

# employee's guide

to the state fund  
medical provider network



# 州立基金醫療提供者網絡的 僱員指引



## WHAT IS THE STATE FUND MEDICAL PROVIDER NETWORK?

The State Fund Medical Provider Network (MPN) is made up of a group of physicians and other medical service providers within the state of California, some who primarily treat occupational injuries and other providers who specialize in general areas of medicine. If necessary, the MPN will provide specialists to treat your injury or illness.

If your injury or illness is due to employment, the State Fund MPN physicians and other medical providers will provide authorized medical treatment. These medical providers will provide quality medical treatment based on the utilization schedule developed by the Administrative Director of the Division of Workers' Compensation (DWC).

To meet medical access standards, an MPN must have at least three physicians of each specialty expected to treat common injuries experienced by injured employees on the basis of the type of occupation or industry in which the employee is employed. An MPN must have a primary treating physician and a hospital for emergency health care services or a provider of all emergency health care services within 30 minutes or 15 miles of each covered employee's residence or workplace. An MPN must have providers of occupational health services and specialists within 60 minutes or 30 miles of a covered employee's residence or workplace.

## 州立基金醫療提供者網絡是甚麼？

州立基金醫療提供者網絡(State Fund Medical Provider Network) (MPN) 是由一些加州醫生及其他醫療服務提供者組成，其中一些主要是治療職業傷害患者，而其他一些醫療提供者則是專門於一般內科方面的範圍。有需要的話，醫療提供者網絡會提供專科醫生來治療你的傷患或者疾病。

如果你的傷害或者疾病是由受僱引起，州立基金醫療提供者網絡的醫生及其他醫療提供者會提供獲授權的治療。這些醫療提供者會根據工人賠償部門(DWC)行政主管制訂的使用計劃來提供高質素治療。

為了達到醫療使用標準，醫療提供者網絡每專科必須最少有三位醫生，該等專科是預期治療僱員一般傷患，視乎僱員受僱的職業或者行業種類而定。醫療提供者網絡必須在每位受保僱員的住所或者工作地方30分鐘或者15英哩之內有一位主治醫生及一處醫院緊急健康服務或者能提供所有緊急健康護理服務的提供者。醫療提供者網絡必須在每位受保僱員的住所或者工作地方60分鐘或者30英哩之內有職業健康服務提供者及專科人員。

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### HOW DO I OBTAIN MEDICAL TREATMENT?

In emergency situations, you may receive emergency health care services from any nearby medical service or hospital provider.

For non-emergency services, after you file a claim your employer will refer you to an MPN facility for initial treatment within 3 business days.

### HOW DO I OBTAIN MEDICAL TREATMENT OUTSIDE THE STATE OF CALIFORNIA?

If you are:

- Injured on the job while authorized for temporary work or travel outside the state of California OR
- A former employee permanently residing outside the state of California who has an ongoing workers' compensation claim OR
- An injured employee who temporarily resides outside the state of California during recovery

You may seek emergency treatment at the nearest emergency room. If you are in need of non-emergency treatment, you should contact your claims adjuster, State Fund's Claims Reporting Center, or your primary physician. You will be given a list of at least 3 referred physicians outside the geographical service area of the State Fund MPN within 60 minutes or 30 miles of your residence or workplace. An appointment for initial treatment should be available within 3 business days and an appointment for a specialist should be available within 20 business days. You may change physicians among the referred physicians and may obtain a second and third opinion from the referred physicians.

If a list of referred physicians is not available then you may choose your own physician on the basis of the physician's specialty or recognized expertise in treating your particular injury or condition.

### CAN I CHANGE MY DOCTOR?

Yes, after the initial medical evaluation with a MPN doctor, you have the right to choose another primary treating physician or subsequent physician from the MPN.

