



SAMPLE EMPLOYEE NOTICE

Date

Injured Employee Name
Injured Employee Address
Injured Employee City, State, Zip

RE: *Injured Employee Instructions, Rights and Obligations about Your Work-Related Injury or Illness*

Employee / Empleado:	Injured Employee Name
Employer / Empleador:	Employer Name
Claim Number / Num de Reclamo:	Claim Number
Date of Injury / Fecha de lesion:	Date of Injury
Insurer / Aseguradora:	Insurer Name

Dear Injured Employee Name

Employer Name participates in the EMPLOYERS Georgia Managed Care Organization Plan (EMP GA MCO). This plan works in combination with Employer Name's workers' compensation carrier, Insurer Name and Coventry Health Care Workers Compensation, Inc, a national managed care company. The EMP GA MCO is a certified plan that provides access to medical care for workers who have work-related injuries or illnesses. The role of the EMP GA MCO is to ensure that the medical and health care services you receive are provided in a timely and effective manner that meets your needs.

Your employer and adjuster can answer your general questions about the program and how to get medical care and treatment through the EMP GA MCO. In addition, you may obtain general information about the EMP GA MCO by dialing **1-800-262-6122**. There are also postings at your workplace, which reflect relevant information.

What to do if you are injured while on the job...

- **REPORT YOUR INJURY** - You must report your work-related injury to your Supervisor immediately. Your Supervisor will call Injured Employee Hotline at **1-855-365-6010** to initiate your claim and to speak with a Coventry Triage Nurse, who will call to confirm your need for medical attention. If you need immediate medical attention, the Triage Nurse will help direct you where to go.

America's small business insurance specialist[®]

tel 888 682-6671 | PO Box 32036 | Lakeland, FL 32036 | www.employers.com

EIG Services, Inc., an affiliated agency and adjuster

Employers Preferred Insurance Company | Employers Assurance Company
Employers Compensation Insurance Company | Employers Insurance Company of Nevada

- **SEEK EMERGENCY CARE** - If your injury requires immediate, emergency care, or after-hours care, go to the nearest hospital or urgent care facility. Emergency care is defined as a medical condition that if left untreated could lead to disability or death; or when one seeks to alleviate severe pain, only.
- **LOCATE A PHYSICIAN**—If you do not require emergency medical treatment, contact your adjuster at 1-888-682-6671 or visit the provider locator website at www.employers.com. Go to For Injured Workers tab and select Provider Locator, then Georgia to locate a provider within your Geographical Service Area (GSA). You must use a provider within your GSA. A Word document ID card is enclosed. Cut out this card and keep it in your wallet to access the toll free numbers for obtaining an EMP GA MCO provider.
- **TREATMENT** - You must receive an initial evaluation or treatment from your choice of physician from the GSA within 24 hours of reporting your work-related injury to your employer, unless you require immediate emergency care. Contact your adjuster at **1-888-682-6671** or Coventry at **1-800-937-6824** options 1, 1, and 1 for assistance in locating a provider. A representative is available to assist you in the selection of a treating physician. The selected treating physician you choose will be responsible for overseeing the medical care and treatment you receive for your work-related injury.
- **Change of Physician** - You may change your treating physician within the network one (1) time only without prior approval. Notify your adjuster about your choice of physicians. If you need to make any subsequent changes to providers, contact your adjuster noting the reason for the change. Your adjuster will review your request and respond whether the request is approved.
- **ACCESS TO NON-NETWORK PROVIDERS:** You must attempt to use EMP GA MCO providers within your GSA whenever possible. Coventry provides reasonable access to hospitals and primary care providers within your GSA. Below are the circumstances under which you may access a non-network provider:
 - For emergency or after-hours urgent care;
 - If your injury and subsequent treatment occurred prior to the implementation of the EMP GA MCO;
 - When a provider in the specialty needed is not available through the EMP GA MCO;
 - By prior approval of your Employer and/or Coventry; or,
 - If the State instructs you to see a specific provider.

You must call your Adjuster for approval prior to seeking care with a non-network provider at: **1-888-682-6671**.

- **SUBMIT CARE THROUGH UTILIZATION REVIEW (UR)** – EMPLOYERS requires certain services be reviewed for medical necessity using evidenced-based treatment guidelines. Give the provider the “**Instructions to the Treating Provider**” letter attached to this document to make sure your physician contacts EMPLOYERS for UR at **1-888-441-9223** to initiate the process.

