

STATE COMPENSATION INSURANCE FUND

March 3, 2022

Nelson Flores
2107 N Broadway
Ste 207
Santa Ana CA 92706-2625

Claim Number: 06675256
Employee: Adel Hanna
Tracking#: E000013137484
Date of Injury: 11/12/2021
Adjuster Name: Ruth Wardschenk

Dear Medical Provider

Your request for medical treatment dated February 1, 2022 for Adel Hanna was received on February 1, 2022 and has been reviewed in accordance with State Fund's Utilization Review Program:

<u>Medical Treatment</u>	<u>Treatment ID</u>	<u>Req Qty.</u>	<u>Auth Qty.</u>	<u>Interval (Freq.)</u>	<u>Per Period</u>	<u>Decision</u>	<u>Decision Date</u>
Office Consultation, RFA 2/1/22, Rx 1/10/22	E000012624835	1	1			Approved	03/03/2022
Psychological testing, One Unit, (96130), RFA 2/1/22, Rx 1/10/22	E000012624836	1	1			Approved	03/03/2022
Psych testing, Six Units, (96131), RFA 2/1/22, Rx 1/10/22	E000012624837	6	6			Approved	03/03/2022
Psychological testing, One Unit, (96136), RFA 2/1/22, Rx 1/10/22	E000012624838	1	1			Approved	03/03/2022
Psychological testing, Two Units, (96137), RFA 2/1/22, Rx 1/10/22	E000012624839	2	2			Approved	03/03/2022

Please note: If the treatment decision is "Referred", we are still evaluating the request and you will be notified when a decision has been made. "Interval" in the above column describes number of treatments authorized per period.

For dates of injury occurring on or after January 1, 2018: Emergency treatment services and medical treatment services for accepted body parts or conditions within 30 days following the initial date of injury are authorized without prospective utilization review, with exceptions as outlined in the Labor Code and/or Regulations. The treatment must be provided by: (1) a member of the medical provider network (MPN), (2) a predesignated physician, or (3) by a physician selected by the employer. The requested treatment must be consistent with the medical treatment utilization schedule (MTUS). This is in accordance with Labor Code § 4610 (b).

When it is necessary to refer an injured employee to another medical provider or facility, referrals shall only be made to medical providers and facilities that are participants in the State Fund MPN and listed on the State Fund MPN website at <http://www.statefundca.com/sfmpn>. Medical Access Assistants are available to help you locate MPN providers. They are available to assist you, in English and Spanish, from 7 a.m. to 8 p.m. Monday through Saturday. You may contact our



Medical Access Assistants through our toll-free phone number (888) 782-8338, fax (800) 371-5905 or by e-mail at statefundMPNMAA@scif.com.

All authorized ancillary services listed below, should be requested through Healthesystems (877) 287-7728.

- * Durable Medical Equipment (DME)
- * Medically Necessary Transportation
- Home Health Care – Coordination of IV therapy, medical supplies, and
- * respiratory services as well as coordination of services provided by Companions, Nurses, Home Health Aides, and Medical Social Workers
- * Physical Therapy – Physical therapy, occupational therapy, speech therapy, certified hand therapy, aquatic therapy, and massage therapy

Authorization of medication does not constitute approval to dispense medications from the physician's office. All medication should be filled by an Express Scripts Network pharmacy. Physicians or the injured employee can call (888) 201-5389 for assistance in locating an Express Scripts Network pharmacy.

State Fund's preferred method for receipt of requests for authorization is by fax. State Fund will not accept requests for authorization by e-mail.

Certifications are valid for 180 days from the date of this notice.

Any payments made will be reimbursed per the prevailing California Official Medical Fee Schedule (OMFS), or Contractual Agreement. Payment is subject to applicable statutes and regulations, including, but not limited to, Labor Code §139.3 and 139.31 and California Business and Professions codes.

For claims on *delayed status*, payment may also be limited to the criteria as mentioned in Labor Code §5402(c), subject to the \$10,000 cap.

PLEASE NOTE THE ABOVE CLAIM NUMBER ON ALL CORRESPONDENCE OR BILLING.

Sincerely

Rosanne A. Aranda-Kofmehl

Rosanne A. Aranda-Kofmehl
For Ruth Wardschenk, of this claim
(951) 697-7345

cc: Adel Hanna, 5688 Cousins Pl, Rancho Cucamonga, CA 91737-2156
Natalia Foley, 751 S Weir Canyon Rd, Ste 157-455, Anaheim, CA 92808-9280

2 5678036 00000190 002 003 06675256



IMPORTANT INFORMATION FROM STATE FUND

Effective **November 1, 2015**, all authorized ancillary service requests for prescription drugs, durable medical equipment (DME) and supplies, interpretation, and transportation, must be supplied only through the State Fund-approved ancillary network.

Prescription Drugs should be obtained through Express Scripts, Inc. (ESI), Telephone: (888) 201-5389.

DME, interpretation, and transportation should be obtained through HealtheSystems, Telephone: (877) 287-7728. HealtheSystems became State Fund's ancillary benefit manager on January 1, 2017.

Authorization of medication does not constitute approval to dispense medications from the physician's office. All medication should be filled by an Express Scripts Network pharmacy. Physicians or injured employees can call (888) 201-5389 for assistance in locating an Express Scripts Network Pharmacy.

Medical bills with dates of service November 1, 2015 and after, that are submitted for the above services by non-State Fund approved ancillary providers will **not** be processed for payment.

Effective **September 1, 2016**, all authorized ancillary service requests for the following services must be supplied only through the State Fund-approved ancillary network:

Home Health Care – Coordination of IV therapy, medical supplies, and respiratory services as well as coordination of services provided by Companions, Nurses, Home Health Aides, and Medical Social Workers

Physical Therapy – Physical therapy, occupational therapy, speech therapy, certified hand therapy, aquatic therapy, and massage therapy.

Home health care and physical therapy should be obtained through Healthesystems. Healthesystems became State Fund's ancillary benefit manager on January 1, 2017.

Medical bills with dates of service September 1, 2016 and after, that are submitted for these services by non-State Fund approved ancillary providers will **not** be processed for payment.

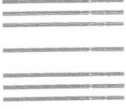
CCR Section 9767.3(d)(8)(I) allows an insurer, employer, or entity to include ancillary services in its medical provider network and contract with ancillary service providers to provide services and goods.

LC Section 4600.2(a) allows insurers and self-insured employers to contract with a pharmacy benefit network to provide medicines and medical supplies.

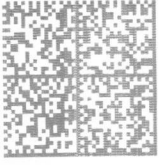


STATE
COMPENSATION
INSURANCE
FUND

VACAVILLE CLAIMS PROCESSING CENTER
PO BOX 3171
SUJISUN CITY, CA 94585-6171



PRESORTED
FIRST CLASS



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US POSTAGE
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TQ

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ANAHEIM CA 92808-9280

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