### HOW DO I CHOOSE A DOCTOR?

You may obtain a regional area listing of MPN doctors by going to MEDfinder MPN at [www.scif.com](http://www.scif.com). You may also

### 我如何才能得到治療？

在緊急情況下，你可能得到任何就近的醫療服務或者醫院提供者的緊急健康護理服務。

非緊急服務方面，在你提出索賠後，你的僱主會在3個工作日之內將你轉介給醫療提供者網絡設施進行初步治療。

### 我在加州以外如何才能得到治療？

如果你是：

- 在授權的臨時工作或者在加州以外行程，因工作而受傷，或者
- 永久居於加州以外的前僱員而且有持續的工人賠償索賠，或者
- 臨時居於加州以外及仍在康復期的受傷僱員。

你可以在最近的急診室尋求緊急治療。如果你需要非緊急治療，你應該聯絡你的索賠理算員、州立基金的索賠報告中心或者你的主治醫生。你會取得最少3位轉診醫生的名單，這些醫生都是離開州立基金醫療提供者網絡的服務區域而又在你的住所或者工作地方60分鐘或者30英里之內。你應該可以在3個工作日之內得到初步治療的預約的時間而專科的預約的時間則應該在20個工作日之內。你可以轉換到其他轉診醫生那裡去，而且你可以從轉介醫生那裡得到第二或者第三意見。

如果沒有轉介醫生的名單，你可以根據治療你的特定傷患或者病情的專科醫生或者認可專門知識選擇自己的醫生。

### 我可否轉換我的醫生？

可以，在醫療提供者網絡醫生進行初步醫療評估之後，你有權在醫療提供者網絡之中選擇其他主治醫生或者其後治療的醫生。

### 我如何選擇醫生？

你可以登入[www.scif.com](http://www.scif.com)的MEDfinder MPN取得醫療提供者網絡醫生的區域名單。如果你已經獲

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obtain a regional area listing by telephoning or sending a written request to your claims adjuster, if one has been assigned to you, or calling State Fund's Claims Reporting Center at (888) 222-3211. If you wish to obtain a complete hardcopy list of all MPN providers, contact the State Fund MPN by sending an email to [scifmpn@scif.com](mailto:scifmpn@scif.com), or by calling (866) 436-0204, or by sending a written request to:

State Compensation Insurance Fund  
Attn: State Fund Medical Provider Network  
900 Corporate Center Dr.  
Monterey Park, CA 91754

After you receive a regional area listing of MPN doctors, you may select a treating doctor (or any subsequent doctor) on the basis of the physician's specialty or recognized expertise in treating your particular injury or condition.

If there are less than three primary treating physicians within 15 miles of your location in a specialty appropriate to treat your injury, you may choose your own doctor or provider outside the MPN network. For assistance you may contact your adjuster, if one has been assigned to you, or State Funds Claims Reporting Center.

### HOW DO I MAKE AN APPOINTMENT WITH MPN DOCTOR?

After you choose an appropriate doctor within the MPN, you may call the doctor for an appointment. If you are unable to obtain an appointment within 3 business days, contact your claims adjuster or State Fund's Claims Reporting Center.

If you are unable to obtain a non-emergency appointment with a specialist within 20 business days, you should contact your claims adjuster or State Fund's Claims Reporting Center.

### HOW DO I SEE A SPECIALIST?

You may receive a referral to a specialist from your treating doctor or you may select a specialist or subsequent physician of your choice from within the MPN. Your choice of physician from the MPN shall be on the basis of the physician's specialty or recognized expertise in treating your particular injury or condition. If your primary treating physician refers you to a type of specialist not included in the MPN, or if there are less than 3 specialists within 30 miles of your location in a specialty appropriate to treat your injury, you may choose your own doctor or provider outside the MPN. For assistance you may contact your adjuster, if one has been assigned to you, or State Fund's Claims Reporting Center.

如果你已經獲得指定一位索賠理算員，你亦可以打電話或者寫書面要求給你的索賠理算員索取區域名單，或者打電話(888) 222-3211給州立基金的索賠報告中心。如果你想得到一份所有醫療提供者網絡提供者的完整名單副本，請發電郵到 [scifmpn@scif.com](mailto:scifmpn@scif.com) 或者打電話(866)436-0204聯絡州立基金醫療提供者網絡，或者將書面要求寄到：

State Compensation Insurance Fund  
Attn: State Fund Medical Provider Network  
900 Corporate Center Dr.  
Monterey Park, CA 91754

