



EAST SAN GABRIEL VALLEY REGIONAL OCCUPATIONAL PROGRAM AND TECHNICAL CENTER

1501 West Del Norte Street, West Covina, CA 91790 •(626) 962-5080 •Fax (626) 472-5125

Employee Acknowledgement of Receipt

This receipt acknowledges that I have received the Workers' Compensation materials, including:

1. Company Nurse Workplace Injury Hotline
2. Employee Notification Medical Provider Network
3. Arissa/Harbor Medical Providers
4. Notice to Employees – Injuries Caused by Work (DWC 7)
5. Pre-designation of Personal Physician Form
6. Time Of Hire Pamphlet

Print Employee Name

Employee Signature

Date

IN CASE OF WORKPLACE INJURY:

ACCION a seguir en caso de un accidente en el trabajo



1-888-375-0280

▶ AVAILABLE 24 HOURS A DAY

- 1** ▶ **Injured worker notifies supervisor.**
Empleado lesionado notifica a su supervisor.
- 2** ▶ **Supervisor / Injured worker immediately calls injury hotline.**
Supervisor / Empleado lesionado llama inmediatamente a la línea de enfermeros/las.
- 3** ▶ **Company Nurse gathers information over the phone and helps injured worker access appropriate medical treatment.**
Profesional Médico obtiene información por teléfono y asiste al empleado lesionado en localizar el tratamiento médico adecuado.

EMPLOYER NAME
(NOMBRE DE COMPANIA)

SEARCH CODE
(CÓDIGO DEL BÚSQUEDA)

East San Gabriel Valley ROP	ESGVR
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Notice to Employer/Supervisor:

Please post copies of this poster in multiple locations within your worksite. If the injury is non-life threatening, please call Company Nurse prior to seeking treatment. Minor injuries should be reported prior to leaving the job site when possible.

Visit us online: www.CompanyNurse.com

Important Information about Medical Care if you have a Work-Related Injury or Illness

Complete Written Employee Notification Re: Medical Provider Network (Title 8, California Code of Regulations, section 9767.12)

California law requires your employer to provide and pay for medical treatment if you are injured at work. Your employer has chosen to provide this medical care by using a Workers' Compensation physician network called a Medical Provider Network (MPN). This MPN is administered by Arissa.

This notification tells you what you need to know about the MPN program and describes your rights in choosing medical care for work-related injuries and illnesses.

- **What happens if I get injured at work?**

In case of an emergency, you should call 911 or go to the closest emergency room.

If you are injured at work, notify your employer as soon as possible. Your employer will provide you with a claim form. When you notify your employer that you have had a work-related injury, your employer or insurer will make an initial appointment with a doctor in the MPN.

- **What is an MPN?**

A Medical Provider Network (MPN) is a group of health care providers (physicians and other medical providers) used by your employer to treat workers injured on the job. MPNs must allow employees to have a choice of provider(s). Each MPN must include a mix of doctors specializing in work-related injuries and doctors with expertise in general areas of medicine.

- **What MPN is used by my employer?**

Your employer is using the Arissa/Harbor MPN with the identification number 2328. You must refer to the MPN name and the MPN identification number whenever you have questions or requests about the MPN.

- **What if I need help finding and making an appointment with a doctor?**

The MPN's Medical Access Assistant will help you find available MPN physicians of your choice and can assist you with scheduling and confirming physician appointments. The Medical Access Assistant is available to assist you Monday through Saturday from 7am-8pm (Pacific) and schedule medical appointments during doctors' normal business hours. Assistance is available in English and in Spanish.

The contact information for the Medical Access Assistant is:

Toll Free Telephone Number: (855) 339-6047

Fax Number: (703) 673-0181

Email Address: MPNMAA@harborsys.com

- **Who can I contact if I have questions about my MPN?**

The MPN Contact listed in this notification will be able to answer your questions about the use of the MPN and will address any complaints regarding the MPN.

The contact for your MPN is:

Name: Harbor Health Systems MPN Contact

Title: MPN Contact

Address: P.O. Box 11779, Newport Beach, CA 92658-5041

Telephone Number: (888) 626-1737

Email address: MPNcontact@harborsys.com

General information regarding the MPN can also be found at the following website:
www.harborsys.com/ArissaMPN.

- **How do I find out which doctors are in my MPN?**

You can get a regional list of all MPN providers in your area by calling the MPN Contact or by going to our website at: www.harborsys.com/ArissaMPN. At minimum, the regional list must include a list of all MPN providers within 15 miles of your workplace and/or residence or a list of all MPN providers within the county where you live and/or work. You may choose which list you wish to receive. You also have the right to obtain a list of all the MPN providers upon request.

You can access the roster of all treating physicians, telehealth information and a listing of all telehealth providers in the MPN by going to the website at www.harborsys.com/ArissaMPN.

- **How do I choose a provider?**

Your employer or the insurer for your employer will arrange the initial medical evaluation with a MPN physician. After the first medical visit, you may continue to be treated by that doctor, or you may choose another doctor from the MPN. You may continue to choose doctors within the MPN for all of your medical care for this injury.

If appropriate, you may choose a specialist or ask your treating doctor for a referral to a specialist. Some specialists will only accept appointments with a referral from the treating doctor. Such specialist might be listed as "by referral only" in your MPN directory.

If you need help in finding a doctor or scheduling a medical appointment, you may call the Medical Access Assistant.

- **Can I change providers?**

Yes. You can change providers within the MPN for any reason, but the providers you choose should be appropriate to treat your injury. Contact the MPN Contact or your claims adjuster if you want to change your treating physician.

- **What standards does the MPN have to meet?**

The MPN has providers and telehealth services for the entire State of California.

The MPN must give you access to a regional list of providers that includes at least three physicians in each specialty commonly used to treat work injuries/illnesses in your industry. The MPN must provide access to primary treating physicians within 30 minutes or 15 miles and specialists within 60 minutes or 30 miles of where you work or live.

If you live in a rural area or an area where there is a health care shortage, there may be a different standard.

There are two types of telehealth physicians; physicians who provide services via telehealth only and physicians who provide services at a brick and mortar facility and also via telehealth. The physician who is available for only telehealth appointments will be counted when determining if the MPN has met access standards, if you consent to see the telehealth physician. The physician who is available for only telehealth appointments will not be counted when determining if the MPN has met access standards, if you do not consent or retract your consent to receive telehealth services prior to delivery of telehealth treatment.

Physicians who provide services at a brick and mortar facility and also via telehealth, if you choose and consent to telehealth services, the physician will be counted when determining if the MPN has met access standards. If you do not consent or retract your consent prior to delivery of telehealth treatment, inclusion of physician in determining MPN's compliance with access standards, is dependent upon whether or not the physician's physical location is within 30 minutes or 15 miles (if Primary Treating Physician), or within 60 minutes or 30 miles (if specialist), of your residence or workplace, in accordance with 8 CCR §9767.5(a)(1) and (a)(2).

Your consent is required prior to delivery of the telehealth treatment and must be documented in your medical record, pursuant to Business and Professions Code section 2290.5(b).

After you have notified your employer of your injury, the MPN must provide initial treatment within 3 business days. If treatment with a specialist has been authorized, the appointment with the specialist must be provided to you within 20 business days of your request.

If you have trouble getting an appointment with a provider in the MPN, contact the Medical Access Assistant.

If there are no MPN providers in the appropriate specialty available to treat your injury within the distance and timeframe requirements, then you will be allowed to seek the necessary treatment outside of the MPN.

- **What if there are no MPN providers where I am located?**

If you are a current employee living in a rural area or temporarily working or living outside the MPN service area, or you are a former employee permanently living outside the MPN service area, the MPN or your treating doctor will give you a list of at least three physicians who can treat you. The MPN may also allow you to choose your own doctor outside of the MPN network. Contact your MPN Contact for assistance in finding a physician or for additional information.

- **What if I need a specialist that is not available in the MPN?**

If you need to see a type of specialist that is not available in the MPN, you have the right to see a specialist outside of the MPN.

- **What if I disagree with my doctor about medical treatment?**

If you disagree with your doctor or wish to change your doctor for any reason, you may choose another doctor within the MPN.

If you disagree with either the diagnosis or treatment prescribed by your doctor, you may ask for a second opinion from another doctor within the MPN. If you want a second opinion, you must contact the MPN contact or your claims adjuster and tell them you want a second opinion. The MPN should give you at least a regional or full MPN provider list from which you can choose a second opinion doctor. To get a second opinion, you must choose a doctor from the MPN list and make an appointment within 60 days. You must tell the MPN Contact of your appointment date, and the MPN will send the doctor a copy of your medical records. You can request a copy of your medical records that will be sent to the doctor.

If you do not make an appointment within 60 days of receiving the regional provider list, you will not be allowed to have a second or third opinion with regard to this disputed diagnosis or treatment of this treating physician.

If the second-opinion doctor feels that your injury is outside of the type of injury he or she normally treats, the doctor's office will notify your employer or insurer and you. You will get another list of MPN doctors or specialists so you can make another selection.

If you disagree with the second opinion, you may ask for a third opinion. If you request a third opinion, you will go through the same process you went through for the second opinion.

Remember that if you do not make an appointment within 60 days of obtaining another MPN provider list, then you will not be allowed to have a third opinion with regard to this disputed diagnosis or treatment of this treating physician.

If you disagree with the third-opinion doctor, you may ask for an MPN Independent Medical Review (MPN IMR). Your employer or MPN Contact will give you information on requesting an MPN Independent Medical Review and a form at the time you select a third-opinion physician.

If either the second or third-opinion doctor or MPN Independent Medical Reviewer agrees with your need for a treatment or test, you may be allowed to receive that medical service from a provider within the MPN or if the MPN does not contain a physician who can provide the recommended treatment, you may choose a physician outside the MPN within a reasonable geographic area.

- **What if I am already being treated for a work-related injury before the MPN begins?**

Your employer or insurer has a “*Transfer of Care*” policy which will determine if you can continue being temporarily treated for an existing work-related injury by a physician outside of the MPN before your care is transferred into the MPN.

If your current doctor is not or does not become a member of the MPN, then you may be required to see a MPN physician. However, if you have properly predesignated a primary treating physician, you cannot be transferred into the MPN. (If you have questions about predesignation, ask your supervisor.)

If your employer decides to transfer you into the MPN, you and your primary treating physician must receive a letter notifying you of the transfer.

If you meet certain conditions, you may qualify to continue treating with a non-MPN physician for up to a year before you are transferred into the MPN. The qualifying conditions to postpone the transfer of your care into the MPN are set forth in the section below.

Can I Continue Being Treated By My Doctor?

You may qualify for continuing treatment with your non-MPN provider (through transfer of care or continuity of care) for up to a year if your injury or illness meets any of the following conditions:

- **(Acute)** The treatment for your injury or illness will be completed in less than 90 days;
- **(Serious or Chronic)** Your injury or illness is one that is serious and continues for at least 90 days without full cure or worsens and requires ongoing treatment. You may be allowed to be treated by your current treating doctor for up to one year, until a safe transfer of care can be made.
- **(Terminal)** You have an incurable illness or irreversible condition that is likely to cause death within one year or less.
- **(Pending Surgery)** You already have a surgery or other procedure that has been authorized by your employer or insurer that will occur within 180 days of the MPN effective date, or the termination of contract date between the MPN and your doctor.

You can disagree with your employer’s decision to transfer your care into the MPN. If you don’t want to be transferred into the MPN, ask your primary treating physician for a medical report on whether you have one of the four conditions stated above to qualify for a postponement of your transfer into the MPN.

Your primary treating physician has 20 days from the date of your request to give you a copy of his/her report on your condition. If your primary treating physician does not give you the report within 20 days of your request, the employer can transfer your care into the MPN and you will be required to use an MPN physician.

