We hope this guide is a useful tool for your business. Please feel free to make copies or use it in any way to develop your program. If you have any questions after reading this guide, call 1.866.452.7425 and ask for a customer service representative. Be sure to have your policy number available.
Overview of StreetSelect™

BrickStreet Insurance, West Virginia’s largest private workers’ compensation carrier, has entered into a preferred provider agreement with Procura Management, Inc., an affiliated company of Healthcare Solutions, for utilization of their provider network. Procura has partnered with United Healthcare, and the provider network is called Procura/OneNet Workers’ Compensation Network. Procura/OneNet chooses physicians and other providers whose history provides an indication of their commitment to the goal of returning injured employees to work as soon as practical, using efficient, quality practices and care. Modeled after successful managed care programs and national accreditation models, StreetSelect offers a broad array of providers through the use of Procura/OneNet’s network to assure reasonable access and choice for injured workers.

Procura/OneNet’s network of physicians and other providers is offered to all West Virginia employers with BrickStreet workers’ compensation coverage. The Procura/OneNet network of medical providers compliments BrickStreet’s utilization review, nurse case management, medical bill review and quality assurance programs. Ongoing training provided by Procura/OneNet is offered regarding standards of return-to-work best practices and treatment guidelines. Panel physicians’ and providers’ continued participation with Procura/OneNet is based upon adherence to these standards.

Use of the Procura/OneNet network of physicians and providers ensures the benefits of prioritized treatment of injured workers and the elimination of delays in the treatment process. StreetSelect allows employers to proactively address their workers’ compensation issues. Employers will be shown how to best assist their injured workers to locate a network medical provider and participate in the coordination of the injured worker’s return to transitional or normal work duty.

Likewise, provider services will be directed and monitored through quality assurance initiatives, including uniform standards for treatment and duration of recovery and return to work. Training will be conducted with providers along with ongoing monitoring of practice patterns. Continued participation in StreetSelect will depend upon adherence to the standards.

StreetSelect will continually strive for and maintain quality and efficiency in all aspects of its operation. Accordingly, several key operating principles have been established. These include:

- Maintenance of quality standards through provider selection, credentialing and management of compliance with treatment and process standards.
- Proactive provider/employer relations and education.
- Ongoing network access management ensuring adequate choice for all employees.
- Data analysis and outcome measurement.
- Professional oversight and support of the network by Procura/OneNet’s Medical Advisory Board.
- Ongoing assessment of provider performance.
- Utilization of technology for efficiency in data integration and customer service.
- Network integration with nurse case management and claims management functions.
Program Description and Objectives

StreetSelect’s Procura/OneNet PPO has three basic objectives:

1. Provide appropriate, high quality and timely healthcare to recovering workers.
2. Expedite the worker’s return to employment by avoiding unnecessary delays.

To achieve these objectives, StreetSelect and Procura/OneNet recognize the importance of recruiting and maintaining a network of providers from specialty areas that are involved in treating occupational injuries and illnesses. Important StreetSelect’s Procura/OneNet PPO features include the following:

- StreetSelect’s Procura/OneNet PPO affords the opportunity to develop positive and proactive relationships with employers who choose to participate in StreetSelect’s Procura/OneNet PPO. StreetSelect’s Procura/OneNet PPO facilitates these relationships by encouraging and sponsoring joint training opportunities, work-site tours and ongoing dialogue among key representatives of employer and provider entities.

- StreetSelect’s Procura/OneNet PPO network providers are given an incentive to continue their participation and to follow StreetSelect’s Procura/OneNet PPO program guidelines by expedited payment for their services.

- StreetSelect’s Procura/OneNet PPO utilizes treatment protocols that provide a framework for the treating physician. These protocols define expectations regarding treatment parameters and duration estimates. They also lend consistency and structure to the treatment of work-related injuries.

BrickStreet Insurance

One of the largest employer-owned mutual insurance companies in the United States, BrickStreet Insurance represents thousands of employers. The claim handled by BrickStreet represents a significant percentage of all claims in the West Virginia workers’ compensation system. Because of its high volume, BrickStreet has developed an integrated claims management system capable of supporting a provider network such as StreetSelect.

The BrickStreet medical billing process is coordinated with Procura to expedite and conform to Procura/OneNet’s commitments to network providers. Claims and medical billing staff communicate closely with StreetSelect regarding individual claims and/or individual employee information. This allows StreetSelect to resolve any problems that may arise in a timely manner.

Medical providers participating with the StreetSelect Managed Health Care Plan and the Procura/OneNet network will realize the benefits of being on a team of professionals who have access to the necessary resources to accomplish the positive improvements and outcomes necessary for success.
Medical Director

StreetSelect has appointed a licensed physician, Dr. Randall Short, as Medical Director. The Medical Director is responsible for the clinical aspects of StreetSelect’s quality management and utilization review programs. The Medical Director also communicates with network providers on quality management issues or other concerns.