在收到醫療提供者網絡醫生的區域名單後，你可以根據治療你的特定傷患或者病情的專科或者專門認可知識選擇你的治療醫生(或者任何其後治療的醫生)。

如果你選擇的專科中，在你的地方15英哩範圍內只有少過3名主治醫生，你可以在醫療提供者網絡以外選擇自己的醫生或者提供者。若需協助，請聯絡你的理算員，如果你已獲指派一位的話，或者聯絡州立基金索賠報告中心。

### 我如何與醫療提供者網絡的醫生預約時間？

你在醫療提供者網絡之中選定了合適的醫生之後，你可以打電話給該醫生預約時間。如果你不能取得3個工作日之內的預約的時間，請聯絡你的索賠理算員或者州立基金索賠報告中心。

如果你無法取得專科醫生20個工作日之內的非緊急預約，應該聯絡你的索賠理算員或者州立基金索賠報告中心。

### 我如何看專科醫生？

你可以從治療醫生那裡取得專科醫生轉介書，或者你可以自行選擇醫療提供者網絡之內的專科醫生或者其後治療的醫生。你應該根據治療你的特定傷患或者病情的專科或者認可專門知識而選擇醫療提供者網絡的醫生。如果你的主治醫生將你轉介到醫療提供者網絡沒有的專科，或者對你進行合適治療傷患的專科在你的地點30英哩範圍之內有少於3位專科醫生，你可以選擇醫療提供者網絡以外的專科醫生。若需協助，請聯絡你的理算員，如果你已獲指派一位的話，或者聯絡州立基金索賠報告中心。

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### WHAT DO I DO IF I DISAGREE WITH MY DOCTOR'S DIAGNOSIS OR TREATMENT?

You may change your doctor at anytime. However, if you dispute your doctor's diagnosis or treatment, it is your responsibility to advise your claims adjuster verbally or in writing of the dispute and request a second opinion. Your claims adjuster will provide you with a regional area listing to help you select a second opinion doctor or specialist. You need to make an appointment with the selected doctor within 60 days. If you do not make the appointment within the 60 days of your receipt of the regional area listing, you will not be allowed to have a second opinion with regard to this disputed diagnosis or treatment by this treating physician.

After you make an appointment with the MPN doctor, notify your claims adjuster. The claims adjuster will contact your treating doctor to obtain and send your medical records to the second opinion doctor. You may request a copy of the medical records that will be sent to the second opinion physician.

If the second opinion doctor decides the employee's injury is outside the type of injury he or she normally treats, the doctor's office will notify the adjuster. You will receive a new regional area listing of State Fund MPN doctors or specialist so that you can make another selection.

The results of the second opinion will be sent to you, the primary treating physician, and the claims adjuster within 20 days of the date of appointment or receipt of the results of the diagnostic tests, whichever is later. If you disagree with the second opinion doctor's findings, you may seek an opinion from a third doctor from the MPN. It is your responsibility to advise your claims adjuster verbally or in writing of the dispute and request a third opinion. Your claims adjuster will provide you with a regional area listing to help you select a third opinion doctor or specialist. You need to make an appointment with the selected doctor within 60 days. If you do not make the appointment within the 60 days of your receipt of the regional area listing, you will not be allowed to have a third opinion with regard to this disputed diagnosis or treatment by this treating physician.

After you make an appointment with the MPN doctor, you need to notify your claims adjuster. The adjuster will contact your treating doctor to obtain and send your medical records to the third opinion doctor. You may request a copy of the medical records that will be sent to the third opinion physician.

### 如果我不同意我的醫生的診斷或者治療，我應該怎樣做？

你可以在任何時間轉換醫生。可是，如果你對你的醫生診斷或者治療有爭議，你有責任口頭或者書面通知你的索賠理算員關於該項爭議及要求第二意見。你的索賠理算員會向你提供區域名單協助你選擇第二意見的醫生或者專科醫生。你需要在60天之內與你選擇的醫生約時間。如果你不在收到區域名單後60日之內約時間，你將會不容許就此治療醫生的診斷或者治療爭議取得第二意見。

與醫療提供者網絡醫生約時間後，請通知你的索賠理算員。索賠理算員會聯絡你的治療醫生以便取得你的醫療記錄及將之送交第二意見醫生。你可以要求一份將會送往第二意見醫生的醫療記錄副本。

