker provides you with a medical record pertaining to the injury, fax copy to comp mc's confidential fax, 502-426-9516.

Definition of documents:

- **Notice of Enrollment Letter** provides summary of requirements and restrictions of the program;
- The **What to Do When an Employee Reports an Injury** is an overview of requirements.
- **Form #113 First Designated Physician** allows the selection of a gatekeeper
- **ID card** confirms the gatekeeper
- **Form #113 Second designated physician** allows injured employees to change designated physicians one time without prior approval
- **ID card** confirms the change of physicians

- **Form #106** allows the adjuster to obtain the necessary information to handle the claim
 - **Prescription Card/Letter** enables the injured worker to obtain prescriptions related to the work injury with no out of pocket expenses
 - **Patient Encounter Form** provides the injured worker, employer and adjuster prompt notice of diagnosis, work status, etc.
 - **Employee Guide** provides injured worker a quick reference of rights, responsibilities and contact information
- ***The Adjuster will be responsible for distributing these documents.

Review of activities “At time of Injury”

- Employer will complete FROI and send it to the Adjuster
- Employer will distribute instructions to the injured worker
- The adjuster will send a referral form to comp mc to initiate UR.
- The adjuster or employer will direct to the network as necessary

Employee Selection of a Gatekeeper

The injured worker is allowed to select a gatekeeper. The adjuster will send the employee a form 113.

The injured worker must select a gatekeeper and return the completed form to the adjuster. Upon receipt of the form, the adjuster will send an ID card.

The injured worker may change gatekeepers once without consent. If the injured worker requests a second change, another form 113 must be completed and another ID card will be sent by the adjuster.

Cases will be medically managed by comp mc:

- Adjusters will initiate UR with comp mc for cases involving hospital admissions, requests for surgery, referrals to a specialist, requests for a second opinion, requests for ancillary care (except for routine laboratory and x-rays), and requests for repeat diagnostic tests such as MRI and CT scans.
- comp mc will work with Injured workers, Adjusters, providers and employers to facilitate RTW;
- All cases will be overseen by a state-licensed medical director and certified case manager;
- There are also retrospective triggers through bill review to initiate review on cases that cumulatively exceed \$3K.

Network Channeling

- For emergencies - refer to the nearest hospital.
- For all other care - direct to the gatekeeper or other network providers.

Non-network services are acceptable when:

- There is an emergency for initial or follow up care.
- When the emergency care physician agrees to comply with the program's requirements.
- When specialty care is not available in the network.
- For a second opinion when surgery is recommended.
- For prior injuries that occurred before implementation.

Network Channeling Tools include:

- Worksite Posters and County Postings
- Telephonic directory at 866-361-6899
- Electronic directory is available on the Kentucky Personnel workers' compensation website:

www.personnel.ky.gov/benefits

Grievances

- All grievances may be submitted to comp mc at 866-361-6899, ext. 3050. comp mc will respond to grievances involving its KY MHCP services.
- The adjuster will handle any issues involving compensability, eligibility and payment
- Resolution needs to occur within 30 days of the request.

***Note - The griever may appeal to the administrative law judge for final resolution.

Sample materials Provided:

- Employer Presentation
- Directory Listing & Gatekeeper Excel Report
- Sample copies of:
 - Notice of Employer and Employee Enrollment letter
 - Injured worker Instruction Sheet
 - Employee Guide
 - Postings
 - Prescription card services
 - Employee Verification Form
 - Gatekeeper Form 113
 - ID Card
 - Grievance Procedure

Reporting Requirements:

Employers may be asked to assist with certain reporting requirements, including:

- Confirming # of employees treated by plan
- Calculating # of days by type of injury or disease employee has been released from work

Questions or Comments

comp mc Managed Health Care Plan