EMPLOYERS or Coventry will send you and your provider a notice indicating if the services are certified. In the event your services are not certified, you will receive a written non-certification recommendation. You and your provider have the right to appeal the non-certification decision

with Coventry. Instructions for filing a utilization review appeal will be included in the non-certification recommendation.

- **File a Dispute** – You may submit a dispute for the following reasons:
 - To appeal a non-certification recommendation,
 - To dispute any component of medical care, or
 - To request a change of treating physician.

The instructions for filing a dispute and a copy of the Dispute/Grievance form are attached to this Employee Notice.

- **REFER TO A SPECIALIST** - Your physician must refer in the EMP GA MCO network whenever possible unless the circumstance allows access to a non-network provider. (See “Non-network Exceptions”). You or your provider may view the network listing of providers by contacting at your adjuster at 1-888-682-6671 or visit the provider locator website at www.employers.com. Go to For Injured Workers tab and select Provider Locator, then Georgia.

In the event you are unable to locate a provider in the specialty you need, you may be able to use a non-network provider. (See “Non-network Exceptions” below to see if your circumstances qualify). Your treating physician **must receive approval** to refer to a non-network provider by contacting your Adjuster.

- **USE OF CASE MANAGEMENT** – Under certain circumstances, your Adjuster will initiate case management activities on your behalf with EMPLOYERS or Coventry. A Case Manager may contact you to help coordinate your treatment plan in an effort to assist in your recovery process and to expedite your return to work. If you require case management services, please contact **1-888-682-6671**.
- **ASK QUESTIONS ABOUT COMPENSABILITY, ELIGIBILITY, BENEFITS OR PAYMENT** – For questions involving any of these topics, you should contact your Adjuster at **1-888-682-6671**.
- **FILE A GRIEVANCE (NON-MEDICAL ISSUES)** – You, your representative or your treating physician have the right to file a grievance/dispute against EMP GA MCO if you are dissatisfied with any services associated with the EMP GA MCO program. A copy of the Grievance Process and Form is attached to this Employee Notice. To submit a grievance, you must complete the grievance form and submit it to: EMP GA MCO Grievance Coordinator, 3200 Highland Ave., Downers Grove, Illinois 60515. If you have any questions about the grievance process, you may call Coventry at **1-800-262-6122**.

Within seven (7) days, Coventry will send you an acknowledgement confirming receipt of the grievance. Within 30 days after the grievance is filed, Coventry will resolve or make a final determination of the grievance.

If you are dissatisfied with the resolution of the grievance, you may file the issue with the State Board of Workers’ Compensation.

Sincerely,

EMPLOYERS Claims Department



Phone: 888-682-6671
Fax: 866-461-2934

Enclosures: ID Card
EMP GA MCO Physician Instructions
Grievance Form

cc: [Worker's Representative](#)
[The Medical Provider](#)

SAMPLE



America's small business insurance specialist®

EMPLOYERS Georgia Managed Care Organization (EMP GA MCO) ID Card

Dear Injured Employee,

EMPLOYERS has selected to partner with Coventry Health Care Workers Compensation, Inc. (Coventry) to provide medical services through EMPLOYERS Georgia Managed Care Organization (EMP GA MCO). The EMP GA MCO is a certified plan that provides access to medical care for workers who have work-related injuries or illnesses. The role of the EMP GA MCO is to ensure that medical and health care services you receive are provided in a timely and effective manner that meets your needs.

To help you find a provider, call Coventry at 1-800- 937-6824 options 1, 1 and 1 or visit the provider locator website at www.employers.com and go to the For Injured Workers tab, select Provider Locator and then Georgia.

Present the Identification Card when seeking medical care with an EMP GA MCO provider. Possession of the ID card shall not be interpreted as authorization for medical service or payment. This card provides important contact information.

Cut along lines and place in wallet



EMP GA MCO

1-800-937-6824 options 1, 1, and 1

If you have a work-related illness or injury, immediately contact your Supervisor.

If you need emergency medical care or care after hours, go to the nearest Hospital facility. If you need care but it is not an emergency, you must use an EMP GA MCO Provider. Call the toll free number above to obtain a list of MCO physicians in your geographic service area.

