

Coventry Workers' Compensation Services Medical Provider Network (MPN) Acknowledgement

Provider Name .

Address:

City, ST zip:

CPD ID

TIN:

Dear Provider:

This is a final follow-up to the many MPN Acknowledgements that have been sent to you over the last few years. As you may be aware, several legislative changes to the workers' compensation system were passed in 2012 under Senate Bill 863. Your response to the questions below will help Coventry understand and correctly represent your practice as it pertains to the treatment of injured workers. If you have more than one office practice location and your responses differ between offices, please complete an acknowledgement for each office.

Please check this box if you do **not** accept workers' compensation patients, or if you plan to **discontinue** your workers' compensation practice. By selecting this box, your practice will be removed from the workers' compensation product **only as well as** all medical provider networks (MPNs). **Participation in any contracted non-occupational Coventry products will not be affected.**

Workers' Compensation Network Only: Please check this box if a) your practice currently treats workers' compensation patients and b) plan to continue your workers' compensation practice. By selecting only this option, you will only be in the workers' compensation network and will be removed and not eligible for any MPN participation.

Medical Provider Network (MPN) participation – By selecting this box, your practice will be included in the workers' compensation product and **selected** medical provider networks (MPNs). As a provider in the Coventry Workers' Compensation Network, you may be currently participating in MPNs. A complete list of your MPN participation can be obtained at www.coventrywcs.com – see enclosed fact sheet for instructions on how to review MPN listings and for a current list of all MPNs supported by Coventry Workers' Compensation Network. By selecting this option, you understand that there are certain MPN rules and regulations that MPN providers must meet – more details can be found on our website.

PARTICIPATION IN WORKERS' COMPENSATION AND MPNs

Requires this form to be completed, signed and returned to Coventry

Return this entire completed document via E-mail to: CoventryProviderUpdates@cvty.com

Or Fax to: (916) 374-3750

Provider Certification

I certify that the information on this information is true and correct. I understand that misrepresentation may result in my non-selection, or, if discovered after selection, in my termination as a participating provider. I understand that this form does not entitle me to participation in any Coventry Network, owned and operated by Coventry Health Care and/or its subsidiaries (collectively "Coventry") and that I must meet certain criteria prior to my status as a participating provider. I authorize the copy of my signature on this form to be as binding as the original. I agree that Coventry, its representatives, and any individuals or entities providing information to Coventry in good faith shall not be liable for any act or omission related to the evaluation or verification contained on this form. I further agree to notify Coventry in a timely manner of any change to the information requested on this form. Failure to update my information may result in termination as a network provider or in termination in the Workers' Compensation network product. I will retain a copy of this authorization for my own purposes.

I will continue to participate in these programs and will notify Coventry promptly if my status as a participating provider should change.

A properly executed version of this document containing your actual signature, delivered by facsimile or electronic mail, is as valid as an original.

Practitioner or Authorized Representative Signature:

_____ Date

Coventry Workers' Compensation Services

MPN Information Sheet

The following Coventry clients administer **Medical Provider Network** (MPN's) in California and you may be selected to or are currently participating in one or several of these MPN's. If you do not want to participate in any Coventry based MPNs (listed below by number) sponsored by the organizations, please strike through the highlighted MPN name and number and initial. Sample clients of the MPN are listed below each MPN name.

MPN #1 Select MPN

Sample Clients:

AICS
F.A. Richard
Fireman's Fund
Gallagher Bassett
Genex Services, Inc.
HCA Account Plan
Hortica
Matrix
Magna Carta/Public Service Mutual
MediCor Account Plan – FH

MPN #2 Primary MPN

Sample Clients:

Sedgwick
SRS Account Plan
Tokio Marine
Tri-Star
Zurich
Matrix
Genex

MPN #3 Coventry MPN

Sample Clients:

American Red Cross
Atlantic Mutual
Matrix
Bunch Account Plan
CNA National Account Plan
Gallagher Bassett
Guard Insurance
Safeco Strategic Account Plan
Southwest Airline
Tokio Marine
Genex

Sentry
SRS-Sedgwick
SUA
Tokio Marine
Tri-Star
Zurich

Custom MPNs

MPN #4 ACM MPN
MPN #5 AIG Primary MPN
MPN #6 AIG Select MPN
MPN #7 CIGA MPN
MPN #8 Everest Medical Provider Network
MPN #9 GBMCS MPN
MPN #10 GBMCS KOJ MPN
MPN #11 Gallagher Bassett Platinum MPN
MPN #12 JC Penney MPN
MPN #14 One Source MPN
MPN #15 Seabright Account Plan MPN
MPN #16 Sedgwick CMS MPN
MPN #17 Sedgwick CMS Extended MPN
MPN #18 TravNet MPN
MPN #19 Tribune MPN
MPN #20 UPS-Liberty Mutual MPN
MPN #21 Zenith Medical Provider Network
MPN #22 CCMSI/Custom Network

In order to confirm your participation in an MPN please visit one of the links below:

www.directprovider.com

Direct Provider is the Coventry Provider is a secure web portal that allows you to verify client listings and view MPN participation. For assistance with direct provider registration, please call 1-800-937-6824 to obtain log-in information and instructions.

OR

www.coventrywcs.com

Click on "Provider Tools"

Scroll down and click on "MPN Provider Information"

Click on "Name Search"

Search based on any of the 4 fields identified

Once provider is found click on provider name to review MPN participation

