



Aetna Workers' Comp Access

**Offered by
Utica National Insurance Group**



Utica National Insurance Group
Insurance that starts with you.®

Contact Information



Aetna Workers' Comp Access (AWCA)

Aetna Texas Workers' Compensation Certified Network

- Provider Directory:
 - Assist employee in finding a TREATING DOCTOR by looking up doctors on Aetna's DocFind on:
<http://awca.aetna.com>
 - (Client ID #157535) or calling 1-866-417-8017
- Pharmacy Directory:
 - <http://www.AetnaWCRx.com> or 1.866.757.7832
 - Complaint Coordinator (to report a complaint on a Network Provider): 1-866-417-8017
 - or write to:

AETNA Workers' Comp Access Network

Attn: Complaint Coordinator
4300 Centreway MS-756
Arlington, Texas 76018



Utica National
Insurance Group

Utica National Insurance Group

- Southwest Regional Office: 1.800.678.8422
- Underwriting Fax Number 972.677.6801
- Report a New Claim: Complete First Notice of Loss and report the loss to Uti-CARE at 1.800.284.3806
 - Provide copy of the signed or witnessed Network form at the time of the injury
 - Include a wage statement
 - Report loss the day of the injury wherever possible
- Claim Fax Number: 315.266.4127
- Claim Mailing Address:
Utica National Insurance Group
PO Box 6554
Utica, NY 13504-6504



UniMed Direct

Preauthorization FAX: 1-877-UMD-NTWK (863-6895)
UniMed Direct
PO Box 262001
Plano, TX 75026-2001
866-931-5100

ENROLLMENT



Employer Enrollment Steps

ENROLLMENT

Employer Enrollment Instructions

- The Aetna Network has partnered with our workers' comp insurance carrier for the enrollment process of your employees. Each employee must be properly notified in English, Spanish, or if greater than 10% of your employees speak another language, it must be available in that language as well. Let us know about your translation needs and we will ensure that you get appropriate materials.

Step 1: Advise all employees as soon as you agree to have a Network endorsement on your policy. ([See page 10](#))

Step 2: Distribute Employee Network information to all employees and obtain a completed and signed Workers' Compensation Network Acknowledgement Form from each employee. ([Packet starts on page 11](#))

- *Note: You must also distribute this information for all future new hires and/or rehires and obtain a completed and signed Acknowledgement Form from each of these employees.*
- *The Acknowledgement Form must also be submitted along with the First Notice of Loss at the onset of a new injury.*

Step 3: Post "AWCA Network Requirements Information Notice" at each place of employment ([See page 6-7](#))

- *Note: If there is a prior work related injury, which occurred **prior to the Aetna Network implementation date**, the employee must select a treating doctor from the AETNA Network when notified. If the injury was covered by your previous carrier or employer of your employee, the employee must follow the Network procedures for that carrier. If the employee is unable to choose a new treating doctor from within the Aetna Network within 14 days of the notice, the adjuster, Aetna, or a case manager can choose one for your employee.*

Step 4: Enroll employees in the AETNA Workers' Comp Access Network Acknowledgement Log and update regularly with all employee information. ([Acknowledgement Log](#))

Step 5: Finalize your endorsement credit with your insurance carrier by faxing the Acknowledgement Log to your Agent within 60 days from the effective date of the endorsement.



Step 2: Distribute Enrollment Information

Each employee must receive the Aetna Network brochure listing his or her rights and information regarding the Network. Additionally, all employees must have access to the detailed employee enrollment packet and access to the Aetna Network list of doctors. The detailed packets could be posted online, available for printing, delivered to each employee, or available at a centralized location (e.g. HR Dept) for distribution. All notices must be available in English, Spanish, and if greater than 10% of your employees speak another language, it must be available in that language as well. Let us know about your translation needs and we will ensure that you get the appropriate materials.