如果第二意見醫生決定該僱員的傷患是在他/她通常治療的傷患類別之外，該醫生的診所會通知該索賠理算員。你會得到一份新的州立基金醫療提供者網絡醫生或者專科醫生的區域名單讓你作出另一選擇。

第二意見的結果會在預約的時間或者收到診斷化驗結果後的20天之內，以較遲的日期為準，送給你、該主治醫生及該索賠理算員。若你不同意第二意見醫生的判斷，你可以尋求第三位醫療提供者網絡醫生的意見。你有責任口頭或者書面通知你的索賠理算員關於該項爭議及要求第三意見。你的索賠理算員會向你提供區域名單協助你選擇第三意見的醫生或者專科醫生。你需要在60天之內與你選擇的醫生約時間。如果你不在收到區域名單後60日之內約時間，你將會不容許就此治療醫生的診斷或者治療爭議取得第三意見。

與醫療提供者網絡醫生約時間後，你需要通知你的索賠理算員。索賠理算員會聯絡你的治療醫生以便取得你的醫療記錄及將之送交第三意見醫生。你可以要求一份將會送往第三意見醫生的醫療記錄副本。

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During this second and third opinion process, you may continue treatment with your treating physician within the MPN or a physician of your choice within the MPN. Treatment recommended by the second or third opinion physician may be obtained from any MPN physicians, including the second or third opinion physician. Selection of a treating physician and any subsequent physicians shall be on the basis of the physician's specialty or recognized expertise in treating the particular injury or condition in question.

### HOW DO I REQUEST AN INDEPENDENT MEDICAL REVIEW (IMR)?

If you select a doctor for a third opinion, the claims adjuster will send you information about the Independent Medical Review (IMR) process. You will receive an Application for Independent Medical Review form that has the MPN Contact Section completed.

The third opinion physician's report shall be served on you, the primary treating physician, and the adjuster within 20 days of the date of the appointment or receipt of the diagnostic tests, whichever is later. After receiving the third doctor's opinion, if you still disagree, then you must complete the employee section of the Application for Independent Medical Review and mail the Application to:

DWC Medical Unit  
PO Box 71010  
Oakland, CA 94612

Within 10 business days of the receipt of the application, the Administrative Director of the DWC shall select an IMR with an appropriate specialty. If you wish to have an in-person examination, the Administrative Director shall randomly select a physician from the list of available independent medical reviewers with an appropriate specialty within 30 miles of your residence. If you wish to have a record review, the Administrative Director will randomly select a physician with an appropriate specialty to be the independent medical reviewer.

To withdraw your application, you must provide written notice to the Administrative Director and the claims adjuster.

如果第三意見醫生決定該僱員的傷患是在他/她通常治療的傷患類別之外，該醫生的診所會通知該理算員。你會得到一份新的州立基金醫療提供者網絡醫生或者專科醫生的區域名單讓你作出另一次選擇。

在第二及第三意見的過程中，你可以繼續由醫療提供者網絡內替你治療的醫生或者你選擇的醫療提供者網絡醫生進行治療。由第二或者第三意見醫生建議的治療可以由任何醫療提供者網絡醫生，包括第二或者第三意見醫生進行。治療醫生及任何其後的醫生的選擇應該因應治療爭議中特定傷患或者病情的該專科或者認可專門知識定。

### 我如何要求獨立醫療覆核？

如果你選擇一位醫生提供第三意見，索賠理算員會將獨立醫療覆核(IMR)過程的資料送給你。你會收到獨立醫療覆核申請書表格，表格上的醫療提供者網絡聯絡部份經已填妥。

第三意見醫生的報告會在該預約的時間或者收到診斷化驗結果後的20天之內，以較遲的日期為準，送給你、該主治醫生及該索賠理算員。收到第三醫生的意見後，若你仍然不同意，你必須填寫獨立醫療覆核申請書的僱員部份及將申請書連同你的醫療報告寄往：

DWC Medical Unit  
PO Box 71010  
Oakland, CA 94612

收到該申請書後10個工作天之內，工人賠償部門的行政主管會選擇合適專科的獨立醫療覆核醫生。如果你希望進行身體檢查，行政主管會在合適專科、能夠提供服務及離你住所30英哩之內的獨立醫療覆核員名單之中隨機選擇一位醫生。如果你希望覆核記錄，行政主管會隨機選擇一位合適專科的醫生擔任獨立醫療覆核員。

取消你的申請時，你必須提供書面通知給行政主管及該索賠理算員。

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If the IMR physician certifies in writing that an imminent and serious threat to your health exists, the report shall be expedited and rendered within 3 business days of the in-person examination by the IMR physician. An extension of 3 more business days may be granted by the Administrative Director, if necessary.