The Medical Director’s responsibilities include:

- Contributing to policy and operational manuals and instructions.
- Providing written and/or telephonic communications regarding individual situations.
- Reviewing selected independent medical evaluation reports for accuracy and appropriateness.
- Providing quality assurance/management oversight.
- Being a liaison between the provider community and StreetSelect.
- Consulting with BrickStreet’s Office of Medical Management on policies and procedures.
- Presenting information to stakeholders.

Service Area

The StreetSelect service area includes the entire State of West Virginia. By incorporating counties surrounding West Virginia borders, employees working in West Virginia, but living out of state, have access to healthcare in the StreetSelect’s Procura/OneNet Preferred Provider Organizations.

StreetSelect – Your Workers’ Compensation Medical Solution

If an employee has a work-related injury or disease and needs medical treatment, he/she MUST seek and obtain medical care from providers within the StreetSelect’s Procura/OneNet network. StreetSelect’s Procura/OneNet provides the employee with a choice of in-network providers within a reasonable distance from the employer’s work location. These providers have agreed to provide your injured employee with medical treatment and to work with him/her, you, StreetSelect and BrickStreet Insurance to expedite care and facilitate return to work.

Your employee’s medical expenses or indemnity benefits may not be covered if they choose a medical provider who is not listed in the StreetSelect’s Procura/OneNet PPO directory, unless they meet the conditions listed under the opt-out section of the manual.

StreetSelect Benefits

StreetSelect’s operational strategy involves several key segments of the workers’ compensation process. The focus is on provider choice by claimant, a checks-and-balances system for monitoring appropriate medical treatment and coordination with BrickStreet’s application of the traditional strategies involved in claims management, nurse case management and employer work accommodation.
**Employer**

As the employer, you have a role and responsibilities in the recovery and return-to-work process. StreetSelect has partnered with Procura/OneNet to provide:

- A listing of participating primary care providers in your geographic region as well as statewide specialty providers. The network can be accessed through a hyperlink on www.brickstreet.com, which will direct you to Procura/OneNet’s website.

**Work-Site Coordinator**

You should appoint a work-site coordinator to be the primary contact for all your workers’ compensation matters at your work site. Your coordinator will be the primary interface with BrickStreet and will help to coordinate all setup and implementation activities with your employees. This person also will be the primary resource for your employees to learn about and access StreetSelect services.

**First Report of Injury (FROI)**

Industry experts agree, the sooner a notice of an injury/disease claim is received, the better the expected outcome. Early reporting will help the management of claim costs and facilitate injured worker recovery and return to work. Ideally, the First Report of Injury (FROI) should be reported to BrickStreet by telephone within 24 hours of the injury by calling **1.866.452.7425, select policyholder and option 1.**

You also may report your claim:

1. Electronically through the BrickStreet StreetConnect system
2. File the report as an email attachment to: escan@brickstreet.com
3. Fax to 877.293.5513
4. Mail the Employer’s First Report (BI-3) to:
   BrickStreet Insurance Company
   P.O. Box 3151
   Charleston, WV 25332
Report Injuries In 24 hrs.

Benefits Of Early Reporting
- Establishes the claim
- Allows claims adjuster to begin management of the claim sooner
- Speeds delivery of necessary benefits
- Increases early return-to-work opportunities
- Helps avoid costly litigation
- Results in lower costs to the policyholder

1.866.452.7425
www.brickstreet.com
Return-to-Work Program

A return-to-work program brings injured workers back to the job, either at their regular positions or at modified duties, while they are recovering from their injuries.

Modified duty can be full or part-time, but it is not intended to be a permanent position. Workers receive wages that are appropriate for the tasks performed while on modified duty. The goal is to return the injured worker to his or her regular position.

Saving Money

By providing modified duty, you may reduce

- The length and complexity of the worker’s disability.
- The duration of temporary total disability payments.
- Your experience modification rating, resulting in greater premium discounts.

Resources and Services

BrickStreet Insurance provides resources and a plan of action for employers and their employees when faced with workplace injuries.

- **Return-to-Work Program** – BrickStreet provides employers with written guidelines that outline a step-by-step process for effective claims management.
- **Modified Duty Assistance** – The return-to-work specialist assigned to your account will assist you with formal modified duty offered to your injured workers.
- **Ergonomic Evaluation** – The return-to-work specialist will assist in evaluating your injured workers and their workstations, making recommendations that comply with ergonomic standards.