ENROLLMENT

- There are many ways to disseminate this information to your employees. We recommend that you incorporate this process into your standard employee communication protocol. Examples of how enrollment can take place include any of the following:
 - Hold staff meeting
 - Mail brochure to each employee
 - Attach brochure to employee check stub
 - Post information on internal website
 - Provide the complete formal information packet
- Notification must be made to each employee
 - At the time of kick-off of this new Network benefit
 - Within 3 days of hire
 - At the time of injury
- It is important for each employee to be properly notified. Failure to notify employees prior to the injury allows the employee to go to any doctor they want to under the current WC rules.
- Employer's burden of proof is simply to document notification. If the employee does not want to sign the acknowledgement form, simply complete the form for the employee and write 'refused to sign' in the signature field.
- The employee does not have to agree with the benefit plan unless the employee lives OUTSIDE the service area.
 - To determine if an employee is exempt because s/he lives outside the service area, we will use the permanent address s/he has on file with you.
- Both our brochure and the enclosed enrollment form contain places for the employees to list their address and to indicate if they would like to participate in the plan even if they live outside the service area.



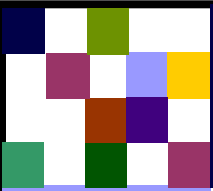
Step 3: Post Notice

The attached notice needs to be placed with your other labor law postings. The notice contains the important rights of each employee. ([See page 6](#)).

In addition, the service area map must be posted along with the notice to show AWCA coverage. This map will be expanding over time and we will send out updates as they occur. ([See page 7](#)).

ENROLLMENT





Announcing New Workers' Comp Benefits

AWCA: A Certified Texas Workers' Comp Network

Summary of Employee Rights and Responsibilities

- ❖ After an injury, you are required to select a treating doctor from Aetna's list of treating doctors. This treating doctor will coordinate all of your care.
- If your employer offers an HMO group health plan, your current HMO doctor may become your workers' comp treating doctor. Please contact your HMO doctor and AETNA to see if this doctor will agree to continue to serve as both your HMO and workers' comp treating doctor
- You will be allowed to change treating doctors once to another Aetna treating doctor. After this one change, your adjuster will have to approve any additional changes. Selecting another treating doctor after your doctor dies, retires, leaves the Aetna network, or if you move more than 30 miles in the city or 60 miles in rural areas from your treating doctor, another doctor may be selected.
- Second opinions from another doctor may be available if you have concerns. These appointments do not change your treating doctor.
- ❖ Your treating doctor should have appointments available for your health care needs
- ❖ Except in emergency that is life or limb threatening, all treatment must be given or directed by your selected treating doctor. Please notify your supervisor as soon as you are injured for assistance in coordinating your benefits.
- ❖ Emergency facilities are provided in the network, please become familiar with the available centers or hospitals. If in doubt on what facilities are in-network and you have a life threatening emergency, seek care immediately from the nearest facility. When in need call 911.
- ❖ You are not required to pay for any of your medical bills when going to an Aetna treating doctor or an approved specialist. If you go to another provider that is not your treating doctor or a specialist directed by your doctor, you may have to pay for your health care.
- ❖ Some services may require approval by UniMed Direct. These services include surgery including injections, diagnostic testing, physical/occupational/chiropractic therapy or programs, psychological testing or therapy, durable medical equipment or devices, home health services, or any experimental treatment. All treatment is reviewed to ensure there is evidence based support for treating your on the job injury.
- ❖ If medical care is not approved, your treating doctor may appeal this decision by contacting UniMed Direct for an additional review. If the appealed request is not approved, you will receive information on your rights for a review by an Independent Review Organization coordinated through the Texas Department of Insurance.
- ❖ If you are currently seeing a doctor for an on-the-job injury, please contact your adjuster to ensure appropriate transfer of care to an Aetna doctor. Please remember that if this injury occurred while working at a different employer, you may not qualify for coverage under Aetna's WC Network. You may be required to change doctors within 14 days. A UniMed Direct case manager may be assigned to assist you with your care.
- ❖ You have a right to file a complaint if you are dissatisfied. Neither you nor your treating doctor will be retaliated against by AETNA. If you have any complaints against AETNA you may file a complaint with Texas Department of Insurance at www.tdi.state.tx.us or write to TDI, HMO Division, Mail Code 103-6A, PO Box 149104, Austin, TX 78714-9104.
- ❖ You may find an Aetna doctor by going to awca.aetna.com or calling 1-866-417-8017
- ❖ Aetna has doctors available throughout Texas. Currently the following areas are approved by the state as designated services areas ([see map on page 7](#))