The Administrative Director shall immediately adopt the determination of the IMR and issue a written decision within 5 business days of the receipt of the report.

If the IMR agrees with the primary treating physician, you can receive the IMR's recommended treatment from any MPN physician within the MPN, including the second or third opinion physician. If the IMR does not agree with the disputed diagnosis, diagnostic service, or medical treatment prescribed by the primary treating physician, you may seek the IMR's recommended treatment with a physician of your choice either within or outside the MPN. The treatment shall be limited to the treatment or diagnostic service recommended by the IMR. Once the treatment is completed, you will receive all other treatment with a doctor of your choice within the State Fund MPN.

### WHAT IS TRANSFER OF ONGOING CARE?

If your date of injury is prior to the implementation of the MPN and you are treating with a physician outside the MPN whom you did not pre-designate, you may be considered for transfer of care to an MPN physician under one of the following circumstances:

- Where the Administrative Director has found good cause to grant petitions that the primary treating physician has failed to timely submit reports per Title 8, CCR §9785.
- Where the Administrative Director has found good cause to grant petitions that the primary treating physician or facility is not within a reasonable geographic area per Title 8, CCR §9780.
- Where the WCAB finds that the current treatment by the non-MPN provider is inappropriate or that there is no present need for medical treatment to cure or relieve from the effects of the injury or illness.
- At your request.

If it is appropriate to consider Transfer of Care, completion of treatment by a non-MPN provider will be authorized for injured covered employees for one of the following conditions:

如果該獨立醫療覆核醫生書面證明你的健康存有即時及嚴重威脅，該報告會迅速地在獨立醫療覆核醫生進行身體檢查後3個工作日之內發出。有需要時，行政主管可以批准延長多3個工作日。

行政主管會即時採納該獨立醫療覆核的決定及在收到該報告後5個工作日之內發出書面決定。

如果該獨立醫療覆核同意該主治醫生，獨立醫療覆核的建議治療會由醫療提供者網絡內的醫療提供者網絡醫生進行，包括第二或者第三意見醫生。如果獨立醫療覆核不同意由主治醫生處方的該爭議診斷、診斷服務或者治療，你可以尋求由你選擇的醫生進行該獨立醫療覆核的建議治療，可以是醫療提供者網絡內或者以外的醫生。治療應該限於獨立醫療覆核建議的治療或者診斷服務。一旦該治療完成，你的全部治療都會來自你選擇的州立基金醫療提供者網絡內的醫生。

### 甚麼是持續護理的轉移？

如果你的受傷日期是早過醫療提供者網絡實施日期而你正由醫療提供者網絡之外的醫生治療，該醫生並非由你預先指定，在以下的情況之一時，你可能會被考慮轉移到醫療提供者網絡醫生那裡繼續護理：

- 行政主管有良好理由因為該主治醫生沒有根據Title 8, CCR § 9785的規定適時地提出報告而發出呈請書。
- 行政主管有良好理由因為該主治醫生或設施並非根據Title 8, CCR § 9780的規定在合理的地域之內而發出呈請書。
- 工人賠償申訴委員會發現非醫療提供者網絡提供者正在進行的治療不恰當或者現在沒有需要進行醫療去醫好或者減輕傷患或者疾病的影響。
- 在你的要求之下。

如果持續護理轉移的考慮是恰當的話，在以下情況之一，受傷及受保僱員會獲授權由非醫療提供者網絡提供者完成傷患的治療：

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- **An acute condition.** An acute condition is a medical condition that requires prompt medical attention and has duration of less than 90 days. Completion of treatment shall be provided for the duration of the acute condition.
- **A serious chronic condition.** A serious chronic condition is a medical condition that persists without full cure or worsens over 90 days and requires ongoing treatment to maintain remission or prevent deterioration. Completion of treatment shall be authorized for up to one year to complete approved treatment and arrange for transfer to another provider within the MPN. The one-year period for completion of treatment starts from the date you receive the determination that you have a serious chronic condition.
- **A terminal illness.** A terminal illness has a high probability of causing death within one year or less. Completion of treatment shall be provided for the duration of a terminal illness.
- **Performance of a surgery or other procedure** that is authorized by the State Fund and has been recommended and documented by the provider to occur within 180 days from the date you receive the determination that you will be transferred to an MPN provider.

