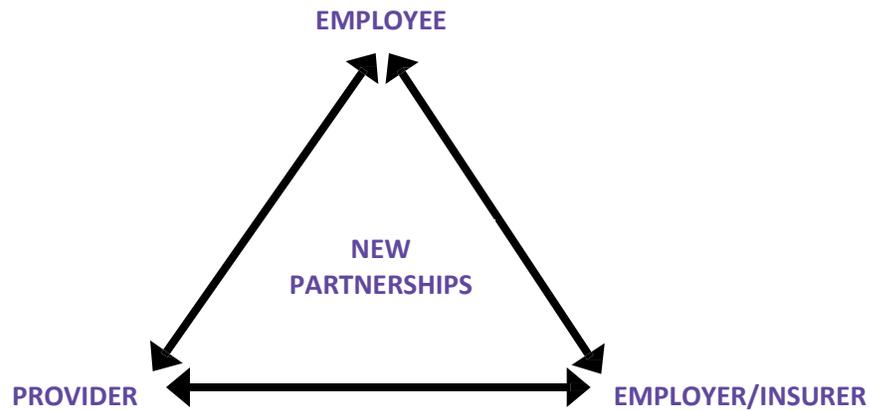




# Rights and responsibilities



For partnerships to be effective, all involved parties need to understand their rights and responsibilities and how they relate to the other parties. Following is an outline of some of the rights and responsibilities of the PROVIDER, EMPLOYEE, EMPLOYER AND PAYER. The HealthPartners Workers' Compensation Managed Care Plan (WCMCP) acts as a resource to all these parties and facilitates the workers' compensation managed care partnership.

# Provider rights and responsibilities

Note: In the context of a Managed Care Plan; a primary care provider is defined by the Minnesota Department of Labor and Industry as a physician, chiropractor, osteopath, podiatrist or dentist, directing and coordinating the course of medical care for the employee.

## Rights

1. All providers have the right to expect injured employees to follow their treatment plans and for employers to support those plans. According to the law, providers also have a right to payment for services.
2. When working with HealthPartners WCMCP, providers have the right to expect the following:
  - Assistance as appropriate from HealthPartners WCMCP nurse case managers to facilitate implementation of medical decisions and treatment plans
  - Education on topics related to treating patients with workers' compensation injuries
  - Timely information on the workers' compensation treatment parameters and managed care rules
3. Providers also have the right to an appeal and dispute resolution process as follows:
  - When a dispute arises and matter related to care, services provided, treatment plans or authorization of services, the HealthPartners WCMCP addresses the concern immediately.
  - Providers or employees/patients may contact the HealthPartners WCMCP administrative office or case management office to voice a concern or complaint at **952-883-5396**.
  - The HealthPartners WCMCP case managers, administrators, physicians advisor, medical director, as appropriate, will work with the dissatisfied provider in a manner of collegueship in attempt to resolve the issue to the satisfaction of all parties.
  - In the event that a provider remains dissatisfied with the WCMCP's resolution, the provider may file a formal written appeal to the HealthPartners WCMCP.
  - The HealthPartners WCMCP will attempt to resolve the problem or recommend a mutually satisfactory solution within 30 days of the written appeal. The provider will receive verbal notice of the resolution with written follow-up.
  - If the provider remains dissatisfied with the WCMCP's resolution of the dispute after the 30-day period, the provider has a right to appeal to the Minnesota Department of Labor and Industry.

**MN Department of Labor and Industry (Metro): 651-284-5032**

**MN Department of Labor and Industry (Greater MN): 800-DIAL-DLI (342-5354)**

**MN Department of Labor and Industry (Duluth): 800-342-5354 or 218-733-7810**

## Responsibilities

Overall, providers need to abide by all applicable provisions of the State of Minnesota Workers' Compensation Statute, chapter 176. We have attempted to outline the highlights.

In the workers' compensation system, providers have some unique administrative responsibilities. Please note that although the medical provider is ultimately responsible for the following administrative responsibilities, it requires a team effort by the clinic staff.

1. Provider needs to identify who is the patient's employer.
2. Provider needs to determine if HealthPartners WCMCP covers the employee.
3. Providers need to collaborate/partner with case managers when treating patients being seen through a managed care plan. HealthPartners WCMCP case managers are available to assist you in implementing your medical decisions and treatment plans with employees and employers.