Proprietary and Confidential

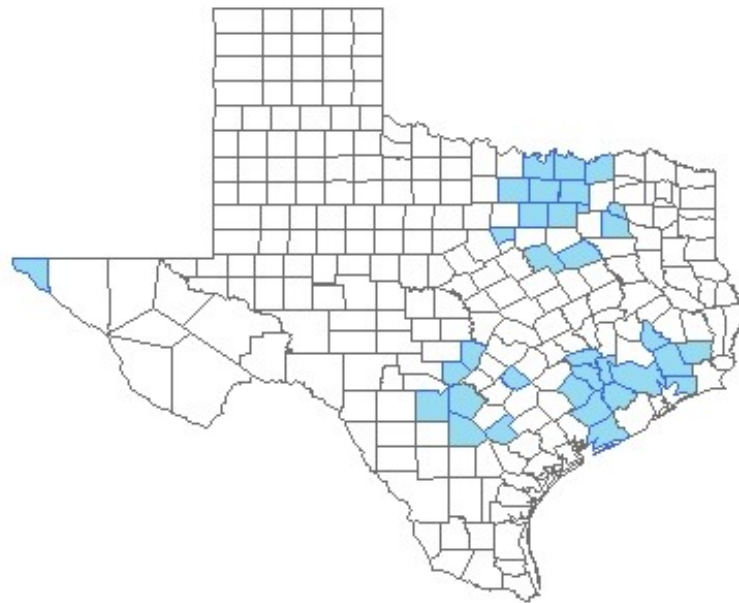
Announcing New Workers' Comp Benefits
AWCA: A Certified Texas Workers' Comp Network

Service Area Map



Aetna Workers' Comp Access

Certified Network Service Area for The State of Texas



Service Areas

Atascosa	Austin	Bexar	Blanco	Caldwell
Chambers	Collin	Colorado	Cooke	Dallas
Denton	El Paso	Fannin	Fort Bend	Grayson
Hardin	Harris	Hill	Hood	Karnes
Kendall	Liberty	Matagorda	Medina	Navarro
Raines	Rockwall	San Jacinto	Tarrant	Van Zandt
Waller	Washington	Wharton	Wise	



Proprietary and Confidential

Step 4: Enroll Employees

See attached Acknowledgement Forms in English and Spanish. (See page 23 and 24)

If you have 10% or more of your employees that speak a different language, please let us know and we will provide additional enrollment forms in those languages as well.

Each employee must sign this form. If the employee refuses to sign, please document that the employee was present and refused to sign the enrollment form.

Remember that an employee does not have to sign the acknowledgement form in order to be officially notified. This is why these logs are critical in ensuring each employee will be covered under the Network.

Service Areas ([See page 7](#)) are predefined areas where Aetna has been approved to offer Network coverage. These service areas are considered boundaries to define whether an employee MUST treat within the Network. If the employee's permanent address is within the designated service area, the employee is automatically covered under Network benefits when notified of this benefit.

When an employee lives outside the service area, we have two options:

- First, the employee is allowed to participate if he or she chooses.
- Second, if the employee does not want to participate, we want to know about these employees who live outside the service area so that we can expand our service area to cover your employees.

Employers must ensure there are accurate records of each employee that is notified of the new Aetna Network benefit.

See attached Acknowledgement Log, which will serve as notice to your carrier that you have completed the Aetna Network enrollment process.

ENROLLMENT



Step 5: Final Steps – Summary of Requirements

We want to make sure you have all the tools you need to make this transition successful.

1. **Employee notification brochures**
 - Each employee should have one of these
2. **Employee access to Enrollment kits**
 - Make sure that each employee has had an opportunity to read and review the details of this benefit plan
3. **Post Workplace Notice**
 - Ensure that the area where your workplace notices are hung has the new WC poster that includes the Aetna WC Network
4. **Documentation**
 - We need documentation that you notified each of your employees and each new employee. This is an ongoing log you will need to keep.
 - At the time of the injury, the individual signed acknowledgement form will need to be submitted to your insurance carrier
 - If the employee does not sign or refuses to sign, simply write this on the acknowledgement form noting the date that you supplied the information
 - Send your enrollment log to your Agent as required
5. **DocFind**
 - Everyone needs to become familiar or know how to find Aetna doctors awca.aetna.com or know the number to call 1-866-417-8017
 - Non-emergency care should go to an urgent care center or a treating doctor within the Aetna Network. Only true life or limb emergencies should go to an Emergency Room at a hospital.
6. **Open Communication**
 - Aetna will remain available for you and your employees' Network needs. The insurance company adjusters are ready and willing to talk to you about any open claims or benefits. In addition, case managers are assigned as necessary to help facilitate return-to-work. All people involved in these claims will work together to ensure the best outcome.