Additional return-to-work services include:

- Job analysis
- Work-site evaluations
- Pre-planned return-to-work assistance
- Modified duty development

For more information on how a return-to-work program can benefit your business, contact the BrickStreet Insurance Return-to-Work Technical Coordinator at 304.941.1000, extension 5610.
Claimant Letter of Compensability and Identification Card

The injured worker will receive a letter of compensability, an identification card and instructions to seek care for a work-related medical injury/disease (see employee medical identification card in Appendix A). This verification card is not to be construed as authorization for medical services or payment.

Medical Provider

Medical providers form the service component of StreetSelect. StreetSelect is designed to address many of the concerns experienced by providers treating workers’ compensation claimants in the past. Thus their ability to produce quality outcomes is enhanced. StreetSelect features important to providers include the following:

- Medical providers have the opportunity to develop positive and proactive relationships with area companies. StreetSelect facilitates these relationships by encouraging and sponsoring joint training opportunities, work site tours, and ongoing dialogue among key representatives of employer and provider entities.
- StreetSelect’s Procura/OneNet network participants are paid for their services in an expedient manner, providing them incentive to continue their participation and to follow StreetSelect’s Procura/OneNet program guidelines.
- StreetSelect utilizes treatment protocols that provide a framework for the treating physician. These protocols define their expectations regarding treatment parameters and duration estimates. They also lead consistency and structure to the treatment of work-related injuries.

Treatment Outside of StreetSelect’s Procura/OneNet PPO

Your employees’ medical expenses may not be covered if they use a medical provider who is not listed in the StreetSelect’s Procura/OneNet directory, unless the conditions below are met. Before receiving care from an out-of-network provider, your employees should check with you or your BrickStreet claims adjuster regarding available in-network services.

If the provider is not a member of the network, the claimant may request to opt out of the network. One of the following conditions must be met:

- For emergency care when access to a healthcare provider within the managed healthcare plan is unobtainable for the acute phase of care.
- When authorized treatment is unavailable through the managed care plan.
- Obtain a second opinion when a managed healthcare plan physician recommends surgery and another qualified physician within the plan is not available for consultation.
- For selection of a treating physician outside the network, the claimant must establish by competent evidence ALL of the following:
– The claimant has been treated by providers solely within the employer’s managed care plan for a period of at least one year;

– That for reasons related to the treatment alone, the claimant has not made progress toward recovery that is reasonably consistent with the treatment guidelines; and

– That the claimant establishes to a reasonable certainty that proposed treatment outside the employer’s managed care plan would more likely provide the claimant with a better clinical outcome than the current treatment or rehabilitation plan.

Please note: *A condition of the right to opt out under this provision shall be that the services secured outside the plan are for treatment purposes only and the provider shall not be permitted to rate the claimant for permanent partial or permanent total disability.*

The claimant will need to submit his/her request and reason to seek care outside of the network in writing to the BrickStreet claims adjuster. Use form BI-RCP/OO, Request for Change of Physician/Opt-Out of the StreetSelect’s Procura/OneNet Network (Appendix B). *Remember, emergency care is not restricted.*

**Emergency Situations**

Employees may seek emergency medical care from any emergency facility, regardless of their participation in StreetSelect’s Procura/OneNet network. If a network facility is available and convenient, it should be the emergency facility of choice. However, access to emergency services is not restricted. The referral from the emergency services provider should be within the StreetSelect’s Procura/OneNet network of providers for either primary care or specialty care.

*In an emergency, have your employee go to the nearest emergency facility.*

**Utilization Review**

BrickStreet has established procedures and oversight for utilization review of medical services to assure that a course of treatment is medically necessary; diagnostic procedures are not unnecessarily duplicated; the frequency, scope and duration of treatment is appropriate; pharmaceuticals are not unnecessarily prescribed; and that ongoing and proposed treatment is cost-effective and not experimental or harmful to the employee.

Utilization review evaluates the necessity, appropriateness and efficiency of the use of healthcare services, procedures and facilities under the auspices of the workers’ compensation program. The reviews are conducted by nurses and physicians.

The utilization review process is used to assure quality standards are being met and continues to evaluate the healthcare providers against benchmark treatment protocols. This information allows StreetSelect to examine utilization patterns of network providers and provide information on intensity of approaches to diagnosis and treatment of an injury. It also allows an evaluation of the medical necessity of any given treatment plan and reduces unrelated and inappropriate services. The utilization review process therefore minimizes cost, as well as expedites appropriate and related services which eliminate lost working days and indemnity payments.
Confidentiality

If an employee reports a work-related injury or files an application to reopen a claim, the employee authorizes any physician, psychiatrist, chiropractor, podiatrist, hospital, or health care provider, after written request by the employee, employer, or BrickStreet Insurance to provide the requesting party with any information or written material reasonably related to any injury or disease for which a claim for compensation is filed.

