

TEXAS WORKERS COMPENSATION HEALTH CARE NETWORK PREMIUM CREDIT APPLICATION

Under the provisions of House Bill 7, you may agree to utilize a health care network certified by the Texas Department of Insurance and in return, receive a premium credit. In exchange for directing your injured employees to the certified health care network named below for treatment, you will be eligible to receive a premium credit. This credit will be applicable as long as you comply with the rules published by the Texas Department of Insurance and continue to utilize the services of the Texas Health Care Network. Employers are required to provide all their employees with the terms and conditions for obtaining health care through the network and obtaining the employee's signature on an acknowledgement form. Workers who live within a network service area are required to choose their treating doctor from a list of network providers. If the injured worker does not live within a network service area, he or she may choose a treating doctor from the approved doctor list. You may be required, at first notice of injury, to provide to CNA a copy of the injured employee's acknowledgement form.

An insured employer who fails to comply with this agreement may have its premium credit terminated. In the event of noncompliance, thirty days prior written notice of the proposed premium credit termination shall be delivered or mailed to the insured employer.

The certified network is Coventry Workers' Comp Network

Signature of Employer's Authorized Representative: _____

Title: _____ Date: _____

Insured Employer: _____

Employer Address: _____

Telephone Number: _____

Policy Number: _____

Policy Effective Date: _____

Return the completed, signed application to your CNA independent agent or broker.