FINALIZE your endorsement credit. We are here to ensure the Aetna Network implementation works for you. After you complete these steps, please send the attached Enrollment Log to your Agent in order document your efforts. This form must be completed and sent within 60 days for your endorsement credit to remain on your policy.

Please contact us with any questions! ([See page 2](#))

Proprietary and Confidential © 2006

ENROLLMENT



[Back to Enrollment Steps](#)

January 22, 2007

To Our Valued Employee,

As your employer, [Insured Name] is committed to providing you with a safe place to work. However, if you are injured on the job, we are pleased to advise you that we have chosen **Aetna Workers' Comp Access® as our State of Texas certified workers' compensation health care network (WCHCN)** to manage any and all of your health care needs should you have a compensable work related injury.

Enclosed you will find the information you will need concerning the Aetna Workers' Compensation Health Care Network. This kit informs you on what you need to know and do prior to and at the time of an injury, if one should occur. Please read this information carefully, and complete and submit all required forms that are enclosed.

If you have any questions, please contact your Human Resource Representative [REPRESENTATIVE NAME] at [PHONE NUMBER].

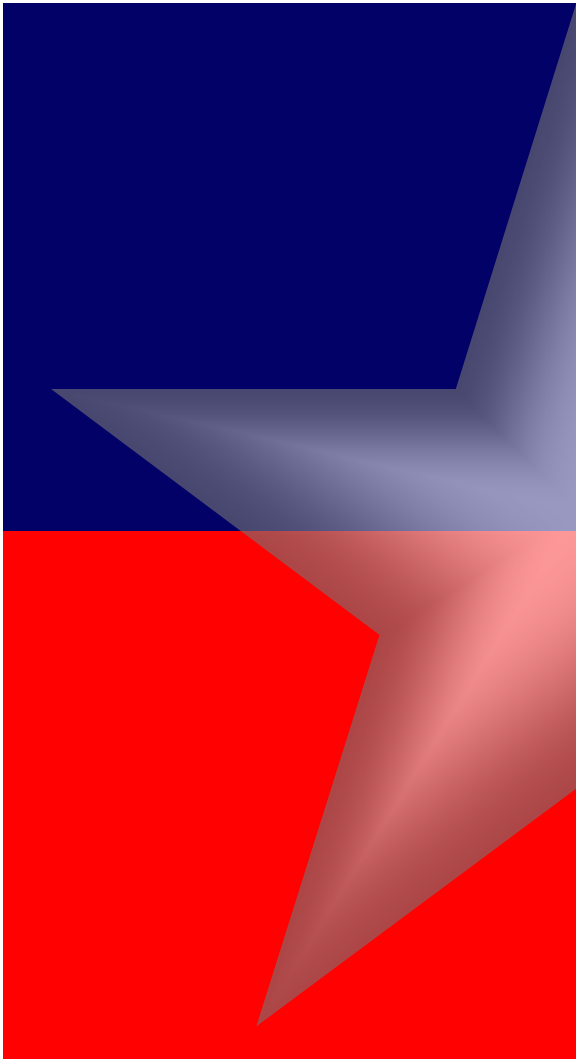
Sincerely,

[NAME, TITLE]

Cc: Employment file

Aetna Workers' Comp Access

A State of Texas Certified
Workers' Compensation Health Care Network



[Back to Enrollment Steps](#)

TABLE OF CONTENTS

1. WHAT YOU NEED TO DO	14
2. IF YOU ARE INJURED AT WORK	14
3. EMERGENCY AND AFTER-HOUR MEDICAL CARE	14
4. WHAT YOU NEED TO KNOW	15
5. AWCA NETWORK SERVICE AREA	15
6. TERMS AND CONDITIONS OF NETWORK	16
7. TREATING DOCTOR SELECTION	16
8. PAYMENTS TO PROVIDERS	17
9. CHANGING YOUR TREATING DOCTOR	17
10. REFERRALS FOR SPECIALTY CARE	18
11. IF YOUR DOCTOR LEAVES THE AWCA NETWORK	18
12. OUT OF NETWORK TREATMENT	18
13. CARE REQUIRING PRE OR CONCURRENT CERTIFICATION	19
14. HOW TO FILE AN APPEAL	20
15. MEDICAL CASE MANAGEMENT	20
16. HOW TO FILE A COMPLAINT	21
17. EMPLOYEE RIGHTS	22

