



EMPLOYEE NOTICE AT TIME OF INJURY

Dear Injured Worker:

Your employer has received notice of your work-related injury. You have certain rights and responsibilities under the Connecticut Managed Care Program (MCP), and this notice will assist in outlining them for you. If you have questions or concerns after reading through this document, contact your employer or Berkshire Hathaway Direct Insurance Company at 844-472-0966.

1. If you need emergency medical treatment, seek the care that you need and then call 844-472-0966 as soon as reasonably possible. Emergency care includes 1) medical services required for the immediate diagnosis or treatment of a medical condition that, if not immediately diagnosed or treated, could lead to serious physical or mental disability or death or 2) medical services that are immediately necessary to alleviate severe pain.
2. For non-emergency services, seek care from a participating provider within the Coventry Network. To locate a physician, ask your employer about the Coventry Network directory, refer to a worksite poster, or contact 844-549-2512.

If you are unable to locate a provider within your geographic service area, contact your adjuster for assistance in seeking treatment outside the Coventry Network because prior approval is required. Treatment outside the network will be provided to you without penalty only if care is not available within the network.

If you choose to seek unauthorized treatment from a provider outside the Coventry Network, the Workers' Compensation Commissioner may suspend your rights to workers' compensation benefits.

3. Your network physician must call the special toll-free number at 800-354-3053 to pre-certify services immediately after seeing you the first time or at any time during a course of treatment that includes the following:
 - All non-emergency hospitalizations, outpatient surgery, and transfers between facilities.
 - Psychiatric or psychological therapy or testing.
 - All external and implantable bone growth stimulators.
 - All chemonucleolysis, facet or trigger point injections.
 - Repeat baseline diagnostic studies and laboratory testing.
 - Biofeedback therapy.
 - Physical therapy or occupational therapy.
 - Work hardening.
 - Work conditioning.
 - All durable medical equipment.
 - Nursing home, convalescent, residential, and all home health care services and treatments.
 - Pain clinics, chemical dependency clinics, or weight loss clinics.
 - All non-emergency dental services, including reconstructive dental care or dental appliances.



- Magnetic Resonance Imaging (MRI), Nerve Conduction/Velocity studies, CT scans, EMGs, and Thermography.
 - Video Fluoroscopy.
 - Radiation or chemotherapy.
4. If you have any questions or concerns regarding compensability or coverage, contact your adjuster at 844-472-0967.
 5. If you wish to file a medical service appeal, follow the instructions received with your written determination or contact:

Coventry Workers' Comp Services
5130 Eisenhower Blvd. Ste. 150
Tampa, FL 33634
Attention: Utilization Review Department
(800) 354-3053
Fax (781) 290-5341

Please be aware that medical service appeals must be filed within 15 days of the notice of determination. You will receive a written response within 30 days. If you have exhausted the appeal process and remain unsatisfied with the decision, you may contact the Connecticut Workers' Compensation Commissioner.

The necessity and appropriateness of medical and health care services recommended by providers of a medical care plan shall not be subject to review by a Workers' Compensation Commissioner until the plan's utilization review and dispute resolution review and appeal procedures, as described above, have been exhausted. The decision of the chief executive officer of the plan relating to payment for such medical and health care services shall be subject to modification only upon showing that it was unreasonable, arbitrary, or capricious.

Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information, or conceals for the purpose of misleading information concerning any fact material thereto, commits a fraudulent insurance act, and may be subject to criminal and civil penalties as prescribed by appropriate statutes and regulations.