Your claims adjuster will notify you with the medical determination regarding the completion of treatment. The notification shall be sent to you and a copy of the letter will be sent to your primary treating physician.

If you dispute the medical determination from your claims adjuster, you may request a report from your primary treating physician that addresses whether you fall within any of the conditions set forth above. The primary treating physician shall provide the report to you within 20 calendar days from your request for the report. If the physician fails to issue the report to you within the 20-day period, the determination by the claims adjuster will apply.

If you or the State Fund adjuster objects to the medical determination by the primary treating physician, the dispute regarding the medical determination made by the primary treating physician concerning the transfer of care shall be resolved pursuant to Labor Code §4062.

- **緊急的病情** – 緊急的病情是需要快速醫療照顧的，維期一般少於90日。應在緊急的病情的期間提供病人完整的治療。
- **嚴重的慢性病情** – 嚴重的慢性情況是超過90日的持久醫療情況，無法完全康復而且需要持續治療去維持病情或者防止惡化。完成治療應該獲授權多至一年以便完成獲批准的治療及安排轉移到另一位醫療提供者網絡內的提供者。該完成治療的一年期間由你收到決定你有嚴重慢性病情開始。
- **末期疾病** – 無法治療或者不能改變的情況極可能在一年之內或者更短時間導致死亡。完成治療應該在末期疾病期間提供。
- 收到決定轉移到醫療提供者網絡提供者的通知後180日之內進行州立基金授權而且是提供者建議及記錄的**手術或者其他醫療程序**。

你的索賠理算員會通知你關於完成治療的醫療決定。會有一份該通知書送給你，該信件的副本亦會被送給你的主治醫生。

如果你對索賠理算員的醫療決定有爭議，你可以向你的主治醫生要求報告說明你是否符合以上開列的任何情況。該主治醫生應該在你要求該報告起計20日之內向你提供該報告。如果該醫生沒有在20日期間之內發出該報告給你，將由索賠調停員作出決定。

如果你或者州立基金反對主治醫生的醫療決定，有關主治醫生作出關於護理轉移的醫療決定的爭議將會根據勞工法例 § 4062 解決。

如果主治醫生同意該醫療決定，即是你的醫療情況不符合以上開列的情況，護理轉移將會在爭議解決程序時間進行。

如果主治醫生不同意該醫療決定，即是你的醫療情況符合以上開列的情況，護理轉移將不會進行，直至爭議解決為止。

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If the primary treating physician agrees with the medical determination that your medical condition does not meet the conditions set forth above, the transfer of care shall go forward during the dispute resolution process.

If the primary treating physician does not agree with the medical determination that your medical condition does not meet the conditions set forth above, the transfer of care shall not go forward until the dispute is resolved.

If it is determined that transfer of care is necessary, you will be notified in writing and you will be able to choose your treating physician from the MPN. You can obtain the MPN provider list at MEDfinder MPN at [www.scif.com](http://www.scif.com) or from your claims adjuster.

A complete copy of the State Fund MPN Transfer of Care Policy may be obtained from your claims adjuster.