Enclosures:

Workers' Compensation Acknowledgement Form

Map of Service Area, key and scale

Provider Directory – available in paper, CD or electronically

1. WHAT YOU NEED TO DO:

The Aetna Workers' Comp Access Health Care Network (AWCA Network) is supporting your workers' compensation carrier, Utica National Insurance Group with your enrollment. All of the information contained here is also available in several languages. Contact your [CLIENT] [REPRESENTATIVE NAME] if there are more materials needed and for questions.

If you live in the service area (See #5 AWCA Service Area) described by this information, **follow these three easy steps:**

- **Step 1:** Client/Policy Holder Enrollment Form (Acknowledgement Log) to be completed and maintained by your employer.
- **Step 2:** (Employee) complete the enclosed Workers' Compensation Network Acknowledgement form (See page 12 or 13) describing how to get health care under workers' compensation insurance and submit to your employer:
- **Step 3:** If injured, choose a TREATING DOCTOR from the list of doctors in the network provided in this kit or from the list of Treating Doctors your employer has posted or go to awca.aetna.com to find a doctor that is in the AWCA Network. Physicians or providers that can be considered Treating Doctors are: General Practice, Internal Medicine, Family Practice and Occupation Medicine or Clinics.

2. IF YOU ARE INJURED AT WORK:

Tell your supervisor that you were injured at work as soon as possible. If it is not an emergency, seek treatment from a doctor in the AWCA Network. You can get a list of network doctors by asking your supervisor or visiting awca.aetna.com

3. EMERGENCY AND AFTER-HOUR MEDICAL CARE:

Call 911 or go to the nearest emergency room or urgent care center for emergencies. For after-hours non-emergency medical care, get a list of hospitals and urgent care centers at awca.aetna.com and tell your employer as soon as possible that you had an injury at work.

4. WHAT YOU NEED TO KNOW:

The following outlines the terms and conditions for obtaining health care services within Aetna Workers' Comp Access Workers' Compensation Health Care Network ("AWCA" and "WCHCN").

If you are hurt on the job and live in the service area described within this information, you must:

1. Choose a Treating Doctor from the list of doctors in the AWCA Network within your service area. Please note that only physicians or providers from the following types can be considered Treating Doctors: General Practice, Internal Medicine, Family Practice and Occupational Medicine or Clinics.
2. Or, you may ask your HMO primary care physician to agree to serve as your Treating Doctor. See conditions in section 6.
3. If you already have a workers' compensation injury, you need to choose a Treating Doctor within 14 days of receiving this notice. If you do not make a choice within 14 days, AWCA has the right to choose a Treating Doctor for you. All future care must be with your newly chosen Treating Doctor within the AWCA Network.
4. If you seek health care from providers that are not in the AWCA Network without AWCA's approval, other than in cases of emergency, your insurance carrier may not be responsible for paying the provider and you may have to pay for that health care.

5. AWCA NETWORK SERVICE AREA:

Network Service Area is determined by the employees' permanent residence and must be within the following criteria:

30 Miles for Non-Rural (Non-Rural is defined as a population greater than 50,000)

60 Miles for Rural

75 Miles for a Specialist or Specialty Hospital

The AWCA Network has Treating Doctors, specialists, hospitals and other health care services throughout the state of Texas, including within your service area. A complete directory of all the providers available within your service area is enclosed in this kit for your review and to assist you in selecting a Treating Doctor. You can also review a complete directory of all providers in the AWCA Network throughout Texas by accessing our website at: awca.aetna.com and search "Find a doctor" on DocFind® or by contacting your insurance carrier. All providers will be noted by specialty type, including if they can be considered Treating Doctors. Additional information is also provided regarding each network provider, including but not limited to: if the provider is accepting new patients and/or if the provider is trained in maximum medical improvement and impairment ratings. Our website is updated at least three times a week, so we encourage you to access DocFind® routinely to see additional providers and hospitals that have become available within the AWCA Network.