You will need to give a copy of the report to your employer if you wish to postpone the transfer of your care. If you or your employer disagrees with your doctor’s report on your condition, you or your employer can dispute it. See the complete Transfer of Care policy for more details on the dispute resolution process.

For a copy of the Transfer of Care policy, in English or Spanish, ask your MPN Contact.

- **What if I am being treated by a MPN doctor who decides to leave the MPN?**

Your employer or insurer has a written “*Continuity of Care*” policy that will determine whether you can temporarily continue treatment for an existing work injury with your doctor if your doctor is no longer participating in the MPN.

If your employer decides that you do not qualify to continue your care with the non-MPN provider, you and your primary treating physician must receive a letter notifying you of this decision.

If you meet certain conditions, you may qualify to continue treating with this doctor for up to a year before you must choose a MPN physician. These conditions are set forth in the “***Can I Continue Being Treated By My Doctor?***” section above.

You can disagree with your employer's decision to deny you Continuity of Care with the terminated MPN provider. If you want to continue treating with the terminated doctor, ask your primary treating physician for a medical report on whether you have one of the four conditions stated in the section above to see if you qualify to continue treating with your current doctor temporarily.

Your primary treating physician has 20 days from the date of your request to give you a copy of his/her medical report on your condition. If your primary treating physician does not give you the report within 20 days of your request, your employer's decision to deny you Continuity of Care with your doctor who is no longer participating in the MPN will apply, and you will be required to choose a MPN physician.

You will need to give a copy of the report to your employer if you wish to postpone the selection of another MPN doctor for your continued treatment. If you or your employer disagrees with your doctor's report on your condition, you or your employer can dispute it. See the complete Continuity of Care policy for more details on the dispute resolution process.

For a copy of the Continuity of Care policy, in English or Spanish, ask your MPN Contact.

- **What if I have questions or need help?**

- **MPN Contact:** You may always contact the MPN Contact if you have questions about the use of the MPN and to address any complaints regarding the MPN.
- **Medical Access Assistants:** You can contact the Medical Access Assistant if you need help finding MPN physicians and scheduling and confirming appointments.
- **Division of Workers' Compensation (DWC):** If you have concerns, complaints or questions regarding the MPN, the notification process, or your medical treatment after a work-related injury or illness, you can call the DWC's Information and Assistance office at 1-800-736-7401. You can also go to the DWC's website at www.dir.ca.gov/dwc and click on "medical provider networks" for more information about MPNs.
- **MPN Independent Medical Review:** If you have questions about the MPN Independent Medical Review process contact the Division of Workers' Compensation's Medical Unit at:
DWC Medical Unit
P.O. Box 71010
Oakland, CA 94612
(510) 286-3700 or (800) 794-6900

Keep this information in case you have a work-related injury or illness.

Información Importante sobre el Cuidado Médico si tiene una Lesión o Enfermedad Relacionada con el Trabajo

Notificación Escrita Completa del Empleado Re: Red de Proveedores Médicos (Título 8, Código de Regulaciones de California, sección 9767.12)

La ley de California requiere que su empleador le proporcione y pague por el tratamiento médico si se lesiona en el trabajo. Su empleador ha escogido proporcionar este cuidado médico utilizando un médico de la red de Compensación de Trabajadores llamada la Red de Proveedores Médicos (MPN). Esta MPN es administrada por Arissa.

Esta notificación le informará de lo que necesita conocer sobre el programa de la MPN y describe sus derechos en escoger los cuidados médicos para sus lesiones o enfermedades relacionadas con el trabajo.

- **¿Qué sucede si me lesiono en el trabajo?**

En caso de una emergencia, debe llamar al 911 o vaya a la sala de emergencia más cercana.

Si se lesiona en el trabajo, notifique a su empleador tan pronto sea posible. Su empleador le proporcionará el formulario del reclamo. Cuando notifica a su empleador que ha tenido una lesión relacionada con el trabajo, su empleador o asegurador le hará la cita inicial con un médico de la MPN.

- **¿Qué es la MPN?**

La Red de Proveedores Médicos (MPN) es un grupo de proveedores de cuidados de la salud (médicos y otros proveedores médicos) utilizados por su empleador para tratar a los trabajadores lesionados en el trabajo. La Red de Proveedores Médicos (MPN) debe permitir que los empleados tengan una selección de proveedores(es). Cada MPN debe incluir una combinación de médicos especializados en lesiones relacionadas con el trabajo y médicos con experiencia en áreas generales de medicina.

- **¿Cual Red de Proveedores Médicos (MPN) es utilizada por mi empleador?**

Su empleador se encuentra utilizando la Red de Proveedores Médicos de Arissa/Harbor MPN con número de identificación 2328. Debe hacer referencia al nombre de la MPN y al número de identificación de la MPN siempre que tenga preguntas o solicitudes sobre la MPN.

- **¿Qué sucede si necesito ayuda en encontrar y hacer una cita con un médico?**

El Asistente de Acceso Médico de la MPN lo ayudará a encontrar los médicos de la MPN de su elección disponibles y puede ayudarle a programar y confirmar las citas con los médicos. El Asistente de Acceso Médico se encuentra disponible para ayudarle de lunes a sábados de 7am – 8pm (Pacífico) y para programar citas médicas durante horas normales laborables. La asistencia se encuentra disponible en inglés y español. La información de contacto para el Asistente de Acceso Médico es:

Núm. de Teléfono Gratuito: (855) 339-6047

Núm. de Fax: (703) 673-0181

Dirección de Correo Electrónico: MPNMAA@harborsys.com

- **¿Con quién me puedo comunicar si tengo preguntas sobre mi MPN?**

El Contacto de la MPN nombrado en esta notificación será capaz de contestar sus preguntas sobre el uso de la MPN y dirigirá cualquier queja relacionada con la MPN.

El Contacto de la MPN es:

Nombre: Harbor Health Systems MPN Contact

Título: Contacto de la MPN

Dirección: P.O. Box 11779, Newport Beach, CA 92658-5041

Núm. de Teléfono: (888) 626-1737

Dirección de Correo Electrónico: MPNcontact@harborsys.com

Información general relacionada con la MPN también puede ser encontrada en el siguiente sitio web: www.harborsys.com/ArissaMPN.

- **¿Cómo puedo saber que médicos se encuentran en mi Red de Proveedores Médicos (MPN)?**

Usted puede obtener una lista regional de todos los proveedores de la MPN en su área llamando al Contacto de la MPN o visitando nuestro sitio web en: www.harborsys.com/ArissaMPN. Como mínimo, la lista regional debe incluir una lista de todos los proveedores de la MPN dentro de quince (15) millas del lugar de su trabajo y/o residencia o una lista de todos los proveedores de la MPN dentro del condado donde vive y/o trabaja. Usted puede escoger cual lista desea recibir. También, tiene derecho a obtener una lista de todos los proveedores de la MPN una vez la solicite.

Usted puede tener acceso a la lista de todos los médicos tratantes, información telesalud y el listado de todos los proveedores de telesalud en MPN visitando el sitio web en: www.harborsys.com/ArissaMPN.

- **¿Cómo escojo un proveedor?**

Su empleador o el asegurador de su empleador harán los arreglos para la evaluación médica inicial con un médico de la MPN. Después de la primera visita, puede continuar siendo tratado por ese médico, o puede escoger otro médico de la MPN. Puede continuar escogiendo médicos dentro de la MPN para todos sus cuidados médicos para esta lesión.

Si es apropiado, usted puede escoger un especialista o puede solicitarle a su médico tratante que lo refiera a un especialista. Algunos especialistas solo aceptarán citas con el referido del médico tratante. Dicho especialista podría estar en la lista como “solo por referido” en el directorio de su MPN.

Si necesita ayuda en encontrar un médico o en programar una cita médica, puede llamar al Asistente de Acceso Médico.

- **¿Puedo cambiar de proveedores?**

Sí. Usted puede cambiar de proveedores dentro de la MPN por cualquier razón, pero los proveedores que escoja deberán ser apropiados para tratar su lesión. Comuníquese con el Contacto de la MPN o con el ajustador de su reclamo si desea cambiar de médico tratante.

- **¿Con que estándares tiene que cumplir la MPN?**

La MPN tiene proveedores y servicios telesalud a través de todo el estado de California.

La MPN le brindará acceso a la lista regional de proveedores que incluye al menos (3) médicos de cada especialidad comúnmente utilizados para tratar lesiones/ enfermedades relacionadas con el trabajo en su industria. La MPN deberá proporcionar acceso a los médicos tratantes primarios dentro de treinta (30) minutos o quince (15) millas, y especialistas dentro de sesenta (60) minutos o treinta (30) millas de donde trabaja o vive.

Si trabaja en un área rural o un área donde hay escasez de cuidados médicos, puede existir un estándar diferente.

Hay dos tipos de médicos de telesalud; médicos que brindan servicios solo a través de telesalud y médicos que brindan servicios en una instalación física y también a través de telesalud. El médico que está disponible solo para citas de telesalud se considerará cuando se determine si la Red de Proveedores Médicos (MPN, según sus siglas en inglés) ha cumplido con los estándares de acceso, si usted da su consentimiento para ver al médico de telesalud. El médico que está disponible solo para citas de telesalud no se considerará cuando se determine si la MPN cumple con los estándares de acceso, si usted no consiente o retracta su consentimiento para recibir servicios de telesalud antes de la entrega del tratamiento de telesalud.

Los médicos que prestan servicios en instalaciones físicas y también a través de telesalud, si usted elige y da su consentimiento para los servicios de telesalud, el médico se considerará cuando se determine si la MPN ha cumplido con los estándares. Si usted no da su consentimiento o retracta su consentimiento antes de que se brinde el tratamiento de telesalud, la inclusión del médico para determinar el cumplimiento de los estándares de acceso de la MPN depende de si la ubicación física del médico se encuentra dentro de los 30 minutos o 15 millas (si es el Médico Tratante Primario) o dentro de los 60 minutos o 30 millas (si es un especialista) de su residencia o lugar de trabajo, de acuerdo con el Título 8 del Código de Reglamentaciones de California (CCR, según sus siglas en inglés), §9767.5(a)(1) y (a)(2).

Se requiere su consentimiento antes de que se preste el servicio de telesalud y ello debe estar documentado en su registro médico, de acuerdo con el artículo 2290.5(b) del Código Comercial y Profesional.

Después que usted ha notificado su empleador de su lesión, la MPN debe proporcionar el tratamiento inicial dentro de tres (3) días laborables. Si el tratamiento con el especialista ha sido autorizado, la cita con el especialista deberá ser proporcionada dentro de veinte (20) días laborables de su solicitud.

Si tiene problemas obteniendo la cita con el proveedor de la MPN, comuníquese con el Asistente de Acceso Médico.

Si no existen proveedores de la MPN de la especialidad apropiada disponibles para tratar su lesión dentro de los requerimientos de distancia y periodo de tiempo, entonces a usted se le permitirá buscar el tratamiento necesario fuera de la MPN.

¿Qué sucede si no existen proveedores de la MPN donde me encuentro localizado?

Si es un empleado actual que se encuentra viviendo en un área rural o trabajando temporalmente fuera del área de servicio de la MPN, o es un ex empleado viviendo permanentemente fuera del área de servicio de la MPN, la MPN o su médico tratante le proporcionará una lista con al menos tres (3) médicos que puedan tratarlo. La MPN también puede permitirle escoger su propio médico fuera de la red de la MPN. Comuníquese con su Contacto de la MPN para asistencia en encontrar un médico o para información adicional.

- **¿Qué sucede si necesito un especialista que no se encuentra disponible dentro de la MPN?**

Si necesita ver un tipo de especialista que no se encuentra disponible en la MPN, usted tiene derecho a un especialista fuera de la MPN.

- **¿Qué sucede si no estoy de acuerdo con mi médico sobre el tratamiento médico?**

Si no está de acuerdo con su médico o desea cambiar su médico por alguna razón, puede escoger otro médico dentro de la MPN.