### WHAT IS CONTINUITY OF CARE?

If your MPN provider no longer belongs to the network, you may request to continue treating with your provider if the following conditions are met:

- The termination of your provider is not for medical disciplinary cause or reason, or fraud or other criminal activity **AND**
- The terminated provider agrees in writing to accept the same contractual terms and conditions prior to the termination of the contract and to be compensated at rates and methods of payment similar to those used by the insurer for currently contracting providers in the same geographical area **AND**
- At the time of your provider's contract termination your medical condition meets ONE of the following conditions:
  - **An acute condition.** A medical condition that requires prompt medical attention and has a duration of less than 90 days. Completion of treatment shall be provided for the duration of the acute condition.
  - **A serious chronic condition.** An injury or illness that is serious in nature and that persists without full cure or worsens over duration of at least 90 days. Completion of treatment shall not exceed 12 months from the contract termination date or notification of your provider's contract termination whichever is later.
  - **A terminal illness.** An incurable or irreversible

若決定有需要轉移護理，你會收到書面通知，及你可以在醫療提供者網絡醫生中選擇你的治療醫生。你可以登入[www.scif.com](http://www.scif.com)的MEDfinder MPN 或者從你的索賠理算員取得醫療提供者網絡提供者名單。

你可以從你的索賠理算員取得一份完整的州立基金醫療提供者網絡轉移護理保單。

### 甚麼是繼續護理？

如果你的醫療提供者網絡提供者不再屬於該網絡，如果符合以下情況，你可以要求由你的提供者繼續護理：

- 你的提供者不是因為醫療紀律原因或者理由或者詐騙或者其他刑事罪行活動而被終止，及
- 該被終止的提供者在終止合約前書面同意接受相同的合約條款及條件，及類似該承保者使用的其他相同地域的現有合約提供者的收費額及收費方式，及
- 在你的提供者的合約終止的同時，你的醫療情況符合以下情況之一：
  - **緊急的病情** – 急性的病情是需要快速醫療照顧的醫療情況而且維期少於90日。應在緊急的病情的期間提供完成治療。
  - **嚴重的慢性病情** – 性質嚴重的傷患或者疾病持續最少90日無法根治或者持續惡化。完成治療不可超過12個月，由合約終止日期或者由你的提供者合約終止通知日期起計，以較後日期為準。
  - **末期疾病** – 無法治療或者不能改變的情況極可能在一年之內或者更短時間導致死亡。完成治療應該在末期疾病期間提供。
  - 合約終止日期或者由你的提供者合約終止通知日期起計，以較後日期為準，180日之內進行由承保者或者僱主授權並且由提供者建議及記錄的**手術或者其他醫療程序**作為有記錄治療過程的一部份。

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condition that has a high probability of causing death within one year or less. Completion of treatment shall be provided for the duration of a terminal illness.

- **Performance of a surgery or other procedure** that is authorized by the insurer or employer as part of a documented course of treatment and has been recommended and documented by the provider to occur within 180 days of the contract's termination date or notification of your provider's contract termination, whichever is later.

If you believe that your medical condition meets one of the above criteria, you may request to continue care with your terminated provider by contacting your claims adjuster verbally or in writing. If your claims adjuster determines that your medical condition does not meet the above criteria you will be notified to select another provider from the regional area listing of MPN providers. A copy of the determination notice will also be sent to your primary treating physician.

If you dispute the medical determination under this section, and your terminated provider is willing to continue the same contract terms and conditions, you may request a report from your primary treating physician that addresses your medical condition. The primary treating physician must provide this report to you within 20 calendar days from your request. If the primary treating physician does not provide the report to you within the 20-day period, the determination by the claims adjuster shall apply.

If you or your claims adjuster objects to the medical determination by the primary treating physician, the dispute shall be resolved pursuant to Labor Code §4062.

If your primary treating physician agrees with the claims adjuster's determination that your medical condition does not meet the conditions set forth above, during the dispute resolution process you will need to choose a new provider from the State Fund MPN.

If your primary treating physician does not agree with the claims adjuster's determination, you may continue to treat with the terminated provider until the dispute is resolved pursuant to Labor Code §4062. A complete copy of the State Fund MPN Continuity of Care policy may be obtained from your adjuster.

