

DEPARTMENT OF INSURANCE AND FINANCE
WORKERS' COMPENSATION DIVISION
MANAGED CARE ORGANIZATIONS (TEMPORARY RULE)

EXHIBIT "A"
OREGON ADMINISTRATIVE RULES
CHAPTER 436, DIVISION 15

EFFECTIVE APRIL 15, 1992

436-15-035 Coverage Responsibility of a MCO

(1) A managed care organization shall provide comprehensive medical services in accordance with its certification to all injured workers covered by the insurer/MCO contracts. [An injured worker may seek treatment through an MCO, prior to claim acceptance and after a claim is denied, but shall not be required to do so.]

(2) The director shall designate a MCO's initial geographical service area and approve any expansions to the MCO's service area. Injured workers shall not be governed by a MCO until the director has approved the geographical service area. Geographical service areas shall be established by postal zip code. The MCO may only provide contract services to those geographical areas approved by the director.

(3) A MCO wishing to expand its geographical service area must obtain approval for such expansion from the director. The request must identify the postal zip code areas wished to be included in the expansion and include evidence that the MCO has an adequate provider panel in the new areas which meet the minimum requirements as set forth in OAR 436-15-030(1). An MCO may be authorized by the director to expand the geographical service area without the minimum categories of medical service providers when the MCO establishes that inadequate numbers of providers in a given category are able or willing to become members of the MCO.

(4) When an MCO contracts with an insurer to provide services, the contract shall specify those employers governed by the contract. The MCO contract must include the following terms and conditions when establishing who is governed by the contract:

(a) The insured's place of employment must be within the authorized, geographical service area;

(b) All workers at any specific employer's location with accepted compensable injuries shall be governed by the same MCO(s). Insurers may contract with multiple MCOs to provide coverage for employers. When insurers contract with multiple MCOs to cover the same employer locations, each worker shall have initial choice at time of injury to select the MCO which will manage their care;

(c) Workers with accepted compensable injuries occurring on or after the effective date of the MCO contract shall receive medical services in the manner prescribed by the terms and conditions of the MCO contract;

(d) The requirements established in these rules do not apply to workers with accepted compensable injuries that occurred prior to the effective date of the MCO contract until they become medically stationary or change physicians, whichever event first occurs;

(e) To ensure continuity of care, the MCO contract shall specify the manner in which injured workers with accepted compensable injuries will receive medical services when an MCO contract terminates. When MCO coverage for an injured worker is transferred from one MCO to

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another, the worker may continue to treat with their attending physician until a change of physician is necessary based upon the MCO's treatment standards and protocols.

(5) Notwithstanding the requirements of this rule, failure of the managed care organization to provide such medical services does not relieve the insurers of their responsibility to ensure benefits are provided injured workers under ORS 656.001 to 656.794.

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