

Falls Lake Fire & Casualty | StoneWood Insurance | Falls Lake National

Tennessee Claims Kit

By Mail: PO Box 97308 Raleigh, NC 27624-7308

Email: <u>Claims-Contact@FallsLakeIns.com</u>

Call: (866) 459-1349

Fax: (888) 629-5821

Attention: CLAIMS DEPARTMENT



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Welcome to Falls Lake Insurance Companies.

Thank you for choosing Falls Lake Insurance Companies for your Workers' Compensation needs. We are pleased to provide support regarding the filing of claims and other state-specific information to assist in claims reporting.

In the state of Tennessee, Employers are required to comply with state law regarding mandatory posting notices to be displayed in a conspicuous area of the workplace.

- Workers' Compensation Insurance Notice-English
- Workers' Compensation Insurance Notice-Spanish

The following Information for Injured Employees and Workers'
Compensation Information must also be provided to the injured worker upon report of a claim.

• Employer Responsibilities

We look forward to working with you.

One of the most essential parts of a Workers' Compensation claim is early reporting. This facilitates timely investigation, payment of benefits, and appropriate care for your injured worker.

A First Report of Injury (FROI) should be filed immediately after the employee is injured and/or when the Supervisor is notified. To file the FROI, Employers should complete the First Report of Injury form and contact Falls Lake Insurance Company.

Please refer to the FROI attachment below, where you will find a FROI that marks which data is required. If you report the claim via telephone, you do not need to fill out this form.

• First Report of Injury

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Helpful Links:

Tennessee Department of Labor

Frequently Asked Questions

A Beginner Guide to Tennessee Workers' Compensation-English

A Beginner Guide to Tennessee Workers' Compensation-Spanish

Choice of Physician

Tennessee requires that an injured worker be allowed to select from a Panel of Physicians provided on a form required by the state at the time of the injury. The Agreement between Employer/Employee Choice of Physician is below.

• Form C-42

Please follow the steps below to access the Coventry Provider portal. The list will be created and available to print and post in a place for all employees to see:

- Go to Coventry
- Select "Find A Doctor"
- Click "Batch" in the Tool Bar
- Enter the address of the employment location
- Click "Create Document"

Preferred Provider Organization Network (PPO):

Falls Lake Insurance has a PPO network available. Follow the instructions below to access the PPO Network:

- Log on to the website at: http://www.coventrywcs.com
- Click "Find a Provider"
- Search by Provider Address, Name, or Region
- Select the Distance, Provider Type, and Specialty
- Results can then be exported to a directory or Excel
- You can obtain a Map List or text message by selecting a specific provider

Claim Guidelines

- 1. Send your injured employee for medical treatment at a nearby urgent care or emergency room, and request a post-accident urine drug screen.
 - A post-accident screening is MANDATORY and must be performed on the date of the accident and/or date of notice.
- 2. Immediately notify and report any injury to Falls Lake Insurance Companies.
- 3. Please be prepared to provide the Claims Department with the following information:
 - Your information
 - Policy number
 - Telephone number
 - Company contact
 - Injured employee information
 - Name
 - Social Security number and date of birth
 - Address and telephone number
 - Date of hire and occupation at time of injury
 - Incident information
 - Date and time of the incident
 - Location of the incident (on or off your premises)
 - Supervisor of the injured employee
 - Witness names and person to whom incident was reported
 - Description of incident
 - Injured body part
 - Fatality (Y/N)
 - Name of treatment facility
 - Results from the MANDATORY post-accident screening
 - Work status
 - Was the injured employee paid in full for the date of incident?
 - Last day worked
 - Has the claimant returned to work (exact date of return, light/full duty)?
- 4. Stay in contact with your injured employee throughout their recovery. Continue to let them know that they are a valued employee and that you are eager for them to return to work.
- 5. Refer to state-specific posting requirement contained in your Policy Packet.





Prescription Program For Work-Related Injuries

Injured Worker		
No Cost	Step 1: Complete the information requested in the bottom portion below	
	Step 2: Present this form to your pharmacist along with the prescriptions for your work-related injury	
No Delay	First Script is available at over 70,000 pharmacies nationwide. To locate a nearby pharmacy, please call First Script Customer Service at 1-800-791-2080 .	
Feel Better Fast	Please note that First Script is valid only for medications prescribed to treat your compensable work-related injury. You or your group health insurer, are financially responsible for any other prescriptions. The workers' compensation carrier will determine the compensability of the claim.	