4. The provider needs to give an opinion regarding causality, that is, both the conditions being treated and the treatments being given are related to the work injury (substantial contribution), or something else has happened since the injury, which is responsible for the treatment or disability (intervening cause).
  - **Substantial contribution** – how the condition(s) being treated and the treatment(s) being given are related to the work injury/illness
    - » Direct result of injury/illness
    - » Pre-existing condition aggravated by the injury/illness (e.g., asthma exacerbated by workplace fumes)
      - Temporary: will return to pre-injury condition
      - Permanent: will be worse off after all relevant treatment
    - » Pre-existing condition that aggravates the injury/illness
    - » Complication of the treatment
  - **Intervening cause** – something has happened since the injury which is responsible for the treatment or disability
    - » Another injury
    - » An unrelated personal medical problem
5. Providers must complete a Report of Work Ability as specified by Minnesota Department of Labor and Industry after each visit. Please visit the Minnesota Department of Labor and Industry website at [www.dli.mn.gov/WC/Wcforms.asp](http://www.dli.mn.gov/WC/Wcforms.asp) for a current Report of Work Ability and instructions.
6. Providers need to document work relatedness or non-work relatedness:
  - **Step 1: History**
    - » Elicit and document the patient’s account of how the injury occurred
    - » Elicit and document symptoms
    - » Elicit and document prior related injuries
    - » Review current and past medical history to:
      - Ascertain any other conditions that might explain symptoms
      - Identify red flags for delayed recover syndrome
  - **Step 2: Physical**
    - » Document pertinent positive and negative objective findings
  - **Step 3: Differential**
    - » Entertain any relevant competing hypotheses and rule out with ancillary testing if indicated.
    - » Decide whether the mechanism of injury reported by the patient is an adequate explanation of the symptoms and physical findings.
  - **Step 4: Assessment**
    - » Take a stand (“based on the history and physical exam, this is a work- related injury”)
7. Provider administers treatment in an efficient, cost effective and quality manner with the objective of returning the injured employee to the fullest level of function in the shortest time possible.
  - Employee must be seen by a provider within 24 hours if not an emergency
  - Provider must provide clinical justification by documenting medical necessity of all treatment, including deviations from Workers’ Compensation Treatment Parameters
8. Provider needs to contact the HealthPartners WCMCP Case manager at 952-883-5396 for prior notification of services specified in the State of Minnesota Workers’ Compensation Treatment Parameters:
 

<ul style="list-style-type: none"> <li>• Surgery of any kind</li> <li>• MRI, CT, duplicate X-rays</li> <li>• Services outside of the Workers’ Compensation Treatment Parameters</li> </ul>	<ul style="list-style-type: none"> <li>• Durable Medical Equipment</li> <li>• Chronic management modalities</li> <li>• Duplicate Treatment</li> </ul>
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9. Provider needs to communicate information to the employee, employer, insurer and WCMCP case manager when applicable.
  - **Employee:** Always explain to the employee the nature of the injury and return to work instructions. Complete the Report of Work Ability and give the employee a copy.
  - **Employer:** Fax or send employer a completed copy of the Report of Work Ability form.
  - **Insurer:** Send a copy of the progress note to the insurer/payor with the bill.
  - **Case manager:** Fax a completed Report of Work Ability and any prior authorization requests to **952-883-5210** or **888-779-3625**.
10. The following outlines to whom providers may send medical records. Please note that for purposes of confidentiality, all information not related to a work-related injury/illness must be documented separately and must never be released without the patient's written consent.
  - Release of records may be given without the patient's written consent to:
    - » Employer
    - » Insurer
    - » Department of Labor and Industry
    - » Managed Care Plan (note: only if employee has reported the injury to the employer and only for records related to the work injury)
  - Release of records by subpoena:
    - » As directed by court order
    - » Judges
  - Release of records may be sent only with the patient's written consent and only as specifically allowed by the patient to:
    - » Qualified Rehabilitation Consultants (QRC)
    - » Attorneys
    - » Other health care providers
    - » Anyone else
11. Providers must dictate progress notes.
12. Providers who have contracted with the HealthPartners WCMCP agree to participate in the ongoing education provided by HealthPartners.
13. All providers need to use the HealthPartners WCMCP network for referrals and diagnostic testing on patients being seen under the HealthPartners WCMCP, unless otherwise authorized by a HealthPartners WCMCP case manager, the physician advisor or medical director. Please see the attached HealthPartners Provider Directory. This includes referrals for:
  - Rehabilitation (physical, occupational or speech therapy)
  - Specialty or subspecialty referrals
  - Diagnostic testing (except for minor diagnostic testing that may be done in your office)Contact a HealthPartners case manager at **952-883-5396** or **888-779-3625** for questions regarding referrals.
14. Providers must submit charges to the employer or insurer for services rendered. Claims must be paid in an accurate and timely manner in accordance with the Minnesota Department of Labor and Industry rules: Medical Services and Fees, Section 5221.