



West Chester University
 Offices of Human Resources
 201 Carter Drive, Suite 100
 West Chester, PA 19383
 610-436-2830
 fax: 610-436-3464

WORKERS' COMPENSATION EMPLOYEE NOTIFICATION

Revised: 3/3/08

IN THE EVENT OF A WORK INJURY, IT IS YOUR RESPONSIBILITY TO IMMEDIATELY REPORT THE INJURY TO YOUR EMPLOYER/SUPERVISOR.

If you are injured while at work, your employer has arranged for payment of your medical care with:
 WEST CHESTER UNIVERSITY OF PASSHE /INSERVCO
 P.O. BOX 3899, HARRISBURG, PA 17105-3899
 1-800-356-0438

IN ACCORDANCE WITH THE PENNSYLVANIA WORKERS' COMPENSATION ACT, YOU MUST CHOOSE A MEDICAL PROVIDER FROM THE LIST BELOW:

Specialty	Provider	Address	Phone
Occupational & Environmental Medicine	The Occupational Health Center Dr. Donze Dr. Chalfin Dr. Stroz Dr. Zeiner Dr. Blydenburgh	915 Old Fern Hill Road, Building A. Ste.3 West Chester, PA 19380 &	610-738-2450
		830 West Cypress Street Kennett Square, PA 19348	610-444-6214
Occupational & Environmental Medicine	Med Center 100 Occupational Health & Urgent Care Edward O'Dell, D.O. Marilyn Krch, M.D. Theresa Cedzo, PA-C	625 North Pottstown Pike, Exton, PA 19341	610-903-0640
Orthopedics/ Physiatrist	Chester County Orthopedic Associates Dr. Huxster Dr. Simmons Dr. Ziegler Dr. Towsen Dr. Michener Dr. Schaeffer	915 Old Fern Hill Road, Building A. Ste.1 West Chester, PA 19380 &	610-692-6280
		402 McFarlan Road Ste. 101 Kennett Square, PA 19348	610-444-1344
Chiropractic	Chamberlin Chiropractic, Inc Jeffrey Chamberlin, D.C.	1223 West Chester Pike West Chester, PA 19382	610-429-4920
Physical Therapy	Pro Physical Therapy	42 East Street Road West Chester, PA 19382 &	610-399-8600
		900 West Baltimore Pike #103 West Grove, PA 19390	610-869-2200
Physical Therapy	Center for Physical Therapy & Sports Medicine, Specialty	915 Old Fern Hill Road, Building A. Ste.4 West Chester, PA 19380 &	610-738-2480
		830 West Cypress Street Kennett Square, PA 19348 &	610-444-6242
		700 West Lincoln Highway Exton, PA 19341	610-518-5845
Neurology	Chester County Neurology Dr. Seth Haplea, M.D.	795 East Marshall Street West Chester, PA 19380 &	610-345-1080
		689 Unionville Road Kennett Square, PA 19348 &	
		1011 West Baltimore Pike West Grove, PA 19390	
General Surgery	Surgical Specialists, P.C. Dr. Rhoads Dr. Scott Dr. Trajtenberg Dr. Witterholt Dr. Fukuchi	915 Old Fern Hill Road Building B, Ste. 201 West Chester, PA 19380	610-436-6696

WORKERS' COMPENSATION EMPLOYEE NOTIFICATION

- ◆ Your benefits could be delayed or denied if you do not notify your employer/supervisor immediately. Your Workers' Compensation Coordinator is located within the Human Resources Office @ 201 Carter Drive, West Chester, PA 19383, (610) 436-2830.
- ◆ Benefits are required to be paid by your employer when self-insured, or through insurance provided by your employer. Your employer is required to post the name of the company responsible for paying workers' compensation benefits at its primary place of business and its sites of employment in a prominent and easily accessible place, including, without limitation, areas used for the treatment of injured employees or for the administration of first aid.

MEDICAL TREATMENT: DURING THE FIRST 90 DAYS

- ◆ The employee has the duty to obtain treatment for work-related injuries and illnesses from one or more of the designated healthcare providers for 90 days from the date of the first visit to a designated provider.
- ◆ The employee has the right to have all reasonable medical supplies and treatment related to the injury paid for by the employer as long as the treatment is obtained from a designated provider during the 90-day period.
- ◆ The employee has the right, during this 90-day period, to switch from one health care provider on the list to another provider on the list, and that all the treatment shall be paid for by the employer.
- ◆ The employee has the right to seek treatment from a referral provider if the employee is referred to him by a designated provider and the employer shall pay for the treatment rendered by the referral provider.
- ◆ The employee has the right to seek emergency medical treatment from any provider, but that subsequent non-emergency treatment shall be by a designated provider for the remainder of the 90-day period.
- ◆ The employee has the right to seek treatment or medical consultation from a non-designated provider during the 90-day period, but that these services shall be at the employee's expense for the applicable 90 days.
- ◆ The employee has the right to seek treatment from any health care provider after the 90-day period has ended, and that the treatment shall be paid for by the employer, if it is reasonable and necessary.
- ◆ The employee has the duty to notify the employer of treatment by a nondesignated provider within 5 days of the first visit to that provider. The employer may not be required to pay for treatment rendered by a nondesignated provider prior to receiving this notification. However, the employer shall pay for these services once notified, unless the treatment is found to be unreasonable by a URO, under Subchapter C (related to medical treatment review)
- ◆ The employee has the right to seek an additional opinion from any health care provider of the employee's choice when a designated provider prescribes invasive surgery for the employee. If the additional opinion differs from the opinion of the designated provider and the additional opinion provides a specific and detailed course of treatment, the employee shall determine which course of treatment to follow. If the employee opts to follow the course of treatment outlined by the additional opinion, the treatment shall be performed by one of the health care providers on the employer's designated list for 90 days from the date of the first visit to the provider of the additional opinion.

The following information is being provided to you in compliance with 34 Pa. Code §121.3b.

- ◆ The workers' compensation law provides wage loss and medical benefits to employee who cannot work, or who need medical care, because of a work-related injury.
- ◆ Benefits are required to be paid by your employer when self-insured, or through insurance provided by your employer. Your employer is required to post the name of the company responsible for paying worker's compensation benefits at its primary place of business and its sites of employment in a prominent and easily accessible place, including, without limitation, areas used for the treatment of injured employees or for the administration of first aid.
- ◆ You should report immediately any injury or work-related illness to your employer.
- ◆ Your benefits could be delayed or denied if you do not notify your employer immediately.
- ◆ If your claim is denied by your employer, you have the right to request a hearing before a workers' compensation judge.
- ◆ The Bureau of Workers' Compensation cannot provide legal advice. However, you may contact the Bureau of Workers' compensation for additional general information at: Bureau of Workers' Compensation, 1171 South Cameron Street, Room 103, Harrisburg, PA 17104-2501; telephone number within PA (800) 482-2383; telephone number outside of this Commonwealth (717)772-4447; TTY (800) 362-4228 (for hearing and speech impaired only); www.state.pa.us, PA Keyword: workers comp.

Your signature on this form indicates that you have been informed of and you understand these rights and duties. If you have questions, be sure you have your rights and duties explained to you before signing this form.

Employee: _____

Date: _____

Employer Representative: _____

Date: _____