Si no está de acuerdo con el diagnóstico o tratamiento prescrito por su médico, puede solicitar una segunda opinión de otro médico dentro de la MPN. Si desea una segunda opinión, debe comunicarse con el Contacto de la MPN o con su ajustador de los reclamos y debe decirle que desea una segunda opinión. La MPN deberá proporcionarle al menos una lista regional o completa de los proveedores de la MPN de los cuales puede escoger el médico de la segunda opinión. Para obtener una segunda opinión, debe escoger un médico de la lista de la MPN y hacer una cita dentro de sesenta (60) días. Usted debe decirle al Contacto de la MPN la fecha de la cita, y la MPN le enviará al médico una copia de sus expedientes médicos. Usted puede solicitar una copia de sus expedientes médicos que serán enviados al médico.

Si no hace una cita dentro de sesenta (60) días de recibir la lista regional de proveedores, a usted no se le permitirá tener una segunda o tercera opinión relacionada al diagnóstico o tratamiento disputado de su médico tratante.

Si el médico de la segunda opinión siente que su lesión se encuentra fuera del tipo de lesión que él o ella normalmente trata, la oficina del médico le notificará a su empleador o asegurador y a usted. A usted se le entregará otra lista de médicos o especialistas de la MPN para que pueda hacer otra selección.

Si no está de acuerdo con la segunda opinión, puede solicitar una tercera opinión. Si solicita una tercera opinión, tendrá que ir a través del mismo proceso que pasó con la segunda opinión.

Recuerde que si no hace una cita dentro de sesenta (60) días a partir de recibir la otra lista de proveedores de la MPN, entonces no se le permitirá tener una tercera opinión relacionada al diagnóstico o tratamiento disputado de su médico tratante.

Si no está de acuerdo con el médico de la tercera opinión, puede solicitar una Revisión Médica Independiente (con sus siglas en inglés, MPN IMR) de la MPN. Su empleador o el Contacto de la MPN le proporcionarán la información sobre como solicitar la Revisión Médica Independiente de la MPN y le proporcionará un formulario en el momento en que usted selecciona el médico de la tercera opinión.

Si el médico de la segunda o tercera opinión o el Revisor Médico Independiente de la MPN está de acuerdo en que usted necesita el tratamiento o prueba, a usted se le puede permitir recibir ese servicio médico de un proveedor dentro de la MPN o si la MPN no contiene un médico que pueda proporcionar el tratamiento recomendado, puede escoger un médico fuera de la MPN dentro de una área geográfica razonable.

- **¿Qué sucede si ya estoy siendo tratado por una lesión relacionada con el trabajo antes de que comience la MPN?**

Su empleador o asegurador tienen una póliza de “*Transferencia de los Cuidados*” la cual determinará si puede continuar siendo tratado temporalmente por una lesión relacionada con el trabajo existente por un médico fuera de la MPN antes de que su cuidado sea transferido a la MPN.

Si su médico actual no es o no se convierte en un miembro de la MPN, entonces a usted se le puede requerir ver a un médico de la MPN. Sin embargo, si usted ha predestinado apropiadamente a un médico tratante primario, usted no puede ser transferido a la MPN (si tiene preguntas sobre la predestinación, pregunte a su supervisor).

Si su empleador decide transferirlo a la MPN, usted y su médico tratante primario deberán recibir una carta notificándoles de la transferencia.

Si usted cumple con ciertas condiciones, puede calificar para continuar tratándose con un médico que no pertenezca a la MPN por hasta un (1) año antes de que sea transferido a la MPN. Las condiciones de calificación para posponer la transferencia de su atención a la MPN se establecen en la sección siguiente:

¿Puedo Continuar Siendo Tratado por Mi Médico?

Usted puede calificar para continuar recibiendo el tratamiento con su proveedor que no pertenece a la MPN (a través de la transferencia de los cuidados o continuidad de los cuidados) por hasta un (1) año, si su lesión o enfermedad cumple con cualquiera de las siguientes condiciones:

- **(Aguda)** El tratamiento para su lesión o enfermedad será completado en menos de noventa (90) días;
- **(Seria o Crónica)** Su lesión o enfermedad es una que es seria y continua por al menos noventa (90) días sin una cura completa o empeora, y requiere tratamiento en lo subsiguiente. A usted se le puede permitir ser tratado por su médico tratante actual por hasta un (1) año, hasta que la transferencia del cuidado pueda ser realizada de manera segura.
- **(Terminal)** Usted tiene una enfermedad incurable o una condición irreversible que es probable que le cause la muerte dentro de un (1) año o menos.
- **(Cirugía Pendiente)** Ya tiene una cirugía u otro procedimiento que ha sido autorizado por su empleador o asegurador que ocurrirá dentro de ciento ochenta (180) días de la fecha de efectividad de la MPN, o la terminación de la fecha del contrato entre la MPN y su médico.

Usted puede estar en desacuerdo con la decisión de su empleador de transferir su cuidado a la MPN. Si no desea ser transferido a la MPN, solicítele a su médico tratante primario un reporte médico que indique que tiene una (1) de las cuatro (4) condiciones indicadas anteriormente para calificar en posponer su transferencia a la MPN.

Su médico tratante primario tiene veinte (20) días a partir de la fecha de su solicitud para entregarle una copia del reporte de su condición. Si su médico tratante primario no le entrega el reporte dentro de veinte (20) días a partir de la solicitud, el empleador puede transferir su cuidado a la MPN, y a usted se le requerirá el utilizar un médico de la MPN.

Necesitará brindarle una copia del reporte a su empleador, si desea posponer la transferencia de sus cuidados. Si usted o su empleador no están de acuerdo con el reporte del médico de su condición, usted o su empleador pueden disputarlo. Vea la póliza completa de Transferencia de los Cuidados para más detalles del proceso de resolución de disputas.

Para una copia de la póliza de Transferencia de los Cuidados, en inglés o español, solicítela a su Contacto de la MPN.

- **¿Qué sucede si estoy siendo tratado por un médico de la MPN que decide dejar la MPN?**

Su empleador o asegurador tienen la póliza escrita de “*Continuidad de los Cuidados*” que determinará si puede continuar temporalmente el tratamiento de una lesión existente relacionada con el trabajo con su médico, si su médico decide no se encuentra participando por más tiempo en la MPN.

Si su empleador decide que usted no califica para continuar su cuidado con un proveedor que no pertenece a la MPN, usted y su médico tratante primario deberán recibir una carta notificándoles de esta decisión.

Si cumple con ciertas condiciones, usted puede calificar para continuar siendo tratado con este médico por hasta un (1) año antes de que deba escoger un médico de la MPN. Estas condiciones se establecen en la sección, **¿Puedo seguir siendo tratado por mi médico?**

Usted puede no estar de acuerdo con la decisión de su empleador de denegar la Continuidad de sus Cuidados con el proveedor terminado de la MPN. Si desea continuar tratando con el médico terminado, pídale a su médico de cabecera un informe médico sobre si usted tiene una de las cuatro condiciones indicadas en la sección anterior para ver si califica para continuar tratando temporalmente con su médico actual.

Su médico tratante primario tiene veinte (20) días a partir de la fecha de su solicitud para entregarle una copia del reporte médico de su condición. Si su médico tratante primario no le entrega el reporte dentro de veinte (20) días a partir de la solicitud, aplicará la decisión de su empleador de denegar la Continuidad de sus Cuidados con su médico que no se encuentra participando por más tiempo en la MPN, y a usted se le requerirá escoger un médico de la MPN.

Necesitará entregarle una copia del reporte a su empleador si desea posponer la selección de un médico de la MPN para el tratamiento. Si usted o su empleador no están de acuerdo con el reporte de su condición de su médico, usted o su empleador pueden disputarlo. Vea la póliza completa de Continuidad de los Cuidados para más detalles del proceso de resolución de disputas.

Para una copia de la póliza de Continuidad de los Cuidados, en inglés o español, solicítela a su Contacto de la MPN.

- **¿Qué sucede si tengo preguntas o necesito ayuda?**

- **Contacto de la MPN:** Siempre puede comunicarse con el Contacto de la MPN, si tiene preguntas sobre el uso de la MPN y para dirigir cualquier queja relacionada con la MPN.
- **Asistentes de Acceso Médico:** Puede comunicarse con el Asistente de Acceso Médico si necesita ayuda para encontrar médicos en la MPN, programar y confirmar citas.
- **División de Compensación de Trabajadores (DWC):** Si tiene alguna duda, queja, o pregunta relacionada con la MPN, el proceso de notificación, o su tratamiento médico después de una lesión enfermedad relacionada con el trabajo, puede llamar a la oficina de Información y Asistencia de DWC al 1-800-736-7401. También, puede ir al sitio web de DWC en www.dir.ca.gov/dwc y hacer clic en “redes de proveedores médicos” para más información sobre las Redes de Proveedores Médicos (MPN).
- **Revisión Médica Independiente de la MPN:** Si tiene preguntas sobre el proceso de la Revisión Médica Independiente de la MPN, comuníquese con la Unidad Médica de la División de Compensación de Trabajadores en:
DWC Medical Unit
P.O. Box 71010
Oakland, CA 94612
(510) 286-3700 o (800) 794-6900

**Mantenga esta información en caso de que tenga una lesión
o enfermedad relacionada con el trabajo.**



Program: Arissa/Harbor MPN
Address: 1505 S Sunflower Ave, Glendora, CA 91740, USA
Distance: 15 Miles
Providers Listed: 4 providers
Directory Last Updated: 06/01/2018

San Dimas Community Hospital 1350 W Covina Blvd San Dimas, CA 91773 Phone: 909-599-6811 <i>Hospital</i> 1.2 Miles	Provider Facts	Languages Spoken	Practice Hours
U.S. Healthworks Medical Group, P.C. 801 Corporate Center Dr Ste 130 Pomona, CA 91768 Phone: 909-623-1954 Fax: 909-623-4988 <i>Urgent Care</i> 4.1 Miles	Provider Facts	Languages Spoken	Practice Hours
Irwindale Industrial Clinic 6000 N Irwindale Ave Ste A Irwindale, CA 91702 Phone: 626-969-9800 <i>Urgent Care</i> 5 Miles	Provider Facts	Languages Spoken	Practice Hours
U.S. Healthworks Medical Group, P.C. 6520 N Irwindale Ave Ste 100 Irwindale, CA 91702 Phone: 626-812-0366 Fax: 626-812-0943 <i>Urgent Care</i> 5.1 Miles	Provider Facts	Languages Spoken	Practice Hours

For more information regarding the Medical Provider Network (MPN), or to report provider listing inaccuracies, please contact the Medical Access Assistant (MAA) at the toll free number 855-339-6047 or by e-mail at MPNMAA@harborsys.com

(T) = Telehealth Provider



Program: Arissa/Harbor MPN
Address: 240 N Cerritos Ave, Azusa, CA 91702, USA
Distance: 15 Miles
Providers Listed: 4 providers
Directory Last Updated: 06/01/2018

FOOTHILL PRESBYTERIAN HOSPITAL 250 S Grand Ave Glendora, CA 91741 Phone: 626-963-8411 <i>Hospital</i> 1.6 Miles	Provider Facts	Languages Spoken	Practice Hours
Irwindale Industrial Clinic 6000 N Irwindale Ave Ste A Irwindale, CA 91702 Phone: 626-969-9800 <i>Urgent Care</i> 2 Miles	Provider Facts	Languages Spoken	Practice Hours
U.S. Healthworks Medical Group, P.C. 6520 N Irwindale Ave Ste 100 Irwindale, CA 91702 Phone: 626-812-0366 Fax: 626-812-0943 <i>Urgent Care</i> 2 Miles	Provider Facts	Languages Spoken	Practice Hours
Citrus Valley Medical Ctr, Intercommunity Campus 210 W San Bernardino Rd Covina, CA 91723 Phone: 626-331-7331 <i>Hospital</i> 2.5 Miles	Provider Facts	Languages Spoken	Practice Hours