Pharmacy Instructions

The injured worker's employer participates in First Script, a pharmacy benefit program administered by **Express Scripts (ESI)**. Call the First Script Help Desk, 24 hours a day, 7 days a week, at **1-800-791-2080**. If the Member ID number is not listed on this form, please provide the claimant information indicated below to receive the Member ID #. Please note the ID number on the form and return to the injured worker. First Script claims are submitted electronically and electronic approval of the claim will be returned.

Pharmacy: You will not be required to submit any paperwork for this claim and payment is guaranteed for all electronically accepted claims

firstscript		
Pharmacy: Please use the following information to process all work-related injury prescriptions online.		
Name:		
Date of injury://	Rx PROGRAM ADMINISTERED BY: Express Scripts (ESI)	
Member ID:		
(Member ID # is generated at time of enrollment)	GROUP NUMBER: FSNCVTY	
Employer Name:	BIN NUMBER: 610014	
Location Code: CC 997662620		
Above information to be completed by injured worker or supervisor		

COVENTRY TELEHEALTH-NT24 To Speak with a Registered

Nurse Regarding a Work

Related Injury

Call: 1-855-474-0122

Service Available 24/7/365





Coventry TELEHEALTH Reference Guide

Information	Instructions
To speak with a registered nurse regarding a work-related injury, call: 1-855-474-0122	 If an employee has sustained a work-related injury that is not life, limb, or eyesight threatening call the Coventry Telehealth NT24 service and speak with a nurse 24/7 at 1-855-474-0122
Instructions for Managers regarding process with the Nurse	 Provide a secure area for the employee to speak with the nurse. Please inform the nurse of any language needs; bilingual nurses are available; Spanish and English. In other languages; the nurse will bring in an interpreter before speaking with the employee The nurse will ask questions to rule out an emergent situation. If the nurse does assess a life, limb, or eyesight threatening situation, they may request assistance in getting Emergency Medical Services. The nurse will complete an assessment and derive a medical care or self-care disposition.
	 The nurse will ask the employee to place the manager back on the phone. The nurse will communicate the instructions that were given to the employee.
After the employee speaks with the Nurse	Once the employee has completed their call: The manager will assist per company policy to ensure that the employee is able to follow the nurse's recommendation The manager will complete any internal reporting required per company policy
To get a prescription filled	If an employee needs to go for medical care, the nurse can offer to provide the phone number to the employee. Coventry returning people

to work, to play, to life

POST ACCIDENT DRUG TESTING IS REQUIRED

A post-accident drug and alcohol test is required of all reported Workers'
Compensation injuries **within 24 hours** of the employer's knowledge of the injury.

THIS PROCEDURE IS NOT OPTIONAL.

NON-COMPLIANCE MAY RESULT IN THE CANCELLATION OF YOUR POLICY.

Refer to your policy language.



Keys to Manage Claims

- Report Injuries within 24 hours
 - Reduces cost
 - Increases productivity



- Use Falls Lake's managed care providers
 - Find at <u>www.coventrywcs.com</u>
 - Click "Find a Provider"
- Encourage early return to work
 - Provide options within the first mont
 - Increases Success in 95% of cases

Benefits to Early Reporting

Minimizes fraud



• Faster healing and return to work



• Expedited claims handling



Reduced cost of claims



Less likely to involve attorney



Return to Work Steps

- Work with medical provider and Falls Lake claims specialist to plan your employee's return to work.
- Communicate regularly with your employee to show concern and to encourage recovery.
- Provide light-duty work as a bridge to resuming full responsibilities.

How Claims Cost Increase

 Workers' Comp claims reported >7 days after injury average \$5,000+ more per claim



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Falls Lake Medical Cost Containment



About the Program

- Custom designed medical management and cost-containment program
- Partnership with Coventry and other national medical vendors

Program Design

- National Medical Bill Review
- National PPO Network
- Utilization Review
- Durable Medical Equipment
- Pharmacy Benefit Management
- Onsite Case Management
- Telephonic Case Management
- 24/7 Nurse Triage Program

Pharmacy Benefits Program Design

- 24/7 Customer Care
- Pharmacy Drug Card
- First-Fill Benefits
- Mail-Order Benefits
- Proactive Narcotic Monitoring

TeleHealth-How It Works

- Nurse Triage program for injured workers
- Connects employee with trained RNs
- Network of panel providers
- Administered by Falls Lake and Coventry
- · Linked to First Report of Injury intake
- Spanish and English speaking RNs



The Benefits Are Clear

- Fewer emergency room visits
- Immediate direction of care
- Reduced lag time
- Reporting in hours
- Around the clock availability
- Faster recoveries
- Early return to work
- Reduced claims cost