Supply this card to the provider prior to every visit.

Employer Name: _____

Carrier: _____

Injured Employee Hotline: 1-855-365-6010

Adjuster Phone: 1-888-682-6671

EMPLOYERS UR & 1-888-441-9223

Case Management:

UR Fax: 1-702-671-7676

Note: Possession of verification or ID card is not to be construed as authorization for medical service or payment.

INSTRUCTIONS TO THE TREATING PROVIDER:

Please give the following to your provider.

Employers Compensation Insurance Company, Employers Preferred Insurance Company, or Employers Assurance Company (EMPLOYERS) has implemented the EMPLOYERS Georgia Managed Care Organization (EMP GA MCO) program, which is supported by Coventry Health Care Workers Compensation, Inc. (Coventry).

Coventry has made its EMP GA MCO Provider Reference Manual available to you on its website at www.coventrywcs.com to explain the rules and responsibilities of the program.

Please call EMPLOYERS at 1-888-441-9223 for utilization review pre-certification services or fax your request to 1-702-671-7676. When calling, please have the Injured Worker's name, Social Security Number, and Employer name.

List of recommended services for UR includes:

- Physical Therapy > 6 visits
- Chiropractic treatments > 6 visits
- Acupuncture > 3 visits
- Repeat Diagnostics
- Myelograms
- Discograms
- Inpatient hospital stays
- All surgeries
- IDET
- Psych Testing
- Weight Loss Programs
- Neurocognitive Rehab
- Other Rehab Services
- Gym Memberships
- Nursing Home Admissions
- Home Health Aides
- Biofeedback
- Interferential Units
- Bone Growth Stimulators
- Vax-D
- Chemical Dependency Programs
- Inpatient Pain Management Programs
- Work Hardening/Work Conditioning > 2 wks
- DME > \$500(electric wheelchairs, certain back braces)
- Experimental Procedures (e.g., Prolotherapy, Disc Replacement)

If you need to locate a specialist, please refer within the EMP GA MCO Network. You may call Coventry at 1-800-937-6824 options 1, 1, and 1 or visit the provider locator website at www.employers.com. Go to For Injured Workers tab and select Provider Locator, then Georgia to locate a provider within the patient's applicable Geographic Service Area (GSA).

America's small business insurance specialist[®]

EIG Services, Inc., an affiliated agency and adjuster

*Employers Preferred Insurance Company | Employers Assurance Company
Employers Compensation Insurance Company | Employers Insurance Company of Nevada*

Coventry
Dispute/Grievance Form
 (Please PRINT Clearly)

DATE:	INITIATOR'S NAME:	INITIATOR'S PHONE #: ()
CLIENT NAME:		EMPLOYER NAME:
INJURED WORKER'S NAME (FIRST, M, LAST):	DATE OF INJURY:	SSN#:
PROVIDER NAME (FIRST, M, LAST or Facility Name):	PROVIDER TITLE:	PROVIDER PHONE #: ()
PROVIDER OR FACILITY ADDRESS (Street, City, State and Zip):		
PROVIDER OR FACILITY TAX ID #:	DATE OF DISSATISFACTION:	

Please describe your complaint in detail below. Include dates, names, and the specific resolutions that you feel might remedy the situation.
PLEASE ATTACH COPIES OF APPLICABLE MEDICAL RECORDS TO THIS FORM.

THIS ISSUE INVOLVES (check all that apply): Service _____ Medical Care _____ Other _____

REQUESTED ACTION:

SIGNATURE:

FORWARD FORM TO: COVENTRY COMPLAINTS & GRIEVANCES, 3200 HIGHLAND AVE, DOWNERS GROVE, IL 60515
 E-mail: complaintsandgrievances@cvt.com
 Phone Number: 800-262-6122

Your Rights & Obligations when filing a Grievance:

Any grievance must be filed on this form and submitted to the Grievance Coordinator at the address identified on this form. The formal written grievance must be received by the Grievance Coordinator of the certified plan. Coventry will respond to the grievance as quickly as possible and will submit a decision on the grievance within thirty (30) days of receipt of said grievance. If you are dissatisfied with a decision rendered by the Coventry Grievance Committee, you may appeal the decision. For any questions on the grievance or appeal procedure, please call the toll-free 1-800-262-6122.