A map of the service area is enclosed for your use. This map illustrates the 34 counties in which AWCA is certified by the Texas Department of Insurance. For additional information, please contact your insurance carrier.

If you do not live in the service area, your insurance carrier will make a determination within 7 days as to whether or not they will approve treatment outside of the service area. In the interim, you can get treatment from a non-AWCA Network doctor until your carrier makes a decision. If you get medical care outside of the network, you might have to pay for those services if it is determined that you live in the service area.

6. TERMS AND CONDITIONS OF NETWORK:

Your AWCA Treating Doctor will: 1) provide care for your workers' compensation injury or illness; 2) refer you to other doctors in the network for specialty care; 3) cooperate with and participate in case management activities; and 4) agree to provide medical services under the terms of participation in the AWCA Network.

If you ask your HMO primary care doctor to agree to serve as your Treating Doctor; your HMO primary care doctor must agree to: 1) provide you health care for your workers' compensation injury or illness; 2) refer you to other doctors in the AWCA Network for specialty care; 3) cooperate with and participate in case management activities; and 4) agree to provide medical services under the terms of participation within the AWCA Network.

7. TREATING DOCTOR SELECTION:

If you need help choosing Treating Doctor or want additional information about the network or about network providers, please contact the AWCA Network at 1-866-417-8017, or write to:

Aetna Workers' Comp Access
Attention: Client/Provider Relations Liaison
151 Farmington Ave. RC 61
Hartford, CT 06156
Fax Number: 860-273-1954
Email: AWCATXHCNProviderMailbox@aetna.com

You may call the toll free number above 24 hours a day, seven days a week. A contact person is available during normal business hours. After normal business hours, weekends, and holidays, you may leave a message and someone will call you on the next business day.

All AWCA Network providers have agreed to seek payment for their services only from your insurance carrier [employer].

If you obtain approval from AWCA to seek treatment with a non-AWCA Network provider, AWCA will arrange with the non-network provider for services to be provided in a timely manner and within timeframes appropriate to your circumstances and condition.

In cases of true and legitimate emergencies, CALL 911 and seek care with the nearest emergency room or urgent care center in your area regardless of their participation status in the AWCA Network. All emergency services will be paid by your insurance carrier for any emergency care needed to treat your work related injury or condition.

Please note: Except in cases of emergency, your insurance carrier may not be liable, you may have to pay for services and treatment that you seek out of network if not approved in advance by AWCA.

8. PAYMENTS TO PROVIDERS:

You do not have to pay for your medical care if you get treatment for your work related injury from an AWCA Network Treating Doctor or a network specialist that you were referred to by your Treating Doctor. Also, you do not have to pay for your medical care provided to you from your HMO primary care doctor for a work related injury, as long as your HMO primary care doctor has agreed to the terms of the AETNA WCHCN. The carrier will pay those medical bills.

If you decide to get medical care from an out of network provider, you may have to pay for those services, except for emergency care.

9. CHANGING YOUR TREATING DOCTOR:

You can change your Treating Doctor at least once during the course of treatment without the need of obtaining approval from AWCA.

Additionally, you do not need to obtain approval from AWCA if you change your Treating Doctor for one of the following reasons:

- for a second opinion
- if your Treating Doctor dies
- if your Treating Doctor retires
- if your Treating Doctor leaves the AWCA Network
- you move outside of the service area outlined in the enclosed

Simply choose another Treating Doctor from the AWCA Network listing of Treating Doctors.

If you change your Treating Doctor more than once, the change must be approved by AWCA.

10. REFERRALS FOR SPECIALTY CARE:

Only your Treating Doctor can determine and provide you with a referral to seek treatment with a specialist. You are only able to seek care by a specialist through a referral from your Treating Doctor. The specialist must be participating in the AWCA Network.

If your Treating Doctor determines that the specialist you need is not available in the AWCA Network, your Treating Doctor may call AWCA for approval to have a specialist outside the AWCA Network treat you.

In cases of emergency, you do not need a referral for Specialty Care. Seek treatment at the nearest emergency room, or call 911. Please refer to section 3 “Emergency and after-hour medical care.”

