Here are some quick tips for a successful HCN roll-out with your employees.

**Getting Started:**

1. Distribute Notice of Network Requirements (Employee Notice, Employee Acknowledgment Form, and the HCN Network Service Area Map) to your employees. If you do not have these forms, here is the link: [http://www.travelers.com/txhcnc](http://www.travelers.com/txhcnc)

   Methods for employer communication and distribution of the required materials could include but are not limited to mass e-mail communication, payroll inserts, employee safety meetings, new hire packets, use of vendor, etc.

2. Document the method used to distribute the information to each employee. This is essential for verification if the Texas Department of Insurance ("TDI") requests proof of distribution of the HCN enrollment information. It is mandatory that each employee is provided the information. An employee may refuse to sign the Acknowledgment Form, as long as the employee refusal is documented.

   A chart like the sample below could be used:

<table>
<thead>
<tr>
<th>Employee Name</th>
<th>Method of Communication</th>
<th>Date Communicated</th>
<th>Employee Response</th>
</tr>
</thead>
<tbody>
<tr>
<td>John Doe</td>
<td>Employee Meeting</td>
<td>10/1/2011</td>
<td>Signed Acknowledgment</td>
</tr>
<tr>
<td>Suzy Smith</td>
<td>Employee Meeting</td>
<td>10/1/2011</td>
<td>Refused to sign</td>
</tr>
</tbody>
</table>

3. For your records, we recommend that the employee return the original signed copy of the Employee Acknowledgment Form and you maintain it with the individual’s personnel records.

4. Post the Notice of Network Requirements in a **prominently visible** area in each of your facilities. The Notice of Network Requirements must be in English, Spanish, and any other language common to 10% or more of your employees.

5. Return the Employee Training Verification Form to:

   Travelers HCN Coordinator
   P.O. Box 660456
   Dallas, TX 75266-0456
   Email: TEXASHCN@travelers.com
   Phone: 866-245-6472
   Fax: 800-397-0794

**What to do when a workplace injury occurs:**

1. Give the Notice of Network Requirements to the injured employee again as a reminder of the HCN requirements.

2. Report the injury to Travelers.

3. Remind the employee that Network Providers must be used for treatment of the work-related illness or injury. If an employee requests a paper listing of the Network directory, obtain a copy from the Travelers web site (link above) or contact Travelers to assist.

4. Travelers will facilitate further claim handling procedures using Claim Professionals and Certified Medical Case Managers.