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(T) = Telehealth Provider



Program: Arissa/Harbor MPN
Address: 3900 Puente Ave, Baldwin Park, CA 91706, USA
Distance: 15 Miles
Providers Listed: 5 providers
Directory Last Updated: 06/01/2018

DOCTORS HOSPITAL OF WEST COVINA 725 S Orange Ave West Covina, CA 91790 Phone: 626-338-8481 <i>Hospital</i> 1 Miles	Provider Facts	Languages Spoken	Practice Hours
Kaiser Foundation Hospital 1011 Baldwin Park Blvd Baldwin Park, CA 91706 Phone: 562-463-4357 <i>Hospital</i> 2.5 Miles	Provider Facts	Languages Spoken	Practice Hours
Kaiser Permanente Urgent Care Facility 1011 Baldwin Park Blvd Baldwin Park, CA 91706 Phone: 562-463-4357 Fax: 562-463-4343 <i>Urgent Care</i> 2.5 Miles	Provider Facts	Languages Spoken	Practice Hours
Irwindale Industrial Clinic 6000 N Irwindale Ave Ste A Irwindale, CA 91702 Phone: 626-969-9800 <i>Urgent Care</i> 2.8 Miles	Provider Facts	Languages Spoken	Practice Hours



Program: Arissa/Harbor MPN
Address: 3900 Puente Ave, Baldwin Park, CA 91706, USA
Distance: 15 Miles
Providers Listed: 5 providers
Directory Last Updated: 06/01/2018

U.S. Healthworks Medical Group, P.C.	Provider Facts	Languages Spoken	Practice Hours
6520 N Irwindale Ave Ste 100 Irwindale, CA 91702 Phone: 626-812-0366 Fax: 626-812-0943 <i>Urgent Care</i> 3.3 Miles			

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(T) = Telehealth Provider



Program: Arissa/Harbor MPN
Address: 1430 E Covina Blvd, Covina, CA 91724, USA
Distance: 15 Miles
Providers Listed: 4 providers
Directory Last Updated: 06/01/2018

San Dimas Community Hospital 1350 W Covina Blvd San Dimas, CA 91773 Phone: 909-599-6811 <i>Hospital</i> 1.5 Miles	Provider Facts	Languages Spoken	Practice Hours
U.S. Healthworks Medical Group, P.C. 801 Corporate Center Dr Ste 130 Pomona, CA 91768 Phone: 909-623-1954 Fax: 909-623-4988 <i>Urgent Care</i> 4 Miles	Provider Facts	Languages Spoken	Practice Hours
Irwindale Industrial Clinic 6000 N Irwindale Ave Ste A Irwindale, CA 91702 Phone: 626-969-9800 <i>Urgent Care</i> 4.5 Miles	Provider Facts	Languages Spoken	Practice Hours
U.S. Healthworks Medical Group, P.C. 6520 N Irwindale Ave Ste 100 Irwindale, CA 91702 Phone: 626-812-0366 Fax: 626-812-0943 <i>Urgent Care</i> 4.8 Miles	Provider Facts	Languages Spoken	Practice Hours

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(T) = Telehealth Provider



Program: Arissa/Harbor MPN
Address: 1500 Francisquito Ave, La Puente, CA 91744, USA
Distance: 15 Miles
Providers Listed: 4 providers
Directory Last Updated: 06/01/2018

Citrus Valley Medical Center- Queen of the Valley Campus 1115 S Sunset Ave West Covina, CA 91790 Phone: 626-962-4011 <i>Hospital</i> 1.5 Miles	Provider Facts	Languages Spoken	Practice Hours
U.S. Healthworks Medical Group, P.C. 17487 Hurley St City Of Industry, CA 91744 Phone: 626-965-0959 Fax: 626-912-1696 <i>Urgent Care</i> 2.8 Miles	Provider Facts	Languages Spoken	Practice Hours
Universal Industrial Care 16025 Gale Ave Ste B-10 City Of Industry, CA 91715 Phone: 626-336-6652 <i>Urgent Care</i> 3.7 Miles	Provider Facts	Languages Spoken	Practice Hours
Central Occupational Medicine Providers 18575 Gale Ave Ste 155 City Of Industry, CA 91748 Phone: 626-581-8960 Fax: 626-581-8536 <i>Urgent Care</i> 4.1 Miles	Provider Facts	Languages Spoken	Practice Hours

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(T) = Telehealth Provider



Program: Arissa/Harbor MPN
Address: 463 S Hollenbeck Ave, Covina, CA 91723, USA
Distance: 15 Miles
Providers Listed: 4 providers
Directory Last Updated: 06/01/2018

DOCTORS HOSPITAL OF WEST COVINA 725 S Orange Ave West Covina, CA 91790 Phone: 626-338-8481 <i>Hospital</i> 2.6 Miles	Provider Facts	Languages Spoken	Practice Hours
Irwindale Industrial Clinic 6000 N Irwindale Ave Ste A Irwindale, CA 91702 Phone: 626-969-9800 <i>Urgent Care</i> 3.4 Miles	Provider Facts	Languages Spoken	Practice Hours
U.S. Healthworks Medical Group, P.C. 6520 N Irwindale Ave Ste 100 Irwindale, CA 91702 Phone: 626-812-0366 Fax: 626-812-0943 <i>Urgent Care</i> 3.9 Miles	Provider Facts	Languages Spoken	Practice Hours
U.S. Healthworks Medical Group, P.C. 17487 Hurley St City Of Industry, CA 91744 Phone: 626-965-0959 Fax: 626-912-1696 <i>Urgent Care</i> 5.1 Miles	Provider Facts	Languages Spoken	Practice Hours

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(T) = Telehealth Provider



Program: Arissa/Harbor MPN
Address: 1501 W Del Norte St, West Covina, CA 91790, USA
Distance: 15 Miles
Providers Listed: 4 providers
Directory Last Updated: 06/01/2018

DOCTORS HOSPITAL OF WEST COVINA 725 S Orange Ave West Covina, CA 91790 Phone: 626-338-8481 <i>Hospital</i> 0.6 Miles	Provider Facts	Languages Spoken	Practice Hours
Kaiser Permanente Emergency Care Facility 1011 Baldwin Park Blvd Baldwin Park, CA 91706 Phone: 562-463-4357 Fax: 562-463-4343 <i>Emergency Medicine</i> <i>Urgent Care</i> 2.9 Miles	Provider Facts	Languages Spoken	Practice Hours
Kaiser Permanente Urgent Care Facility 1011 Baldwin Park Blvd Baldwin Park, CA 91706 Phone: 562-463-4357 Fax: 562-463-4343 <i>Urgent Care</i> 2.9 Miles	Provider Facts	Languages Spoken	Practice Hours
Irwindale Industrial Clinic 6000 N Irwindale Ave Ste A Irwindale, CA 91702 Phone: 626-969-9800 <i>Urgent Care</i> 3.2 Miles	Provider Facts	Languages Spoken	Practice Hours

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(T) = Telehealth Provider



Program: Arissa/Harbor MPN
Address: 21400 Pathfinder Rd, Diamond Bar, CA 91765, USA
Distance: 15 Miles
Providers Listed: 4 providers
Directory Last Updated: 06/01/2018

Central Occupational Medicine Providers 18575 Gale Ave Ste 155 City Of Industry, CA 91748 Phone: 626-581-8960 Fax: 626-581-8536 <i>Urgent Care</i> 3.5 Miles	Provider Facts	Languages Spoken	Practice Hours
KINDRED HOSPITAL BREA 875 N Brea Blvd Brea, CA 92821 Phone: 714-529-6842 <i>Hospital</i> 4.5 Miles	Provider Facts	Languages Spoken	Practice Hours
MEDPOST URGENT CARE - BREA 2415 E Imperial Hwy Brea, CA 92821 Phone: 714-255-1640 <i>Urgent Care</i> 5.1 Miles	Provider Facts	Languages Spoken	Practice Hours
U.S. Healthworks Medical Group, P.C. 17487 Hurley St City Of Industry, CA 91744 Phone: 626-965-0959 Fax: 626-912-1696 <i>Urgent Care</i> 5.1 Miles	Provider Facts	Languages Spoken	Practice Hours

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(T) = Telehealth Provider



Program: Arissa/Harbor MPN
Address: 1625 W Durness St, West Covina, CA 91790, USA
Distance: 15 Miles
Providers Listed: 4 providers
Directory Last Updated: 06/01/2018

Citrus Valley Medical Center- Queen of the Valley Campus 1115 S Sunset Ave West Covina, CA 91790 Phone: 626-962-4011 <i>Hospital</i> 0.3 Miles	Provider Facts	Languages Spoken	Practice Hours
Universal Industrial Care 16025 Gale Ave Ste B-10 City Of Industry, CA 91715 Phone: 626-336-6652 <i>Urgent Care</i> 3.6 Miles	Provider Facts	Languages Spoken	Practice Hours
U.S. Healthworks Medical Group, P.C. 17487 Hurley St City Of Industry, CA 91744 Phone: 626-965-0959 Fax: 626-912-1696 <i>Urgent Care</i> 4 Miles	Provider Facts	Languages Spoken	Practice Hours
Irwindale Industrial Clinic 6000 N Irwindale Ave Ste A Irwindale, CA 91702 Phone: 626-969-9800 <i>Urgent Care</i> 4.3 Miles	Provider Facts	Languages Spoken	Practice Hours

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(T) = Telehealth Provider



Program: Arissa/Harbor MPN
Address: 1625 W Durness St, West Covina, CA 91790, USA
Distance: 15 Miles
Providers Listed: 4 providers
Directory Last Updated: 06/01/2018

Citrus Valley Medical Center- Queen of the Valley Campus 1115 S Sunset Ave West Covina, CA 91790 Phone: 626-962-4011 <i>Hospital</i> 0.3 Miles	Provider Facts	Languages Spoken	Practice Hours
Universal Industrial Care 16025 Gale Ave Ste B-10 City Of Industry, CA 91715 Phone: 626-336-6652 <i>Urgent Care</i> 3.6 Miles	Provider Facts	Languages Spoken	Practice Hours
U.S. Healthworks Medical Group, P.C. 17487 Hurley St City Of Industry, CA 91744 Phone: 626-965-0959 Fax: 626-912-1696 <i>Urgent Care</i> 4 Miles	Provider Facts	Languages Spoken	Practice Hours
Irwindale Industrial Clinic 6000 N Irwindale Ave Ste A Irwindale, CA 91702 Phone: 626-969-9800 <i>Urgent Care</i> 4.3 Miles	Provider Facts	Languages Spoken	Practice Hours

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Program: Arissa/Harbor MPN
Address: 758 W Grondahl St, Covina, CA 91722, USA
Distance: 15 Miles
Providers Listed: 4 providers
Directory Last Updated: 06/01/2018

Citrus Valley Medical Ctr, Intercommunity Campus 210 W San Bernardino Rd Covina, CA 91723 Phone: 626-331-7331 <i>Hospital</i> 1.1 Miles	Provider Facts	Languages Spoken	Practice Hours
Irwindale Industrial Clinic 6000 N Irwindale Ave Ste A Irwindale, CA 91702 Phone: 626-969-9800 <i>Urgent Care</i> 2.2 Miles	Provider Facts	Languages Spoken	Practice Hours
U.S. Healthworks Medical Group, P.C. 6520 N Irwindale Ave Ste 100 Irwindale, CA 91702 Phone: 626-812-0366 Fax: 626-812-0943 <i>Urgent Care</i> 2.6 Miles	Provider Facts	Languages Spoken	Practice Hours
U.S. Healthworks Medical Group, P.C. 17487 Hurley St City Of Industry, CA 91744 Phone: 626-965-0959 Fax: 626-912-1696 <i>Urgent Care</i> 6.4 Miles	Provider Facts	Languages Spoken	Practice Hours

