



County of Los Angeles Chief Administrative Office

Continuity of Care Policy Title 8, California Code of Regulations Section 9767 (Labor Code 4616.2)

At the request of a covered employee, the County of Los Angeles (County) shall complete the treatment by a terminated provider of a Medical Provider Network (MPN) as set forth in State of California Labor Code sections 4616.2 (d) and (e). This Continuity of Care Policy will replace all prior continuity of care policies and is effective February 1, 2006.

The completion of treatment shall be provided by a MPN terminated provider to an injured employee who, at the time of the provider's contract termination, was receiving services from that provider for one of the conditions described in paragraphs (a) through (d) below. The County shall provide for the completion of treatment for the following conditions subject to coverage through the workers' compensation system:

(a) **An acute condition.** An acute condition is a medical condition that involves a sudden onset of symptoms due to an illness, injury, or other medical problem that requires prompt medical attention and that has a limited duration of less than 90 days. Completion of treatment shall be provided for 90 days or less.

(b) **A serious chronic condition.** A serious chronic medical condition is due to a disease, illness, or other medical problem and persists at least 90 days without full cure, or worsens or requires ongoing treatment. Completion of treatment shall be provided to complete a course of treatment and to arrange for a safe transfer to a MPN provider. Completion of treatment shall not exceed 12 months from the providers' contract termination date.

(c) **A terminal illness.** A terminal illness is an incurable or irreversible 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.

(d) **Performance of a surgery** or other procedure that is authorized by the County as part of a documented course of treatment and has been recommended and documented by the provider to occur within 180 days of the provider's contract termination date.

Unless otherwise agreed in writing by the terminated provider and the County, all services rendered shall be compensated at either the statutory workers' compensation rate determined by the location of services; or if less, the rates and methods of payment similar to those used by the County for currently contracted providers providing similar services who are practicing in the same or a similar geographic area as the terminated provider. The terminated provider is not required to continue services if that provider does not accept the payment rates provided for in this paragraph. If the

terminated provider does not agree or does not comply with these contractual terms and conditions, the County is not required to continue the provider's services beyond the medical provider's contract termination date.

The County is not required to provide for completion of treatment by a provider whose contract with the County has been terminated, or not renewed, for reasons relating to a medical disciplinary cause or reason, as defined in paragraph (6) of subdivision (a) of Section 805 of the Business and Profession Code, or workers' compensation fraud or other criminal activity. Nothing in this section shall preclude the County from providing continuity of care beyond the requirements of this policy.

Following the employee's request for continued treatment, the County will notify the employee of its determination regarding the completion of treatment. The notification shall be sent to the covered employee's residence and a copy of the letter shall be sent to the employee's primary treating physician. If you do not agree with the transfer, you may ask your treating physician for a report that addresses whether you are in any of the conditions set forth in paragraphs (a) through (d) above. The treating physician shall provide a report to the employee within 20 days of the request. If the physician fails to issue the report, then the determination made by the County shall apply.

If either the County or injured employee do not agree with the treating physicians report, the dispute regarding the medical determination shall be resolved according to State of California Labor Code Section 4062. If you disagree, you must notify the County's workers' compensation third party administrator.

If the treating physician agrees with the County's determination that the injured employee's medical condition does not meet the conditions set forth in paragraphs (a) through (d) above, the transfer of care to an MPN provider within any of the three County MPNs shall go forward during the dispute resolution process.

If the treating physician does not agree with the County's determination that the injured employee's medical condition meets the conditions set forth in (a) through (d) above, treatment may be continued with a provider outside of the three MPNs until the dispute is resolved.