StreetSelect complies with all applicable federal and state laws regarding worker-specific and provider-specific information. Information will be shared only with entities having authority to receive such information. Both worker-specific and provider-specific information will be used as appropriate to support StreetSelect’s Procura/OneNet network quality assurance and credentialing programs.
Appendix A

Name
Address
Address
CSZ

Dear

The attached medical identification card is provided to assist your healthcare providers in billing BrickStreet Insurance for services they provide you for the accepted conditions in the claim identified on the card.

You should present this card when obtaining medical treatment, or supplies directly related to this injury/disease. Your treating physician must be a member of BrickStreet’s StreetSelect/OneNet provider networks.

This card is to be used only for medical services related to conditions covered in this claim and may be used only by the person identified on this card.

Cut along outside dotted lines and fold

BrickStreet Insurance

NAME  John Doe
1 TREE LANE
ANYWHERE, WV XXXXX

SOCIAL SECURITY # XXX-XX-1234
DATE OF INJURY May 27, 2010
CLAIM # 201000001

EMPLOYER  ABC TRUCKING COMPANY
5 SUNSHINE LANE
ANYWHERE, WV XXXXX

Submit billing and medical documentation electronically via Jopari Solutions, Inc. (866-289-0554) or mail to:

Medical Billing Unit
P.O. Box 3151
Charleston, WV 25332-3151

This card is for identification purposes only and is intended to verify the claimant has a compensable claim. The card is not a guarantee of payment for services rendered. All but emergency services must be rendered by an approved StreetSelect/OneNet physician. This identification card does not waive any of the pre-certification requirements of BrickStreet Insurance with regard to reimbursement of services.

Toll Free: 866-45BRICK (866-452-7425)
I am requesting to change to:

- Insurance
- Workers’ Compensation

1. Claimant’s Name:

2. Claim Number:

4. Date of Injury:

I am requesting to:

- Change physicians to another network provider
- Seek treatment with an out-of-network physician

I am presently being treated by:

I am requesting to change to:

Address of requested physician:

Practice Name ______________________ Address ______________________

City _____________________________ State _______ Zip ________________

My reason for changing physicians or seeking treatment out of network:

I have checked with the requested physician to see if he/she will take me as a patient: Yes  No

Claimant’s Signature: ______________________ Date: ________

Please return completed form to: BrickStreet Mutual Insurance, P.O. Box 3151, Charleston, WV 25332-3151
## West Virginia Workers' Compensation Employee's and Physician's Report of Occupational Injury or Disease

### For BrickStreet Use Only

<table>
<thead>
<tr>
<th>Claim Number:</th>
<th>Team Assigned:</th>
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### SECTION I: ALL INFORMATION MUST BE COMPLETED BY CLAIMANT

1. **Name Last:**
2. **Address:**
3. **Telephone:**
4. **SSN:**
5. **Date of Birth:**
6. **Sex:**
7. **Marital Status:**
8. **Date of Injury or Last Exposure:**
9. **Time you Began Work on Date of Injury:**
10. **Date you Stopped Working Due to Injury:**
11. **Have you Retired?**
12. **Employer's Name:**
13. **Job Title / Description:**
14. **Body Parts Injured:**
15. **Describe How Your Injury Occurred (Specify the cause, what you were doing, and equipment / objects involved):**
16. **Did Injury Occur on Employer's Property?**
17. **Please Identify Any Witnesses to Your Injury:**

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### SECTION II: ALL INFORMATION MUST BE COMPLETED BY INITIAL PROVIDER

1. **Name of Physician / Hospital:**
2. **FEIN / SSN:**
3. **Address:**
4. **Date of Initial Treatment:**
5. **Date Patient May Return to Work:**
6. **Have you advised the patient to remain off work 4 more days?**
7. **Condition is a direct result of:**
8. **Did this injury aggravate a prior injury / disease?**
9. **Description of injury or occupational disease:**
10. **Body Part(s) Injured:**
11. **ICD9-CM Diagnosis Code(s) in order of severity:**

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I certify that the above is true and correct to the best of my knowledge. I am aware the law provides for severe penalties if I knowingly and with fraudulent intent withhold facts or make false statements in order to obtain or increase benefits to which I am not entitled. By signing this application, I hereby authorize any physician, chiropractor, surgeon, practitioner or other healthcare provider, any hospital, including Veterans' Administration or governmental hospital, and medical service organization, any insurance company, any law enforcement or military agency, any government benefit agency including the Social Security Administration, or any other institution or organization to release to each other, any medical or other information, including benefits paid or payable, pertinent to this injury or disease, except information relative to the diagnosis, treatment and/or counseling for HIV/AIDS, psychological conditions, and/or alcohol or substance abuse, for which I must give specific authorization. A Photostat of this authorization shall be valid as the original.

Employee’s Signature: Date: / /