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(T) = Telehealth Provider



Program: Arissa/Harbor MPN
Address: 1340 N Enid Ave, Covina, CA 91722, USA
Distance: 15 Miles
Providers Listed: 4 providers
Directory Last Updated: 06/01/2018

Citrus Valley Medical Ctr, Intercommunity Campus 210 W San Bernardino Rd Covina, CA 91723 Phone: 626-331-7331 <i>Hospital</i> 1.6 Miles	Provider Facts	Languages Spoken	Practice Hours
Irwindale Industrial Clinic 6000 N Irwindale Ave Ste A Irwindale, CA 91702 Phone: 626-969-9800 <i>Urgent Care</i> 1.7 Miles	Provider Facts	Languages Spoken	Practice Hours
U.S. Healthworks Medical Group, P.C. 6520 N Irwindale Ave Ste 100 Irwindale, CA 91702 Phone: 626-812-0366 Fax: 626-812-0943 <i>Urgent Care</i> 2.1 Miles	Provider Facts	Languages Spoken	Practice Hours
Regal Medical Group 117 E Live Oak Ave Ste 101 Arcadia, CA 91006 Phone: 626-446-8492 <i>Urgent Care</i> 6.5 Miles	Provider Facts	Languages Spoken	Practice Hours

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(T) = Telehealth Provider



Program: Arissa/Harbor MPN
Address: 1600 E Foothill Blvd, Glendora, CA 91741, USA
Distance: 15 Miles
Providers Listed: 4 providers
Directory Last Updated: 06/01/2018

<p>FOOTHILL PRESBYTERIAN HOSPITAL 250 S Grand Ave Glendora, CA 91741 Phone: 626-963-8411 <i>Hospital</i></p> <p>2 Miles</p>	Provider Facts	Languages Spoken	Practice Hours
<p>U.S. Healthworks Medical Group, P.C. 801 Corporate Center Dr Ste 130 Pomona, CA 91768 Phone: 909-623-1954 Fax: 909-623-4988 <i>Urgent Care</i></p> <p>5.2 Miles</p>	Provider Facts	Languages Spoken	Practice Hours
<p>Irwindale Industrial Clinic 6000 N Irwindale Ave Ste A Irwindale, CA 91702 Phone: 626-969-9800 <i>Urgent Care</i></p> <p>5.6 Miles</p>	Provider Facts	Languages Spoken	Practice Hours
<p>U.S. Healthworks Medical Group, P.C. 6520 N Irwindale Ave Ste 100 Irwindale, CA 91702 Phone: 626-812-0366 Fax: 626-812-0943 <i>Urgent Care</i></p> <p>5.6 Miles</p>	Provider Facts	Languages Spoken	Practice Hours

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(T) = Telehealth Provider



Program: Arissa/Harbor MPN
Address: 4600 Bogart Ave, Baldwin Park, CA 91706, USA
Distance: 15 Miles
Providers Listed: 4 providers
Directory Last Updated: 06/01/2018

DOCTORS HOSPITAL OF WEST COVINA 725 S Orange Ave West Covina, CA 91790 Phone: 626-338-8481 <i>Hospital</i> 1.8 Miles	Provider Facts	Languages Spoken	Practice Hours
Irwindale Industrial Clinic 6000 N Irwindale Ave Ste A Irwindale, CA 91702 Phone: 626-969-9800 <i>Urgent Care</i> 2.3 Miles	Provider Facts	Languages Spoken	Practice Hours
Kaiser Permanente Emergency Care Facility 1011 Baldwin Park Blvd Baldwin Park, CA 91706 Phone: 562-463-4357 Fax: 562-463-4343 <i>Emergency Medicine</i> <i>Urgent Care</i> 2.7 Miles	Provider Facts	Languages Spoken	Practice Hours
U.S. Healthworks Medical Group, P.C. 6520 N Irwindale Ave Ste 100 Irwindale, CA 91702 Phone: 626-812-0366 Fax: 626-812-0943 <i>Urgent Care</i> 2.8 Miles	Provider Facts	Languages Spoken	Practice Hours

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(T) = Telehealth Provider



Program: Arissa/Harbor MPN
Address: 1016 Cypress St, Covina, CA 91722, USA
Distance: 15 Miles
Providers Listed: 4 providers
Directory Last Updated: 06/01/2018

Citrus Valley Medical Ctr, Intercommunity Campus 210 W San Bernardino Rd Covina, CA 91723 Phone: 626-331-7331 <i>Hospital</i> 1 Miles	Provider Facts	Languages Spoken	Practice Hours
Irwindale Industrial Clinic 6000 N Irwindale Ave Ste A Irwindale, CA 91702 Phone: 626-969-9800 <i>Urgent Care</i> 2.3 Miles	Provider Facts	Languages Spoken	Practice Hours
U.S. Healthworks Medical Group, P.C. 6520 N Irwindale Ave Ste 100 Irwindale, CA 91702 Phone: 626-812-0366 Fax: 626-812-0943 <i>Urgent Care</i> 2.8 Miles	Provider Facts	Languages Spoken	Practice Hours
Kaiser Permanente Emergency Care Facility 1011 Baldwin Park Blvd Baldwin Park, CA 91706 Phone: 562-463-4357 Fax: 562-463-4343 <i>Emergency Medicine</i> <i>Urgent Care</i> 4.8 Miles	Provider Facts	Languages Spoken	Practice Hours

For more information regarding the Medical Provider Network (MPN), or to report provider listing inaccuracies, please contact the Medical Access Assistant (MAA) at the toll free number 855-339-6047 or by e-mail at MPNMAA@harborsys.com

(T) = Telehealth Provider



Program: Arissa/Harbor MPN
Address: 1134 S Barranca Ave, Glendora, CA 91740, USA
Distance: 15 Miles
Providers Listed: 4 providers
Directory Last Updated: 06/01/2018

FOOTHILL PRESBYTERIAN HOSPITAL 250 S Grand Ave Glendora, CA 91741 Phone: 626-963-8411 <i>Hospital</i> 1.1 Miles	Provider Facts	Languages Spoken	Practice Hours
U.S. Healthworks Medical Group, P.C. 801 Corporate Center Dr Ste 130 Pomona, CA 91768 Phone: 909-623-1954 Fax: 909-623-4988 <i>Urgent Care</i> 5.9 Miles	Provider Facts	Languages Spoken	Practice Hours
Kaiser Permanente Emergency Care Facility 1011 Baldwin Park Blvd Baldwin Park, CA 91706 Phone: 562-463-4357 Fax: 562-463-4343 <i>Emergency Medicine</i> <i>Urgent Care</i> 7 Miles	Provider Facts	Languages Spoken	Practice Hours



Program: Arissa/Harbor MPN
Address: 1134 S Barranca Ave, Glendora, CA 91740, USA
Distance: 15 Miles
Providers Listed: 4 providers
Directory Last Updated: 06/01/2018

U.S. Healthworks Medical Group, P.C.	Provider Facts	Languages Spoken	Practice Hours
17487 Hurley St City Of Industry, CA 91744 Phone: 626-965-0959 Fax: 626-912-1696 <i>Urgent Care</i>			
7.8 Miles			

For more information regarding the Medical Provider Network (MPN), or to report provider listing inaccuracies, please contact the Medical Access Assistant (MAA) at the toll free number 855-339-6047 or by e-mail at MPNMAA@harborsys.com

(T) = Telehealth Provider



Program: Arissa/Harbor MPN
Address: 3600 Frazier St, Baldwin Park, CA 91706, USA
Distance: 15 Miles
Providers Listed: 4 providers
Directory Last Updated: 06/01/2018

Kaiser Foundation Hospital 1011 Baldwin Park Blvd Baldwin Park, CA 91706 Phone: 562-463-4357 <i>Hospital</i> 0.8 Miles	Provider Facts	Languages Spoken	Practice Hours
Regal Medical Group 117 E Live Oak Ave Ste 101 Arcadia, CA 91006 Phone: 626-446-8492 <i>Urgent Care</i> 3.5 Miles	Provider Facts	Languages Spoken	Practice Hours
Kaiser On-The-Job Occupational Health Center 12801 Crossroads Pkwy S Ste 150 City Of Industry, CA 91746 Phone: 562-463-4357 Fax: 562-463-4343 <i>Urgent Care</i> 4.1 Miles	Provider Facts	Languages Spoken	Practice Hours
Irwindale Industrial Clinic 6000 N Irwindale Ave Ste A Irwindale, CA 91702 Phone: 626-969-9800 <i>Urgent Care</i> 4.2 Miles	Provider Facts	Languages Spoken	Practice Hours

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(T) = Telehealth Provider



Program: Arissa/Harbor MPN
Address: 645 Barranca St, West Covina, CA 91791, USA
Distance: 15 Miles
Providers Listed: 4 providers
Directory Last Updated: 06/01/2018

<p>Citrus Valley Medical Ctr, Intercommunity Campus 210 W San Bernardino Rd Covina, CA 91723 Phone: 626-331-7331 <i>Hospital</i></p> <p>1.9 Miles</p>	<p>Provider Facts</p>	<p>Languages Spoken</p>	<p>Practice Hours</p>
<p>U.S. Healthworks Medical Group, P.C. 17487 Hurley St City Of Industry, CA 91744 Phone: 626-965-0959 Fax: 626-912-1696 <i>Urgent Care</i></p> <p>4.3 Miles</p>	<p>Provider Facts</p>	<p>Languages Spoken</p>	<p>Practice Hours</p>
<p>U.S. Healthworks Medical Group, P.C. 801 Corporate Center Dr Ste 130 Pomona, CA 91768 Phone: 909-623-1954 Fax: 909-623-4988 <i>Urgent Care</i></p> <p>4.6 Miles</p>	<p>Provider Facts</p>	<p>Languages Spoken</p>	<p>Practice Hours</p>
<p>Central Occupational Medicine Providers 18575 Gale Ave Ste 155 City Of Industry, CA 91748 Phone: 626-581-8960 Fax: 626-581-8536 <i>Urgent Care</i></p> <p>4.8 Miles</p>	<p>Provider Facts</p>	<p>Languages Spoken</p>	<p>Practice Hours</p>



Program: Arissa/Harbor MPN
Address: 645 Barranca St, West Covina, CA 91791, USA
Distance: 15 Miles
Providers Listed: 4 providers
Directory Last Updated: 06/01/2018

For more information regarding the Medical Provider Network (MPN), or to report provider listing inaccuracies, please contact the Medical Access Assistant (MAA) at the toll free number 855-339-6047 or by e-mail at MPNMAA@harborsys.com

(T) = Telehealth Provider



Program: Arissa/Harbor MPN
Address: 400 Pierre Rd, Walnut, CA 91789, USA
Distance: 15 Miles
Providers Listed: 4 providers
Directory Last Updated: 06/01/2018

Central Occupational Medicine Providers 18575 Gale Ave Ste 155 City Of Industry, CA 91748 Phone: 626-581-8960 Fax: 626-581-8536 <i>Urgent Care</i> 3.2 Miles	Provider Facts	Languages Spoken	Practice Hours
U.S. Healthworks Medical Group, P.C. 801 Corporate Center Dr Ste 130 Pomona, CA 91768 Phone: 909-623-1954 Fax: 909-623-4988 <i>Urgent Care</i> 4.1 Miles	Provider Facts	Languages Spoken	Practice Hours
U.S. Healthworks Medical Group, P.C. 17487 Hurley St City Of Industry, CA 91744 Phone: 626-965-0959 Fax: 626-912-1696 <i>Urgent Care</i> 4.1 Miles	Provider Facts	Languages Spoken	Practice Hours
Citrus Valley Medical Ctr, Intercommunity Campus 210 W San Bernardino Rd Covina, CA 91723 Phone: 626-331-7331 <i>Hospital</i> 5.3 Miles	Provider Facts	Languages Spoken	Practice Hours



