

NOTICE: MEDICAL TREATMENT FOR YOUR WORK INJURY OR OCCUPATIONAL ILLNESS

Your employer has selected a list of 6 or more physicians and other health care providers who are available to treat your work-related injuries and illnesses during the first 90 days of treatment. This list is posted at _____ for you to view. Also, you may get a copy of this list from _____.

If you are injured at work or suffer an occupational illness, you have certain legal RIGHTS and DUTIES under Section 306(f.1)(1)(i) of the Workers' Compensation Act regarding your medical treatment. These rights and duties are summarized below.

MEDICAL TREATMENT: DURING THE FIRST 90 DAYS

- ☛ You have the RIGHT to receive reasonable and necessary medical treatment for your work injury or occupational illness. Your employer must pay for the treatment, as long as the treatment is by one of the listed providers.
- ☛ You have the RIGHT to choose which of the listed providers will treat you for your work injury or illness.
- ☛ You have the RIGHT to switch among any of the listed providers when you receive treatment; and if a listed provider refers you to a provider not on your employer's list, you have the RIGHT to receive treatment from the referral provider.
- ☛ You have the RIGHT to receive emergency medical treatment from any provider. However, non-emergency treatment must be given by a listed provider.
- ☛ If a listed provider prescribes surgery for you, you have the RIGHT to receive a second opinion from any provider of your choice. If that opinion is different from the opinion of the listed provider, you have the RIGHT to choose which course of treatment to follow. If you choose the treatment prescribed in the second opinion, you must receive the treatment from a listed provider for a period of 90 days after the date of your visit to the provider of the second opinion.
- ☛ You have the DUTY to visit one or more of the listed providers for the first 90 days of treatment for your work injury or illness if you expect your employer to pay for the medical treatment you receive.
- ☛ If you seek treatment for your work injury or illness from a provider who is not on the list, your employer may not have to pay for this medical treatment during this 90-day period. Therefore, you should talk to your employer before seeking treatment from a provider who is not on the list.

IMPORTANT: The requirements your employer must meet to have a valid list of at least 6 providers are shown on the reverse side of this form. If the list does not meet these requirements, it is not a valid list, and you have the right to seek medical treatment for your work injury or occupational illness from any health care provider of your choice.

MEDICAL TREATMENT: AFTER THE FIRST 90 DAYS

- ☛ You have the RIGHT to receive treatment from any physician or other health care provider of your choice, whether or not they are listed by your employer. Your employer must pay for this treatment, as long as it is reasonable and necessary for your work injury or occupational illness and has been properly documented by the physician or other health care provider.
- ☛ You have the DUTY to notify your employer if you receive treatment from a physician or other health care provider who is not listed by your employer. You must notify your employer within five days of the first visit to any provider who is not on your employer's list. The employer may not be required to pay for treatment received until you have given this notice.

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.**

I HAVE BEEN INFORMED OF MY MEDICAL TREATMENT RIGHTS AND DUTIES WITH REGARD TO WORK-RELATED INJURIES AND OCCUPATIONAL ILLNESSES. THIS NOTICE WAS PRESENTED TO ME AT (check one):

TIME OF HIRE

WHEN I WAS INJURED

OTHER

EMPLOYEE: _____ DATE: _____

EMPLOYER REPRESENTATIVE: _____ DATE: _____

(OVER)

**REQUIREMENTS FOR EMPLOYER'S LIST OF
HEALTH CARE PROVIDERS**

1. There must be at least 6 health care providers on the list, but there may be more than 6 listed.
2. At least 3 of the health care providers on the list must be physicians.
3. No more than 4 of the health care providers on the list may be coordinated care organizations (CCOs).
4. The names, addresses, phone numbers and areas of medical specialties of all health care providers must be included on the list.
5. The health care providers on the list must be geographically accessible and must have specialties that are appropriate based on the anticipated work-related medical problems of the employees.
6. Your employer must specify on the list if any of the health care providers on the list are employed, owned or controlled by your employer or its workers' compensation insurance company.

NOTE: Your employer's list of health care providers must meet all of the above requirements. If the list does not meet all of these requirements, you do not have to choose a provider from the list. Instead, you have the right to seek medical treatment with any health care provider of your choice.

BUREAU OF WORKERS' COMPENSATION
HELPLINE INFORMATION CENTER
1-800-482-2383 (long-distance calls inside PA)
(717) 772-4447 (local and calls outside PA)

HERITAGE VALLEY BUSINESSCARE
*A Program of The Medical Center, Beaver, Sewickley Valley Hospital
and Tri State Medical Group*

**COMMUNITY COLLEGE OF BEAVER COUNTY
PHYSICIAN PANEL**

Emergency Services

The Medical Center, Beaver, PA
Emergency Patient Center
1000 Dutch Ridge Road
Beaver, PA 15009
724-728-7110

Emergency Services

Sewickley Valley Hospital
Emergency Department
720 Blackburn Road
Sewickley, PA 15143
412-749-7076

****INITIAL TREATMENT FOR WORK-RELATED INJURIES MUST BE WITH THE PROVIDERS IN BOLD PRINT LISTED BELOW, UNLESS YOU ARE DIRECTED TO THE EMERGENCY ROOM. ALL FOLLOW-UP CARE OR REFERRALS TO SPECIALTY PHYSICIANS PROVIDED BY:**

Primary Occupational Medicine Providers

Heritage Valley BusinessCare
Chippewa Medical Arts Building
2620 Constitution Boulevard
Beaver Falls, PA 15010
724-847-4417

Heritage Valley BusinessCare
Hopewell Industrial Park
5000 Industrial Boulevard
Aliquippa, PA 15001
724-857-4004

Heritage Valley BusinessCare
10475 Perry Highway
Wexford, PA 15090
724-934-1655

Orthopedics

Association of Specialty Physicians
Beaver Medical Commons
1030 Beaver Hollow Road
Beaver, PA 15009
724-775-4242
Drs. D.Yakish, A.Kaye, R.Hall, J.Lehman, B.Hirsch

Ophthalmology

Daniel Nadler, MD
1200 Sharon Road
Beaver, PA 15009
724-774-5920
Drs. Olbum, Bezier, Reed

Rehabilitation: Physical/Occupational Therapy*

Signature Rehab
5000 Industrial Boulevard
Aliquippa, PA 15009
724-857-4000
(Four locations available – See attached)

Neurology

Valley Neurological Associates
3452 Brodhead Road
Monaca, PA 15061
724-775-8801
Drs. Carey, Dugan, Reznick, Altman

Ear, Nose & Throat

Michael Bell, MD
337 State Street
Beaver, PA 15009
724-775-6602

Ear, Nose & Throat

David Rafalko, MD
1301 Riverside Drive
Bridgewater, PA 15009
724-728-7800

General Surgery

Association of Specialty Physicians
1300 Fifth Street Extension
Beaver, PA 15009
724-775-2112
Drs. Papi, Meuser & Herald