

Workers' Compensation Health Care Network Employer Welcome Packet

Dear Employer:

Welcome to the Prime Health Services Texas HCN. This packet includes important information to assist you and your employees as you begin accessing our network for your workers' compensation healthcare needs. This two-page Employer Welcome Packet lists the actions for which you (as the employer) are responsible. Please ensure that you do all of the following:

Initial Steps for Employers:

- Distribute the nine (9)-page **Employee Notice of Network Requirements** (the "Notice") to current employees in English, Spanish, or any other language common to your employees. If you need it in another language, call 866-348-3887. It is available at www.primehealthservices.com.
- Post the Notice at each business location (for example, near OSHA or minimum wage postings).
- Be sure to give the Notice to new employees within three (3) days of hire.
- ***Signature Requirement*** After you supply a written copy of the Notice or a way to access a written copy (such as an email attachment), ask employees to sign the **Acknowledgment Form**, found on page nine (9), either physically or electronically, of the Notice to show they received the information.
- Establish a standard process for delivering the Notice to employees and document the following:
 - Employee name and Date of Delivery;
 - Location of Delivery – (*delivered to their home or work address*);
 - Delivery Method – (*as part of a "new hire" packet, at a staff or safety meeting, email, etc.*)

Note: According to the Texas Department of Insurance, if you fail to establish a process that documents the above five items, it creates the presumption that your employees did not receive the Notice. To assist you, we have a sample **Delivery Log** on our website that you can use, or you may use any other documentation method that meets the above requirements.

- Retain your employees signed Acknowledgment Forms and please DO NOT return them to Prime Health Services, Inc. unless we specifically request a copy at the time of injury. An employee who refuses to sign the form remains subject to the network requirements. Simply document the employee's refusal in their personnel file, and try to have a witness available.

An injured employee may be allowed to seek care from a non-network treating doctor if you fail to provide a Notice and obtain a signed Acknowledgment Form within the required timeframe.

If an Employee is Injured on the Job:

After an employee is injured on the job, please ensure that you take the following actions:

- Whenever possible, assist the injured employee by arranging / providing their transportation to a network provider, or if necessary, to the nearest emergency facility.
- Within 24 hours of the injury, complete the first report of injury / incident report. You can access the report form online at www.primehealthservices.com, which has instructions for submitting the form via email or fax, or you can call us at 866-348-3887.
- Inform employees of the availability of the network and re-distribute the nine (9) page Employee Notice packet, which is available at www.primehealthservices.com. Assist the employee in locating a network treating doctor. Our provider listing is available through our website or by calling us at 866-348-3887 for assistance in locating available providers in your area.
- Upon being injured, the employee must sign an additional Acknowledgment Form (page 9 of their Notice packet).



Please remember to visit our website, www.primehealthservices.com, where you can view our updates and regulations from the Texas Department of Insurance and download copies of the necessary forms mentioned in this packet, including the following:

- A copy of this **Employer Welcome Packet**
- The **Employee Notice of Network Requirements** (the “Notice”)
- A copy of the **Employee Acknowledgement Form** (also found on page nine (9) of the Notice)
- A sample **Delivery Log**