Program: Arissa/Harbor MPN
Address: 400 Pierre Rd, Walnut, CA 91789, USA
Distance: 15 Miles
Providers Listed: 4 providers
Directory Last Updated: 06/01/2018

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(T) = Telehealth Provider



Program: Arissa/Harbor MPN
Address: 1609 E Cameron Ave, West Covina, CA 91791, USA
Distance: 15 Miles
Providers Listed: 4 providers
Directory Last Updated: 06/01/2018

Citrus Valley Medical Center- Queen of the Valley Campus 1115 S Sunset Ave West Covina, CA 91790 Phone: 626-962-4011 <i>Hospital</i> 1.8 Miles	Provider Facts	Languages Spoken	Practice Hours
U.S. Healthworks Medical Group, P.C. 17487 Hurley St City Of Industry, CA 91744 Phone: 626-965-0959 Fax: 626-912-1696 <i>Urgent Care</i> 3.7 Miles	Provider Facts	Languages Spoken	Practice Hours
Kaiser Permanente Emergency Care Facility 1011 Baldwin Park Blvd Baldwin Park, CA 91706 Phone: 562-463-4357 Fax: 562-463-4343 <i>Emergency Medicine</i> <i>Urgent Care</i> 4.1 Miles	Provider Facts	Languages Spoken	Practice Hours
Irwindale Industrial Clinic 6000 N Irwindale Ave Ste A Irwindale, CA 91702 Phone: 626-969-9800 <i>Urgent Care</i> 4.3 Miles	Provider Facts	Languages Spoken	Practice Hours

For more information regarding the Medical Provider Network (MPN), or to report provider listing inaccuracies, please contact the Medical Access Assistant (MAA) at the toll free number 855-339-6047 or by e-mail at MPNMAA@harborsys.com

(T) = Telehealth Provider



Program: Arissa/Harbor MPN
Address: 350 W Mauna Loa Ave, Glendora, CA 91740, USA
Distance: 15 Miles
Providers Listed: 4 providers
Directory Last Updated: 06/01/2018

<p>FOOTHILL PRESBYTERIAN HOSPITAL 250 S Grand Ave Glendora, CA 91741 Phone: 626-963-8411 <i>Hospital</i></p> <p>0.6 Miles</p>	Provider Facts	Languages Spoken	Practice Hours
<p>Irwindale Industrial Clinic 6000 N Irwindale Ave Ste A Irwindale, CA 91702 Phone: 626-969-9800 <i>Urgent Care</i></p> <p>3.7 Miles</p>	Provider Facts	Languages Spoken	Practice Hours
<p>U.S. Healthworks Medical Group, P.C. 6520 N Irwindale Ave Ste 100 Irwindale, CA 91702 Phone: 626-812-0366 Fax: 626-812-0943 <i>Urgent Care</i></p> <p>3.7 Miles</p>	Provider Facts	Languages Spoken	Practice Hours
<p>U.S. Healthworks Medical Group, P.C. 801 Corporate Center Dr Ste 130 Pomona, CA 91768 Phone: 909-623-1954 Fax: 909-623-4988 <i>Urgent Care</i></p> <p>5.7 Miles</p>	Provider Facts	Languages Spoken	Practice Hours

For more information regarding the Medical Provider Network (MPN), or to report provider listing inaccuracies, please contact the Medical Access Assistant (MAA) at the toll free number 855-339-6047 or by e-mail at MPNMAA@harborsys.com

(T) = Telehealth Provider



Program: Arissa/Harbor MPN
Address: 649 E Albertoni St, Carson, CA 90746, USA
Distance: 15 Miles
Providers Listed: 4 providers
Directory Last Updated: 06/01/2018

U.S. Healthworks Medical Group, P.C. 16630 S Broadway Gardena, CA 90248 Phone: 310-768-8155 Fax: 310-768-8313 <i>Urgent Care</i> 0.9 Miles	Provider Facts	Languages Spoken	Practice Hours
Kaiser On-The-Job Occupational Health Center 18600 S Figueroa St Ste 120 Gardena, CA 90248 Phone: 310-527-5600 Fax: 310-527-5632 <i>Urgent Care</i> 1.3 Miles	Provider Facts	Languages Spoken	Practice Hours
SUPERIOR CARE MEDICAL CENTER 15401 S Main St Gardena, CA 90248 Phone: 310-225-3640 <i>Urgent Care</i> 1.5 Miles	Provider Facts	Languages Spoken	Practice Hours
ST FRANCIS MEDICAL CENTER 3630 E Imperial Hwy Lynwood, CA 90262 Phone: 310-900-8900 <i>Hospital</i> 5.4 Miles	Provider Facts	Languages Spoken	Practice Hours

For more information regarding the Medical Provider Network (MPN), or to report provider listing inaccuracies, please contact the Medical Access Assistant (MAA) at the toll free number 855-339-6047 or by e-mail at MPNMAA@harborsys.com

(T) = Telehealth Provider



Program: Arissa/Harbor MPN
Address: 2615 S Grand Ave, Los Angeles, CA 90007, USA
Distance: 15 Miles
Providers Listed: 4 providers
Directory Last Updated: 06/01/2018

California Hospital Medical Center 1401 S Grand Ave Los Angeles, CA 90015 Phone: 213-748-2411 <i>Hospital</i> 0.9 Miles	Provider Facts	Languages Spoken	Practice Hours
U.S. Healthworks Medical Group, P.C. 1400 S Grand Ave Ste 611 Los Angeles, CA 90015 Phone: 213-745-6106 Fax: 213-745-6107 <i>Urgent Care</i> 0.9 Miles	Provider Facts	Languages Spoken	Practice Hours
Reliant Immediate Care 814 Francisco St Los Angeles, CA 90017 Phone: 310-491-7070 Fax: 310-491-7071 <i>Urgent Care</i> 1.6 Miles	Provider Facts	Languages Spoken	Practice Hours
U.S. Healthworks Medical Group, P.C. 1313 W 8th St Ste 100 Los Angeles, CA 90017 Phone: 213-401-1970 Fax: 213-401-1980 <i>Urgent Care</i> 1.7 Miles	Provider Facts	Languages Spoken	Practice Hours

For more information regarding the Medical Provider Network (MPN), or to report provider listing inaccuracies, please contact the Medical Access Assistant (MAA) at the toll free number 855-339-6047 or by e-mail at MPNMAA@harborsys.com

(T) = Telehealth Provider



Program: Arissa/Harbor MPN
Address: 1625 W Olympic Blvd, Los Angeles, CA 90015, USA
Distance: 15 Miles
Providers Listed: 4 providers
Directory Last Updated: 06/01/2018

U.S. Healthworks Medical Group, P.C. 1313 W 8th St Ste 100 Los Angeles, CA 90017 Phone: 213-401-1970 Fax: 213-401-1980 <i>Urgent Care</i> 0.3 Miles	Provider Facts	Languages Spoken	Practice Hours
Good Samaritan Hospital (La) 1225 Wilshire Blvd Los Angeles, CA 90017 Phone: 213-977-2121 <i>Hospital</i> 0.6 Miles	Provider Facts	Languages Spoken	Practice Hours
Reliant Immediate Care 814 Francisco St Los Angeles, CA 90017 Phone: 310-491-7070 Fax: 310-491-7071 <i>Urgent Care</i> 0.7 Miles	Provider Facts	Languages Spoken	Practice Hours
Proactive Work Health Services 1230 W 3rd St Los Angeles, CA 90017 Phone: 213-977-9300 <i>Urgent Care</i> 1 Miles	Provider Facts	Languages Spoken	Practice Hours

For more information regarding the Medical Provider Network (MPN), or to report provider listing inaccuracies, please contact the Medical Access Assistant (MAA) at the toll free number 855-339-6047 or by e-mail at MPNMAA@harborsys.com

(T) = Telehealth Provider



Notice to Employees--Injuries Caused By Work

You may be entitled to workers' compensation benefits if you are injured or become ill because of your job. Workers' compensation covers most work-related physical or mental injuries and illnesses. An injury or illness can be caused by one event (such as hurting your back in a fall) or by repeated exposures (such as hurting your wrist from doing the same motion over and over).

Benefits. Workers' compensation benefits include:

- **Medical Care:** Doctor visits, hospital services, physical therapy, lab tests, x-rays, medicines, medical equipment and travel costs that are reasonably necessary to treat your injury. You should never see a bill. There are limits on chiropractic, physical therapy and occupational therapy visits.
- **Temporary Disability (TD) Benefits:** Payments if you lose wages while recovering. For most injuries, TD benefits may not be paid for more than 104 weeks within five years from the date of injury.
- **Permanent Disability (PD) Benefits:** Payments if you do not recover completely and your injury causes a permanent loss of physical or mental function that a doctor can measure.
- **Supplemental Job Displacement Benefit:** A nontransferable voucher, if you are injured on or after 1/1/2004, your injury causes permanent disability, and your employer does not offer you regular, modified, or alternative work.
- **Death Benefits:** Paid to your dependents if you die from a work-related injury or illness.

Naming Your Own Physician Before Injury or Illness (Predesignation). You may be able to choose the doctor who will treat you for a job injury or illness. If eligible, you must tell your employer, in writing, the name and address of your personal physician or medical group *before* you are injured. You must obtain their agreement to treat you for your work injury. For instructions, see the written information about workers' compensation that your employer is required to give to new employees.

If You Get Hurt:

1. **Get Medical Care.** If you need emergency care, call 911 for help immediately from the hospital, ambulance, fire department or police department. If you need first aid, contact your employer.
2. **Report Your Injury.** Report the injury immediately to your supervisor or to an employer representative. Don't delay. There are time limits. If you wait too long, you may lose your right to benefits. Your employer is required to provide you with a claim form within one working day after learning about your injury. Within one working day after you file a claim form, your employer or claims administrator must authorize the provision of all treatment, up to ten thousand dollars, consistent with the applicable treatment guidelines, for your alleged injury until the claim is accepted or rejected.
3. **See Your Primary Treating Physician (PTP).** This is the doctor with overall responsibility for treating your injury or illness.
 - If you predesignated your personal physician or a medical group, you may see your personal physician or the medical group after you are injured.
 - If your employer is using a medical provider network (MPN) or a health care organization (HCO), in most cases you will be treated within the MPN or HCO unless you predesignated a personal physician or medical group. An MPN is a group of physicians and health care providers who provide treatment to workers injured on the job. You should receive information from your employer if you are covered by an HCO or a MPN. Contact your employer for more information.
 - If your employer is not using an MPN or HCO, in most cases the claims administrator can choose the doctor who first treats you when you are injured, unless you predesignated a personal physician or medical group.
4. **Medical Provider Networks.** Your employer may be using an MPN, which is a group of health care providers designated to provide treatment to workers injured on the job. If you have predesignated a personal physician or medical group prior to your work injury, then you may go there to receive treatment from your predesignated doctor. If you are treating with a non-MPN doctor for an existing injury, you may be required to change to a doctor within the MPN. For more information, see the MPN contact information below:

MPN website: www.harborsys.com/ArissaMPN

MPN Effective Date: 7/1/2018

MPN Identification number: 2328

If you need help locating an MPN physician, call your MPN access assistant at: (855) 339-6047

If you have questions about the MPN or want to file a complaint against the MPN, call the MPN Contact Person at: (888) 626-1737

Discrimination. It is illegal for your employer to punish or fire you for having a work injury or illness, for filing a claim, or testifying in another person's workers' compensation case. If proven, you may receive lost wages, job reinstatement, increased benefits, and costs and expenses up to limits set by the state.

