Employer Frequently Asked Questions

1. What is a medical provider network (MPN)?

A medical provider network, or MPN, is a network of providers, including physicians, that is used to help manage medical costs by directing injured employees to a select group of providers expert in treating workers compensation injuries. More specifically, the medical provider network relates to CA Labor Code 4616 that allows insurers and self-insured employers to direct injured employees to an MPN for medical treatment if they receive State approval for the network.

Insurers, self-insured employers, or an entity that provides physician network services (as defined in the Labor Code, section 4616.5) must create this network and submit it to the State for approval before injured employees can be directed for care.

2. What is the employer's role in implementing our MPN?

Unless an employer chooses to opt out of the MPN, they are automatically considered to be in the MPN.

To complete this process, fill in the MPN section of the CA Notice to Employees – Injuries Caused by Work form DWC 7 displayed at each of your California locations. The following information should be entered on the form:

- MPN website: [www.helmsmantpa.com/CAMPN](http://www.helmsmantpa.com/CAMPN)
- MPN effective date ___/___/___ (insert MPN implementation date)
- MPN identification number: 2411
- If you need help locating an MPN physician, call your MPN access assistant at 800-944-0443.
- If you have questions about the MPN, call the MPN contact person at 844-208-1659
- Claims administrator: Helmsman Management Services
- Choose claims office telephone number:
  - Portland, OR: 800-424-0054
  - Glendale, CA: 800-281-1120
  - Rocklin, CA: 800-821-0967
- Workers compensation insurer: (insert insurer name or, for self-insured companies, insert “self-insured.”)
- Information and assistance officer information: (this is found on the California Department of Industrial Relations website: [http://www.dir.ca.gov/dwc/dir2.htm](http://www.dir.ca.gov/dwc/dir2.htm))

The DWC 7 form can be found on the CA Division of Industrial Relations website ([http://www.dir.ca.gov/dwc/forms.html](http://www.dir.ca.gov/dwc/forms.html) under Legacy Forms)

Should you choose to opt out of the MPN, send an email to CAMPN@libertymutual.com with the following information:

- Company name
- Full policy number
- A statement indicating that your company chooses not to implement the MPN and is opting out.

Revised 08/2017
3. Must the employee notification be provided in both English and Spanish at the time of injury to an injured worker?

The MPN employee notification must be provided in English, or Spanish for Spanish-speaking employees.

4. Do employers need to notify all employees when the MPN is implemented?

This was a past requirement of the MPN. As of August 27, 2014, this is no longer necessary.

5. Does the MPN apply to employees with claims prior to January 1, 2005 or prior to the implementation of the MPN?

Yes, the MPN applies to all dates of loss (see section 9767.9, Transfer of Ongoing Care into the MPN). However, there are certain exceptions that include:

- An acute condition resolving within 90 days.
- A serious chronic condition, for which treatment shall be provided for a period of time up to one year.
- A terminal illness, as defined as an incurable or irreversible condition that has a high probability of causing death within one year or less.
- A surgical or other procedure that is authorized by the insurer or employer as a course of treatment that is to occur within 180 days of the MPN effective date.

We examine the ability to transfer injured employees into the MPN on a case-by-case basis, as there will be instances where the preferable process will be to keep an injured employee with their current treating provider. Also, employees that have properly designated a personal physician by notice to the employer prior to the date of injury (see Labor Code 4600(d) for specifications) may treat outside the MPN.

6. Do employees with existing injury claims have to transfer their treatment to an MPN provider?

Yes, except as noted above in question 5. However, the claim case manager will review older claim files to make the best decision considering all of the claim facts and medical issues.

7. Does the employer have to pay for treatment rendered outside the MPN?

If an injured employee treats outside the MPN and self-procures the treatment, the treatment will only be covered if he or she has authorization from his or her claims specialist. Without authorization, treatment outside the MPN may not be covered under the accepted workers compensation claim.

8. If an employee predesignates a treating physician, who will monitor the predesignation to verify that the provider has treated the employee in the past and agrees to treat the employee for workers compensation injuries?

Although this is not addressed in the Labor Code, the employer should do this when they receive the employee’s predesignation. It is then our intent to have Claims, at the time an injury occurs, verify with the predesignated physician that the injured employee has treated with them previously and the physician agrees to treat the employee for his/her workers compensation illness or injury.

9. What happens when a predesignation is determined to be invalid or the provider does not agree to be predesignated?

The injured employee must receive medical treatment from providers within the MPN.

10. Can a chiropractor or acupuncturist be a predesignated provider?

Not if the MPN is implemented. However, they can be a primary treating physician chosen from the MPN if the injury is within their scope of practice.
11. How does an employer know which providers are part of the Liberty Mutual Group MPN?

Access to the MPN is maintained through our Provider Referral Service (PRS) online directory. You may access PRS using the URL www.helmsmanpa.com/prs. You may choose either a radius or specific city(ies) to create a directory. We recommend customers review all worksite posters, sometimes referred to as a medical provider listing or provider panel. Provider lists should be updated annually to reflect the MPN list of providers. Customer service representatives can assist you in identifying non-network providers treating injured employees and can suggest alternative MPN providers.

12. How can an employer recommend providers for the MPN?

Provide your service representative with the name, address, phone number, and provider type.

13. After the MPN implementation is completed, is there anything else we need to do?

- When an injury occurs, if a non-emergency injury, please direct the injured worker to an MPN provider.
- Report every claim immediately.
- We will provide the injured worker with the required Complete MPN Employee Notification. This will be provided in English, or in Spanish if Spanish is the injured worker’s primary language.

14. What is a medical access assistant (MAA)?

An individual provided by the MPN to help injured workers with finding available medical provider network physicians of the injured workers’ choice and with scheduling provider appointments. The MAA will assist with scheduling an appointment for the first treatment visit in the MPN and an initial appointment with a specialist in an appropriate referred specialty. The MAA can be reached at 1-800-944-0443 from 7 a.m. to 8 p.m. Pacific.

15. What is an MPN contact?

An individual responsible for responding to complaints, for answering employees’ questions about the MPN, and for assisting the employee in arranging for an MPN independent medical review pursuant to L.C. section 4626.4. The MPN contact can be reached at 1-844-208-1659 from 8 a.m. to 5 p.m. Pacific.

16. Cessation or termination of an MPN – what does this mean?

Cessation of use means the discontinued use of an implemented MPN that continues to do business. Termination means the discontinued use of an implemented MPN that ceases to do business. If an employer ceases to be insured with their insurance carrier, the employer would need to notify their injured covered employees that they are no longer using the MPN. We have sample notifications that can be used to notify the injured covered employees in the event this should occur. For self-insured or customers who have insurance with another carrier and use our services to administer claims, there are different termination and cessation requirements since those customers have their own MPN plans. Our network specialist will coordinate the communication needed with the CA DWC for those entities.

If a customer chooses to cease use of our MPN, we have drafted sample letters which can be used. There are different letters depending on the scenario for termination. See below:

Scenario 1: We continue to insure the employer, but new claims will not be handled under the MPN.

Scenario 2: We are no longer the customer’s insurer. Existing claims will stay in our MPN, but new claims after the policy termination will not be covered by our MPN.
For additional information about the CA MPN:
The MPN Labor Code is Section 4616-4616.7, and is available at the State's DWC website. Using the below link, scroll down to PART 2. COMPUTATION OF COMPENSATION; ARTICLE 2.3. Medical Provider Networks: California Legislative Information

The MPN regulations can be viewed at the DWC Forum site.