11. IF YOUR DOCTOR LEAVES THE AWCA NETWORK:

If your doctor leaves the AWCA Network, your employer will tell you the options for continued medical care. If your condition is acute or life threatening and might be harmed by a change of doctor, you will be allowed to continue treatment with the doctor for 90 days. If the doctor leaves the network because of medical disciplinary reasons, you will not be allowed to continue treatment with the doctor. You will need to find an alternate doctor. Contact your employer or case manager for advice on your options. Also, please refer to section 9 “Changing your Treating Doctor.”

12. OUT OF NETWORK TREATMENT:

You may treat with an out of network doctor without pre-approval if you need emergency care. All other out of network treatment must be pre-approved by the AWCA Network.

You may be allowed to get out of network treatment if:

- you do not live in the network service area
- you need medical care that is not available in the network service area
- you are an injured employee who temporarily lives outside of the network service area during recovery
- you did not receive the AWCA Network employee information

Call your workers’ compensation representative to receive approval for out of network care.

13. CARE REQUIRING PRE CERTIFICATION OR CONCURRENT CERTIFICATION:

Certain medical services require approval before being performed. Your doctor will contact UniMed Direct for review of these services. Dedicated Fax: 1-877-UMD-NTWK (863-6895)

UniMed Direct is our utilization review agent assigned to independently review your treatment needs.

UniMed Direct applies evidence based treatment and disability guidelines to ensure appropriate and fair decisions. This ensures that your doctor's proposed treatment is proven to be effective in treating your injury. The disability guidelines will assist you and your doctor in developing your return-to-work plan. The disability guidelines also explain what kinds of limitations, if any, are usual for your injury. Your adjuster or case manager can assist you in understanding these guidelines.

Medical Treatment that may require approval includes any of the following. Your doctor will know when treatment requires approval and will submit the requests for approval on your behalf.

- Hospital Admissions
- Surgery including injections
- Physical, Occupational and Chiropractic treatment or rehabilitation programs
 - Includes Chronic Pain Management, Work Hardening, Work Conditioning or similar programs or services
- Psychological testing and therapy
- Durable medical equipment including implanted devices
- Diagnostic tests
- Experimental or investigational service, device, or treatment
- Home health services
- In-patient or clinic services, treatments or programs
 - Includes weight loss, nursing home, chemical dependency, addictions
- Narcotic, anti-psychotic, or other drug prescriptions outside of adjuster authorization
- Specialist Referrals outside of adjuster authorization

When initial treatment is approved but continued treatment may be necessary, your doctor will need to call for concurrent (or ongoing) review for any service listed above.

14. HOW TO FILE AN APPEAL:

If the request for initial or ongoing treatment is denied, you or your doctor can file an appeal with UniMed Direct. UniMed will send your request to a different doctor for review. Your doctor usually handles this for you but you have the right to contact us directly.

To request an appeal, you can call 1-866-931-5100 or write UniMed at:

UniMed Direct
PO Box 262001
Plano, TX 75026-2001

The appeal must be received within 30 days of the receipt of the original written decision. You may call the toll free number 24 hours a day. A contact person is available during normal business hours. After normal business hours, on weekends and holidays, you may leave a message and someone will call you during the next business day.

The written notice must contain:

- Your name, address and phone number,
- Your employer's name, address and phone number
- The names, addresses and phone numbers of all providers relevant to the appeal;
- The nature of your appeal and
- Any action you believe would remedy the situation

If you do not agree with the UniMed appeal decision, you can request an Independent review through the Texas Department of Insurance at the following address:

Texas Department of Insurance
HMO Division, Mail Code 103-6A
Austin, TX 78701

Independent Review Organization (IRO) requests must be sent within 45 days after the date of notification. If an independent review is requested, the Texas Department of Insurance will assign the IRO. Your insurance carrier will pay for the IRO and is responsible for payment of your health care while the IRO is completing its review. If the IRO upholds the denial, you or your doctor may seek judicial review. The Division of Workers' Compensation and the Department of Insurance are not considered parties to the independent review.

15. MEDICAL CASE MANAGEMENT:

If you are injured on the job, you may work with a Medical Case Manager. This case manager is a nurse who will help you with your medical treatment, finding the right doctor, and getting back to work. Your case manager can also answer any questions you have about the AWCA Network.