Questions? Learn more about workers' compensation by reading the information that your employer is required to give you at time of hire. If you have questions, see your employer or the claims administrator (who handles workers' compensation claims for your employer):

Claims Administrator HAZELRIGG Claims Management Services

Phone 909-606-6373

Workers' compensation insurer self-insured

(Enter "self-insured" if appropriate)

You can also get free information from a State Division of Workers' Compensation Information (DWC) & Assistance Officer. The nearest Information & Assistance Officer can be found at location: 464 W 4th St, Ste 239, San Bernardino, CA 92401-1411 or by calling toll-free **(800) 736-7401**. Learn more information about workers' compensation online: www.dwc.ca.gov and access a useful booklet "Workers' Compensation in California: A Guidebook for Injured Workers."

False claims and false denials. Any person who makes or causes to be made any knowingly false or fraudulent material statement or material representation for the purpose of obtaining or denying workers' compensation benefits or payments is guilty of a felony and may be fined and imprisoned.

Your employer may not be liable for the payment of workers' compensation benefits for any injury that arises from your voluntary participation in any **off-duty, recreational, social, or athletic activity** that is not part of your work-related duties.



Aviso a los Empleados—Lesiones Causadas por el Trabajo

Es posible que usted tenga derecho a beneficios de compensación de trabajadores si usted se lesiona o se enferma a causa de su trabajo. La compensación de trabajadores cubre la mayoría de las lesiones y enfermedades físicas o mentales relacionadas con el trabajo. Una lesión o enfermedad puede ser causada por un evento (como por ejemplo lastimarse la espalda en una caída) o por acciones repetidas (como por ejemplo lastimarse la muñeca por hacer el mismo movimiento una y otra vez).

Beneficios. Los beneficios de compensación de trabajadores incluyen:

- **Atención Médica:** Consultas médicas, servicios de hospital, terapia física, análisis de laboratorio, radiografías, medicinas, equipo médico y costos de viajar que son razonablemente necesarias para tratar su lesión. Usted nunca deberá ver un cobro. Hay límites para visitas quiroprácticas, de terapia física y de terapia ocupacional.
- **Beneficios por Incapacidad Temporal (TD):** Pagos si usted pierde sueldo mientras se recupera. Para la mayoría de las lesiones, beneficios de TD no se pagarán por más de 104 semanas dentro de cinco años después de la fecha de la lesión.
- **Beneficios por Incapacidad Permanente (PD):** Pagos si usted no se recupera completamente y si su lesión le causa una pérdida permanente de su función física o mental que un médico puede medir.
- **Beneficio Suplementario por Desplazamiento de Trabajo:** Un vale no-transferible si su lesión surge en o después del 1/1/04, y su lesión le ocasiona una incapacidad permanente, y su empleador no le ofrece a usted un trabajo regular, modificado, o alternativo.
- **Beneficios por Muerte:** Pagados a sus dependientes si usted muere a causa de una lesión o enfermedad relacionada con el trabajo.

Designación de su Propio Médico Antes de una Lesión o Enfermedad (Designación previa). Es posible que usted pueda elegir al médico que le atenderá en una lesión o enfermedad relacionada con el trabajo. Si elegible, usted debe informarle al empleador, por escrito, el nombre y la dirección de su médico personal o grupo médico, *antes* de que usted se lesione. Usted debe ponerse de acuerdo con su médico para que atienda la lesión causada por el trabajo. Para instrucciones, vea la información escrita sobre la compensación de trabajadores que se le exige a su empleador darle a los empleados nuevos.

Si Usted se Lastima:

1. **Obtenga Atención Médica.** Si usted necesita atención de emergencia, llame al 911 para ayuda inmediata de un hospital, una ambulancia, el departamento de bomberos o departamento de policía. Si usted necesita primeros auxilios, comuníquese con su empleador.
2. **Reporte su Lesión.** Reporte la lesión inmediatamente a su supervisor(a) o a un representante del empleador. No se demore. Hay límites de tiempo. Si usted espera demasiado, es posible que usted pierda su derecho a beneficios. Su empleador está obligado a proporcionarle un formulario de reclamo dentro de un día laboral después de saber de su lesión. Dentro de un día después de que usted presente un formulario de reclamo, el empleador o administrador de reclamos debe autorizar todo tratamiento médico, hasta diez mil dólares, de acuerdo con las pautas de tratamiento aplicables a su presunta lesión, hasta que el reclamo sea aceptado o rechazado.
3. **Consulte al Médico que le está Atendiendo (PTP).** Este es el médico con la responsabilidad total de tratar su lesión o enfermedad.
 - Si usted designó previamente a su médico personal o grupo médico, usted puede consultar a su médico personal o grupo médico después de lesionarse.
 - Si su empleador está utilizando una Red de Proveedores Médicos (MPN) o una Organización de Cuidado Médico (HCO), en la mayoría de los casos usted será tratado dentro de la MPN o la HCO a menos que usted designó previamente un médico personal o grupo médico. Una MPN es un grupo de médicos y proveedores de atención médica que proporcionan tratamiento a trabajadores lesionados en el trabajo. Usted debe recibir información de su empleador si está cubierto por una HCO o una MPN. Hable con su empleador para más información.
 - Si su empleador no está utilizando una MPN o HCO, en la mayoría de los casos el administrador de reclamos puede escoger el médico que lo atiende primero, cuando usted se lesiona, a menos que usted designó previamente a un médico personal o grupo médico.
4. **Red de Proveedores Médicos (MPN):** Es posible que su empleador use una MPN, lo cual es un grupo de proveedores de asistencia médica designados para dar tratamiento a los trabajadores lesionados en el trabajo. **Si usted ha hecho una designación previa de un médico personal antes de lesionarse en el trabajo, entonces usted puede recibir tratamiento de su médico previamente designado.** Si usted está recibiendo tratamiento de parte de un médico que no pertenece a la MPN para una lesión existente, puede requerirse que usted se cambie a un médico dentro de la MPN. Para más información, vea la siguiente información de contacto de la MPN :

Página web de la MPN: www.harborsys.com/ArissaMPN

Fecha de vigencia de la MPN: 7/1/2018 Número de identificación de la MPN: 2328

Si usted necesita ayuda en localizar un médico de una MPN, llame a su asistente de acceso de la MPN al: (855) 339-6047

Si usted tiene preguntas sobre la MPN o quiere presentar una queja en contra de la MPN, llame a la Persona de Contacto de la MPN al: (888) 626-1737

Discriminación. Es ilegal que su empleador le castigue o despidan por sufrir una lesión o enfermedad en el trabajo, por presentar un reclamo o por testificar en el caso de compensación de trabajadores de otra persona. De ser probado, usted puede recibir pagos por pérdida de sueldos, reposición del trabajo, aumento de beneficios y gastos hasta los límites establecidos por el estado.

¿Preguntas? Aprenda más sobre la compensación de trabajadores leyendo la información que se requiere que su empleador le dé cuando es contratado. Si usted tiene preguntas, vea a su empleador o al administrador de reclamos (que se encarga de los reclamos de compensación de trabajadores de su empleador):

Administrador de Reclamos HAZELRIGG Claims Management Services Teléfono 909-606-6373

Asegurador del Seguro de Compensación de trabajador autoasegurado (Anote "autoasegurado" si es apropiado)

Usted también puede obtener información gratuita de un Oficial de Información y Asistencia de la División Estatal de Compensación de Trabajadores. El Oficial de Información y Asistencia más cercano se localiza en: 464 W 4th St, Ste 239, San Bernardino, CA 92401 o llamando al número gratuito **(800) 736-7401**. Usted puede obtener más información sobre la compensación del trabajador en el Internet en: www.dwc.ca.gov y acceder a una guía útil "Compensación del Trabajador de California Una Guía para Trabajadores Lesionados."

Los reclamos falsos y rechazos falsos del reclamo. Cualquier persona que haga o que ocasione que se haga una declaración o una representación material intencionalmente falsa o fraudulenta, con el fin de obtener o negar beneficios o pagos de compensación de trabajadores, es culpable de un delito grave y puede ser multado y encarcelado.

Es posible que su empleador no sea responsable por el pago de beneficios de compensación de trabajadores para ninguna lesión que proviene de su participación voluntaria en cualquier **actividad fuera del trabajo, recreativa, social, o atlética** que no sea parte de sus deberes laborales.

PREDESIGNATION OF PERSONAL PHYSICIAN

In the event you sustain an injury or illness related to your employment, you may be treated for such injury or illness by your personal medical doctor (M.D.), doctor of osteopathic medicine (D.O.) or medical group if:

- on the date of your work injury you have health care coverage for injuries or illnesses that are not work related;
- the doctor is your regular physician, who shall be either a physician who has limited his or her practice of medicine to general practice or who is a board-certified or board-eligible internist, pediatrician, obstetrician-gynecologist, or family practitioner, and has previously directed your medical treatment, and retains your medical records;
- your "personal physician" may be a medical group if it is a single corporation or partnership composed of licensed doctors of medicine or osteopathy, which operates an integrated multispecialty medical group providing comprehensive medical services predominantly for nonoccupational illnesses and injuries;
- prior to the injury your doctor agrees to treat you for work injuries or illnesses;
- prior to the injury you provided your employer the following in writing: (1) notice that you want your personal doctor to treat you for a work-related injury or illness, and (2) your personal doctor's name and business address.

You may use this form to notify your employer if you wish to have your personal medical doctor or a doctor of osteopathic medicine treat you for a work-related injury or illness and the above requirements are met.

NOTICE OF PREDESIGNATION OF PERSONAL PHYSICIAN

Employee: Complete this section.

To: _____ (name of employer) If I have a work-related injury or illness, I choose to be treated by:

(name of doctor)(M.D., D.O., or medical group)

(street address, city, state, ZIP)

(telephone number)

Employee Name (please print):

Employee's Address:

Name of Insurance Company, Plan, or Fund providing health coverage for nonoccupational injuries or illnesses:

Employee's Signature _____ Date: _____

Physician: I agree to this Predesignation:

Signature: _____ Date: _____

(Physician or Designated Employee of the Physician or Medical Group)

The physician is not required to sign this form, however, if the physician or designated employee of the physician or medical group does not sign, other documentation of the physician's agreement to be predesignated will be required pursuant to Title 8, California Code of Regulations, section 9780.1(a)(3).

Title 8, California Code of Regulations, section 9783.

TIME OF HIRE PAMPHLET

This pamphlet, or a similar one that has been approved by the Administrative Director, must be given to all newly hired employees in the State of California. Employers and claims administrators may use the content of this document and put their logos and additional information on it. The content of this pamphlet applies to all industrial injuries that occur on or after January 1, 2013.

WHAT IS WORKERS' COMPENSATION?

If you get hurt on the job, your employer is required by law to pay for workers' compensation benefits. You could get hurt by:

One event at work. Examples: hurting your back in a fall, getting burned by a chemical that splashes on your skin, getting hurt in a car accident while making deliveries.

—or—

Repeated exposures at work. Examples: hurting your wrist from using vibrating tools, losing your hearing because of constant loud noise.

—or—

Workplace crime. Examples: you get hurt in a store robbery, physically attacked by an unhappy customer.

Discrimination is illegal

It is illegal under Labor Code section 132a for your employer to punish or fire you because you:

- File a workers' compensation claim
- Intend to file a workers' compensation claim
- Settle a workers' compensation claim
- Testify or intend to testify for another injured worker.

If it is found that your employer discriminated against you, he or she may be ordered to return you to your job. Your employer may also be made to pay for lost wages, increased workers' compensation benefits, and costs and expenses set by state law.

WHAT ARE THE BENEFITS?

- **Medical care:** Paid for by your employer to help you recover from an injury or illness caused by work. Doctor visits, hospital services, physical therapy, lab tests and x-rays are some of the medical services that may be provided. These services should be necessary to treat your injury. There are limits on some services such as physical and occupational therapy and chiropractic care.

