

# New York Recommendation of Care (ROC) Highlights



Note: The foregoing information provides a summary overview of certain statutory and/or regulatory provisions. This summary is not comprehensive and does not in any way constitute legal advice. Review of the applicable statutes and regulations in their entirety may be necessary.

## Definition:

Recommendation of a designated network or health care provider(s) is defined as actively endorsing or promoting the use of a designated network or health care provider(s) for the treatment of an injured employee.

## Program Benefits:

- Carrier/employer may recommend network to all injured workers;
- PPO discounts available on all claims where ROC rules have been followed;
- ROC program may be used in non-certified counties; and
- Existence of carrier/network contract is considered recommendation of care even if not actively recommending.

## Program Requirements:

- Contract Requirement - Network Access Agreement directly between MetraComp and insurance carrier and/or self-insured employer.
- Active Endorsement - Employer or carrier is considered to have actively endorsed the use of a designated network or provider if:
  - A contract has been signed with a network or provider with respect to the treatment of employees' work-related injuries/illnesses, even if not actively recommending care;
  - The use of a specified network or provider is promoted through employee handouts, postings or other written communication; OR
  - A verbal, more passive recommendation is made.
- Employee Communication Requirements - Any employee written materials related to the use of a recommended network or provider MUST clearly indicate:
  - The use of the specified network or providers is strictly voluntary;
  - That employees may obtain a list of authorized health care providers from the Workers' Compensation Board; and
  - That employees may choose or change their provider at will without jeopardizing medical or indemnity benefits.
- Employee Communications COULD Include:
  - Network directory to the employee for review/choice of treating provider, at the employer site; and/or
  - Posting of the MetraComp network's toll-free phone number; and/or
  - Posting of a panel of recommended providers; and/or
  - Letter of introduction to the employee explaining the employer's/carrier's participation in the recommendation of care (ROC) program.
- EMPLOYEE CONSENT FORMS- C-3.1:
  - By NYS law and regulation, any employee who elects the use of a designated network or provider based on the recommendation of an employer/carrier MUST sign a prescribed consent form (WCB C-3.1) indicating that he/she voluntarily elects to receive treatment from the recommended network or provider;
  - Must be delivered at time of injury or after the injury occurs;

- The employer assumes the responsibility for providing the C-3.1 to the employee for signature at the time of, or after, the injury;
  - Must be signed for each new injury, even if the employee is the same;
  - Any employer whose employees have signed the consent form must both maintain a record of the signed, original form and provide a copy of the signed form to each employee who has signed such consent;
  - May be provided to the employee by a designated entity;
  - The adjuster or health care entity should document the employer's delivery of the C-3.1 form to the injured employee and subsequent receipt of the signed form; and
  - Must be retained (original) in employee file for 18 years (copy provided to employee).
- Quarterly Reporting must include:
    - A complete list of employers utilizing the ROC program.

**\*\*\*For additional information on the rules and regulations for ROC in the state of NY, please visit the following website:**

- <http://www.wcb.state.ny.us>