

and diseases by a physician, chiropractor, or acupuncturist of his or her own choice or at a facility of his or her own choice within a reasonable geographic area if the employee or his or her physician, chiropractor, acupuncturist, or other agent notifies his or her employer in writing only after 180 days from the date the injury was reported, or upon the date of contract renewal or open enrollment of the health care organization, whichever occurs first, but in no case until 90 days from the date the injury was reported.

~~—(3) For purposes of this subdivision, an employer shall be deemed to provide health care coverage for nonoccupational injuries and illnesses if the employer pays more than one-half the costs of the coverage, or if the plan is established pursuant to collective bargaining.—(d) An employee and employer may agree to other forms of therapy pursuant to Section 3209.7.~~

~~—(e) An employee enrolled in a health care organization shall have the right to no less than one change of physician on request, and shall be given a choice of physicians affiliated with the health care organization. The health care organization shall provide the employee a choice of participating physicians within five days of receiving a request. In addition, the employee shall have the right to a second opinion from a participating physician on a matter pertaining to diagnosis or treatment from a participating physician.~~

~~—(f) Nothing in this section or Section 4600.5 shall be construed to prohibit a self-insured employer, a group of self-insured employers, or insurer from engaging in any activities permitted by Section 4600.~~

~~—(g) Notwithstanding subdivision (e), in the event that the employer, group of employers, or the employer's workers' compensation insurer no longer contracts with the health care organization that has been treating an injured employee, the employee may continue treatment provided or arranged by the health care organization. If the employee does not choose to continue treatment by the health care organization, the employer may control the employee's treatment for 30 days from the date the injury was reported. After that period, the employee may be treated by a physician of his or her own choice or at a facility of his or her own choice within a reasonable geographic area.~~

SEC. 24. Section 4600.3 is added to the Labor Code, to read:

4600.3. (a) This section shall only apply to employees who are eligible to receive health care coverage for nonoccupational injuries or illnesses provided in whole or part by their employer.

(b) (1) A self-insured employer, group of self-insured employers, or the insurer of an employer may contract with a health care organization certified pursuant to Section 4600.5 for health care services required by this article to be provided to injured employees, and those employees who are subject to the contract shall receive medical services in the manner prescribed in the contract. An employer may contract for health care coverage for nonoccupational injuries or illnesses with the same entity that provides medical treatment required by this article. The employee shall receive medical treatment in the manner prescribed in the contract.

(2) The employee may choose to be treated by a personal physician prior to the injury, in which case, the physician shall be chosen from the list of medical providers authorized by the health care organization.

(3) Each contract described in paragraph (1) shall comply with the certification standards provided in Section 4600.5, and shall provide all medically necessary treatment consistent with the Knox-Keene Health Care Service Plan of 1975 (Chapter 2.2 (commencing with Section 1340) of Division 2 of the Health and Safety Code), which shall be presumed to be treatment reasonably required to cure and relieve the injured worker from the effects of his or her injury. This presumption affects the burden of proof.

Notwithstanding any other provision of law, all services provided by the health care organization, including those provided pursuant to the organization's utilization review and independent medical review, shall also be presumed to be treatment reasonably required to cure and relieve the injured worker from the effects of his or her injury. This presumption affects the burden of proof.

(4) Notwithstanding any other provision of this section, an employee may receive immediate emergency medical treatment that is compensable from a medical service or health care provider who is not a member of the health care organization.

(5) Notwithstanding any provision of this article, no employee shall be required to pay any deductible, copayment, or any share of the premium for medical treatment provided for occupational injuries or illnesses pursuant to a contract entered into pursuant to this section.

(c) An employee enrolled in a health care organization shall have the right to no less than one change of physician on request and for this purpose shall choose from physicians affiliated with the health care organization. The health care organization shall provide the employee with a choice of these participating physicians within five days of receiving a request. In addition, the employee shall have the right to a second opinion from a participating physician on a matter pertaining to diagnosis or treatment from a participating physician.

(d) Nothing in this section or Section 4600.5 shall be construed to prohibit a self-insured employer, a group of self-insured employers, or insurer from engaging in any activities permitted by Section 4600.

(e) Notwithstanding subdivision (c), in the event that the employer, group of employers, or the employer's workers' compensation insurer no longer contracts with the health care organization that has been treating an injured employee, the employee may continue treatment provided or arranged by the health care organization for an additional 90 days, at the employer's expense.

SEC. 25. Section 4600.31 is added to the Labor Code, to read:

4600.31. (a) (1) A self-insured employer, group of self-insured employers, or the insurer of an employer may contract with a health care organization certified pursuant to Section 4600.5 for health care services required by this article to be provided to injured employees, and those employees who are subject to the contract shall receive medical services in the manner prescribed in the contract. The employee shall receive medical treatment in the manner prescribed in the contract that is consistent with Section 4600.

(2) The employee may choose to be treated by a personal physician prior to the injury, in which case, the physician shall be