- **Temporary disability benefits:** Payments if you lose wages because your injury prevents you from doing your usual job while recovering. The amount you may get is up to two-thirds of your wages. There are minimum and maximum payment limits set by state law. You will be paid every two weeks if you are eligible. For most injuries, payments may not exceed 104 weeks within five years from your date of injury. Temporary disability (TD) stops when you return to work, or when the doctor releases you for work, or says your injury has improved as much as it's going to.
- **Permanent disability benefits:** Payments if you don't recover completely. You will be paid every two weeks if you are eligible. There are minimum and maximum weekly payment rates established by state law. The amount of payment is based on:
 - Your doctor's medical reports
 - Your age
 - Your occupation
- **Supplemental job displacement benefits:** This is a voucher for up to \$6,000 that you can use for retraining or skill enhancement at an approved school, books, tools, licenses or certification fees, or other resources to help you find a new job. You are eligible for this voucher if:
 - You have a permanent disability.
 - Your employer does not offer regular, modified, or alternative work, within 60 days after the claims administrator receives a doctor's report saying you have made a maximum medical recovery.
- **Death benefits:** Payments to your spouse, children or other dependents if you die from a job injury or illness. The amount of payment is based on the number of dependents. The benefit is paid every two weeks at a rate of at least \$224 per week. In addition, workers' compensation provides a burial allowance.

OTHER BENEFITS

You may file a claim with the Employment Development Department (EDD) to get state disability benefits when workers' compensation benefits are delayed, denied, or have ended. There are time restrictions so for more information contact the local office of EDD or go to their web site www.edd.ca.gov.

If your injury results in a permanent disability (PD) and the state determines that your PD benefit is disproportionately low compared to your earning loss, you may qualify for additional money from the Department of Industrial Relation's special earnings loss supplement program also known as the return to work program. If you have questions or think you qualify, contact the Information & Assistance Unit by going to www.dwc.ca.gov and looking under "Workers'

Compensation programs and units” for the “Information & Assistance Unit” link or visit the DIR web site at www.dir.ca.gov.

Workers’ compensation fraud is a crime

Any person who makes or causes to be made any knowingly false statement in order to obtain or deny workers’ compensation benefits or payments is guilty of a felony. If convicted, the person will have to pay fines up to \$150,000 and/or serve up to five years in jail.

WHAT SHOULD I DO IF I HAVE AN INJURY?

Report your injury to your employer

Tell your supervisor right away no matter how slight the injury may be. Don’t delay – there are time limits. You could lose your right to benefits if your employer does not learn of your injury within 30 days. If your injury or illness is one that develops over time, report it as soon as you learn it was caused by your job.

If you cannot report to the employer or don’t hear from the claims administrator after you have reported your injury, contact the claims administrator yourself.

Workers’ compensation insurance company or if employer is self-insured, person responsible for handling the claim is:

Hazelrigg Claims Management Services

Address: P.O. Box 880 Chino Hills, CA 91709

Phone: (909) 259-9940

You may be able to find the name of your employer’s workers’ compensation insurer at www.caworkcompcoverage.com. If no coverage exists or coverage has expired, contact the Division of Labor Standards Enforcement at www.dir.ca.gov/DLSE as all employees must be covered by law.

Get emergency treatment if needed

If it’s a medical emergency, go to an emergency room right away. Tell the medical provider who treats you that your injury is job related. Your employer may tell you where to go for follow up treatment.

Emergency telephone number: Call 911 for an ambulance, fire department or police. For non-emergency medical care, contact your employer, the workers' compensation claims administrator or go to this facility:

Call the Company Nurse Hotline at 1 (888) 375-0280

Fill out DWC 1 claim form and give it to your employer

Your employer must give you a [DWC 1 claim form](#) within one working day after learning about your injury or illness. Complete the employee portion, sign and give it back to your employer. Your employer will then file your claim with the claims administrator. Your employer must authorize treatment within one working day of receiving the DWC 1 claim form.

If the injury is from repeated exposures, you have one year from when you realized your injury was job related to file a claim.

In either case, you may receive up to \$10,000 in employer-paid medical care until your claim is either accepted or denied. The claims administrator has up to 90 days to decide whether to accept or deny your claim. Otherwise your case is presumed payable.

Your employer or the claims administrator will send you "benefit notices" that will advise you of the status of your claim.

MORE ABOUT MEDICAL CARE

What is a Primary Treating Physician (PTP)?

This is the doctor with overall responsibility for treating your injury or illness. He or she may be:

- The doctor you name in writing *before* you get hurt on the job
- A doctor from the medical provider network (MPN)
- The doctor chosen by your employer during the first 30 days of injury if your employer does not have an MPN or
- The doctor you chose after the first 30 days if your employer does not have an MPN.

What is a Medical Provider Network (MPN)?

An MPN is a select group of health care providers who treat injured workers. Check with your employer to see if they are using an MPN.

If you have not named a doctor before you get hurt and your employer is using an MPN, you will see an MPN doctor. After your first visit, you are free to choose another doctor from the MPN list.

What is Predesignation?

Predesignation is when you name your regular doctor to treat you if you get hurt on the job. The doctor must be a medical doctor (M.D.), doctor of osteopathic medicine (D.O.) or a medical group with an M.D. or D.O. You must name your doctor in writing *before* you get hurt or become ill.

You may predesignate a doctor if you have health care coverage for non-work injuries and illnesses. The doctor must have:

- Treated you
- Maintained your medical history and records before your injury and
- Agreed to treat you for a work-related injury or illness before you get hurt or become ill.

You may use the “predesignation of personal physician” form included with this pamphlet. After you fill in the form, be sure to give it to your employer.

If your employer does not have an approved MPN, you may name your chiropractor or acupuncturist to treat you for work related injuries. The notice of personal chiropractor or acupuncturist must be in writing *before* you get hurt. You may use the form included in this pamphlet. After you fill in the form, be sure to give it to your employer.

With some exceptions, state law does not allow a chiropractor to continue as your treating physician after 24 visits. Once you have received 24 chiropractic visits, if you still require medical treatment, you will have to select a new physician who is not a chiropractor. The term “chiropractic visit” means any chiropractic office visit, regardless of whether the services performed involve chiropractic manipulation or are limited to evaluation and management.

Exceptions to the prohibition on a chiropractor continuing as your treating physician after 24 visits include postsurgical physical medicine visits prescribed by the surgeon, or physician designated by the surgeon, under the postsurgical component of the Division of Workers’ Compensation’s Medical Treatment Utilization Schedule, or if your employer has authorized additional visits in writing.

WHAT IF THERE IS A PROBLEM?

If you have a concern, speak up. Talk to your employer or the claims administrator handling your claim and try to solve the problem. If this doesn’t work, get help by trying the following:

Contact the Division of Workers’ Compensation (DWC) Information and Assistance (I&A) Unit
All 24 DWC offices throughout the state provide information and assistance on rights, benefits and obligations under California's workers' compensation laws. I&A officers help resolve disputes without formal proceedings. Their goal is to get you full and timely benefits. Their services are free.

To contact the nearest I&A Unit, go to www.dwc.ca.gov and under “Workers’ Compensation programs and units”, click on “Information & Assistance Unit.” At this site you will find fact sheets, guides and information to help you.

The nearest I&A Unit is located at:

Address: 732 Corporate Center Drive, Pomona, CA 91768

Phone number: (909) 623-8568

Consult with an attorney

Most attorneys offer one free consultation. If you decide to hire an attorney, his or her fees may be taken out of some of your benefits. For names of workers' compensation attorneys, call the State Bar of California at (415) 538-2120 or go to their website at www.californiaspecialist.org. You may get a list of attorneys from your local I&A Unit or look in the yellow pages.

Warning

Your employer may not pay workers' compensation benefits if you get hurt in a voluntary off-duty recreational, social or athletic activity that is not part of your work-related duties.

Additional rights

You may also have other rights under the Americans with Disabilities Act (ADA) or the Fair Employment and Housing Act (FEHA). For additional information, contact FEHA at (800) 884-1684 or the Equal Employment Opportunity Commission (EEOC) at (800) 669-4000.

The information contained in this pamphlet conforms to the informational requirements found in Labor Code sections 3551 and 3553 and California Code of Regulation, Title 8, sections 9880 and 9883. This document is approved by the Division of Workers' Compensation administrative director.

Revised 6/17/14 and effective for dates of injuries on or after 1/1/13

PREDESIGNATION OF PERSONAL PHYSICIAN

In the event you sustain an injury or illness related to your employment, you may be treated for such injury or illness by your personal medical doctor (M.D.), doctor of osteopathic medicine (D.O.) or medical group if:

- on the date of your work injury you have health care coverage for injuries or illnesses that are not work related;
- the doctor is your regular physician, who shall be either a physician who has limited his or her practice of medicine to general practice or who is a board-certified or board-eligible internist, pediatrician, obstetrician-gynecologist, or family practitioner, and has previously directed your medical treatment, and retains your medical records;
- your "personal physician" may be a medical group if it is a single corporation or partnership composed of licensed doctors of medicine or osteopathy, which operates an integrated multispecialty medical group providing comprehensive medical services predominantly for nonoccupational illnesses and injuries;
- prior to the injury your doctor agrees to treat you for work injuries or illnesses;
- prior to the injury you provided your employer the following in writing: (1) notice that you want your personal doctor to treat you for a work-related injury or illness, and (2) your personal doctor's name and business address.

You may use this form to notify your employer if you wish to have your personal medical doctor or a doctor of osteopathic medicine treat you for a work-related injury or illness and the above requirements are met.

NOTICE OF PREDESIGNATION OF PERSONAL PHYSICIAN

Employee: Complete this section.

To: _____ (name of employer) If I have a work-related injury or illness, I choose to be treated by:

(name of doctor)(M.D., D.O., or medical group)

(street address, city, state, ZIP)

(telephone number)

Employee Name (please print):

Employee's Address:

Name of Insurance Company, Plan, or Fund providing health coverage for nonoccupational injuries or illnesses:

Employee's Signature _____ Date: _____

Physician: I agree to this Predesignation:

Signature: _____ Date: _____
(Physician or Designated Employee of the Physician or Medical Group)

The physician is not required to sign this form, however, if the physician or designated employee of the physician or medical group does not sign, other documentation of the physician's agreement to be predesignated will be required pursuant to Title 8, California Code of Regulations, section 9780.1(a)(3).

§ 9783.1. DWC Form 9783.1 Notice of Personal Chiropractor or Personal Acupuncturist.

NOTICE OF PERSONAL CHIROPRACTOR OR PERSONAL ACUPUNCTURIST

If your employer or your employer's insurer does not have a Medical Provider Network, you may be able to change your treating physician to your personal chiropractor or acupuncturist following a work-related injury or illness. In order to be eligible to make this change, you must give your employer the name and business address of a personal chiropractor or acupuncturist in writing prior to the injury or illness. Your claims administrator generally has the right to select your treating physician within the first 30 days after your employer knows of your injury or illness. After your claims administrator has initiated your treatment with another doctor during this period, you may then, upon request, have your treatment transferred to your personal chiropractor or acupuncturist.

NOTE: If your date of injury is January 1, 2004 or later, a chiropractor cannot be your treating physician after you have received 24 chiropractic visits unless your employer has authorized additional visits in writing. The term "chiropractic visit" means any chiropractic office visit, regardless of whether the services performed involve chiropractic manipulation or are limited to evaluation and management. Once you have received 24 chiropractic visits, if you still require medical treatment, you will have to select a new physician who is not a chiropractor. This prohibition shall not apply to visits for postsurgical physical medicine visits prescribed by the surgeon, or physician designated by the surgeon, under the postsurgical component of the Division of Workers' Compensation's Medical Treatment Utilization Schedule.

You may use this form to notify your employer of your personal chiropractor or acupuncturist.

Your Chiropractor or Acupuncturist's Information:

(name of chiropractor or acupuncturist)

(street address, city, state, zip code)

(telephone number)

Employee Name (please print):

Employee's Address:

Employee's Signature _____ Date: _____