如果你相信你的醫療情況符合以上開列的情況之一，你可以口頭或者書面向你的索賠理算員要求由你的已終止提供者繼續護理。如果你的索賠理算員決定你的醫療情況不符合以上情況，你會收到通知從醫療提供者網絡提供者區域名單中選擇其他提供者。一份決定通知書副本會被送到你的主治醫生。

如果你根據本節對醫療決定提出爭議，而你的終止提供者亦願意繼續相同合約條款與條件，你可以向你的主治醫生要求一份報告說明你的醫療情況。該主治醫生必須在你提出要求之後20個日曆日之內向你提供此報告。如果主治醫生不在20日之內提出該報告，將由索賠調停員作出決定。

如果你或者你的索賠理算員反對該主治醫生的醫療決定，該項爭議應根據勞工法例§4062解決。

如果你的主治醫生同意索賠理算員的決定，即是你的情況不符合以上開列的情況，在爭議解決過程期間，你需要在州立基金醫療提供者網絡中選擇新的提供者。

如果你的主治醫生不同意索賠理算員的決定，你可以繼續接受該終止提供者的治療直至爭議根據勞工法例§4062解決為止。你可以從你的索賠理算員取得一份完整的州立基金繼續護理保單副本。

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## 州立基金醫療提供者網絡的僱員指引

### CONTACTS FOR MPN INFORMATION

If you have been assigned a claims adjuster, contact your adjuster directly. The adjuster's name and telephone number have been provided on your claim correspondence.

If you have not been assigned an adjuster, you may call State Fund's Claims Reporting Center at: (888) 222-3211. Translation services are available.

### CONTACT FOR MPN PROVIDER LISTS

You may obtain a regional area listing of MPN providers by accessing MEDfinder MPN at [www.scif.com](http://www.scif.com). You may also obtain a regional area listing by telephoning or sending a written request to your claims adjuster, or by contacting State Fund's Claims Reporting Center at: (888) 222-3211. You may obtain a complete hard copy list of all MPN providers by sending an email to [scifmpn@scif.com](mailto:scifmpn@scif.com) by calling (866) 436-0204, or by sending a written request to:

State Compensation Insurance Fund  
Attn: State Fund Medical Provider Network  
900 Corporate Center Dr.  
Monterey Park, CA 91754

### 索取MPN資料的方法

如果你已經獲指派一位索賠理算員，請直接與你的理算員聯絡。該理算員的名稱及電話號碼已在你的索賠通訊上註明。

如果你未獲指派一位理算員，你可以打電話 (888) 222-3211 聯絡州立基金索賠報告中心。我們亦有翻譯服務。

### 索取MPN提供者名單的方法

你可以登入 [www.scif.com](http://www.scif.com) 的 MEDfinder MPN 取得醫療提供者網絡提供者區域名單。你亦可以打電話或者書面向你的索賠理算員索取區域名單，或打電話 (888) 222-3211 聯絡州立基金索賠報告中心。索取一份載有全部醫療提供者網絡提供者的完整名單文本，你可以發電郵到 [scifmpn@scif.com](mailto:scifmpn@scif.com) 或者打電話 (866) 436-0204，或者將書面要求寄到：

State Compensation Insurance Fund  
Attention: State Fund Medical Provider Network  
900 Corporate Center Dr.  
Monterey Park, CA 91754

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## 州立基金醫療提供者網絡的僱員指引

### STATE FUND LOCATIONS

Bakersfield	(661) 664-4000	Oxnard	(805) 988-5300
Bay Area	(925) 523-5200	Redding	(530) 223-7000
Eureka	(707) 443-9721	Sacramento	(916) 924-5100
Fresno	(559) 433-2700	San Diego	(858) 552-7100
Inland Empire	(951) 656-8300	San Jose	(408) 363-7400
Los Angeles	(818) 291-7000	Santa Rosa	(707) 573-6500
Orange County	(714) 565-5000	Stockton	(209) 476-2600

### 州立基金的地點

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### CUSTOMER SERVICE CENTER

#### Policy Services & Certificates of Insurance

(877) 405-4545 toll-free  
(800) 268-3635 toll-free fax

#### Certificates of Insurance

(866) 266-2071 toll-free fax

#### 24-Hour Claims Reporting Center

(888) 222-3211 toll-free  
(800) 371-5905 toll-free fax

#### Fraud Hot Line

(888) 786-7372 toll-free

### 客戶服務中心

#### 保單及保單服務

(877) 405-4545 免費電話  
(800) 268-3635 免費傳真

#### 保單

(866) 266-2071 免費傳真

#### 24-小時索賠報告中心

(888) 222-3211 免費電話  
(800) 371-5905 免費傳真

#### 防詐騙熱線

(888) 786-7372 免費電話