16. HOW TO FILE A COMPLAINT:

You can file a complaint about any aspect of the AWCA Network operations and/or an AWCA network provider. If you file a complaint, AWCA cannot retaliate against you, your doctor, or any person filing a complaint for you.

- The complaint must be filed within 90 days after the event by calling or writing to:

Aetna Workers' Comp Access
Attention: Client/ Provider Relations Liaison
151 Farmington Ave. RC 61
Hartford, CT 06156
1-866-417-8017
Fax number 1-860-273-1954
Email AWCATXHCCNProviderMailbox@aetna.com

You may call the toll free number above 24 hours a day. A contact person is available during normal business hours. After normal business hours, on weekends and holidays, you may leave a message and someone will call you during the next business day.

- Within 7 days of receiving the complaint, the AWCA Network will send you an acknowledgement letter
- Within 30 days of receiving the complaint, the AWCA will review and resolve the complaint

If you don't agree with the resolution of your complaint, you may also file a complaint with the Texas Department of Insurance.

You may file a complaint with the Texas Department of Insurance at:

HMO Division
Mail Code 103-6A
Texas Department of Insurance
P.O. Box 149104
Austin, Texas 78714-9104

To speed up the processing of your request, please include the following information:

- Your name
- Current physical address
- Telephone number
- Copy of the Carrier/Employer or WCHCN decision
- Any information that was provided to make the decision

17. **EMPLOYEE RIGHTS:**

Texas law **does not permit** AWCA to retaliate against you if you file a complaint against the network. AWCA also cannot retaliate if you appeal the decision of the network. The law does not permit AWCA to retaliate against your Treating Doctor if he or she files a complaint against the network or appeals the decision of the network on your behalf. You have the right to file a complaint with the Texas Department of Insurance. The Texas Department of Insurance complaint form is available on the department's web site at www.tdi.state.tx.us or you may request a form by writing to:

HMO Division, Mail Code 103-6A
Texas Department of Insurance
P. O. Box 149104
Austin, Texas 78714-9104

Aetna arranges for the provision of health services. However, Aetna itself is not a provider of those services and therefore cannot guarantee any results or outcomes. All participating providers are independent contractors and are neither employees nor agents of Aetna or its affiliates. The availability of any particular provider cannot be guaranteed.



Workers' Compensation Network Acknowledgement

I have received information that tells me how to get health care under workers' compensation insurance.

If I am hurt on the job and live in the service area described in this information, I understand that:

1. I must choose a treating doctor from the list of doctors in the network. Or, I may ask my HMO primary care physician to agree to serve as my treating doctor.
2. I must go to my treating doctor for all health care for my injury. If I need a specialist, my treating doctor will refer me. If I need emergency care, I may go anywhere.
3. The insurance carrier will pay the treating doctor and other network providers.
4. I might have to pay the bill if I get health care from someone other than a network doctor without network approval.

(Signature) (Date)

(Printed Name)

I live at _____
(Street Address)

(City) (State) (Zip Code)

Name of Employer _____

Name of Network Aetna Workers' Comp Access



la Red de Compensación al Trabajador

He recibido información sobre cómo obtener atención de salud bajo el seguro de compensación al trabajador.

Si me lesionara en el empleo y vivo dentro del área de servicio descrita en este documento entiendo que:

1. Tengo que escoger al doctor que me va a tratar de la lista de doctores en la red. O, puedo preguntarle a mi médico principal del HMO si acepta tratarme.
2. Tengo que ir al doctor que me da el tratamiento para toda la atención que necesito para la lesión. Si necesito un especialista el doctor que me está atendiendo tendrá que dar una recomendación. Si necesito atención de emergencia puedo obtenerla donde quiera.
3. La aseguradora pagará directamente al doctor y a los otros proveedores de la red que me den tratamiento.
5. Es posible que yo tenga que pagar las cuentas si voy a un doctor o proveedor que no está en la red y no tengo aprobación de la red.

Firma Fecha

Date

Nombre en letra de imprenta: _____

Mi domicilio:

Dirección

Ciudad Estado Código postal

Nombre del empleador: _____

Nombre de la red: Aetna Workers' Comp Access

 **Utica National Insurance Group**
Insurance that starts with you.®
Utica Mutual Insurance Company and its affiliated companies, New Hartford, NY 13413
www.uticanational.com