

COUNTY OF ERIE

NOTICE TO ALL EMPLOYEES

REMEMBER, IT IS IMPORTANT TO TELL YOUR EMPLOYER ABOUT YOUR INJURY

SECTION 306(f) OF THE PENNSYLVANIA WORKERS' COMPENSATION ACT PROVIDES FOR THE PAYMENT OF MEDICAL TREATMENT FOR WORK-RELATED INJURIES. THE INFORMATION BELOW DESCRIBES YOUR RESPONSIBILITIES IF YOU ARE INJURED. **PLEASE READ CAREFULLY.**

YOUR EMPLOYER HAS PROVIDED FOR THE PAYMENT OF BENEFITS UNDER THE WORKERS' COMPENSATION ACT OF PENNSYLVANIA WITH **PA COUNTIES WC TRUST.**

IN CASE OF WORK-RELATED INJURY OR DISEASE:

1. IF YOU SUFFER A WORK-RELATED INJURY, YOUR EMPLOYER OR ITS INSURANCE COMPANY MUST PAY FOR REASONABLE SURGICAL AND MEDICAL SERVICES AND SUPPLIES, ORTHOPEDIC APPLIANCES AND PROSTHESES, INCLUDING TRAINING IN THEIR USE.
2. IN ORDER TO ENSURE THAT YOUR MEDICAL TREATMENT WILL BE PAID BY YOUR EMPLOYER OR THE INSURANCE COMPANY, YOU MUST SELECT FROM THE PHYSICIANS OR OTHER HEALTH CARE PROVIDERS LISTED BELOW:

<u>DESIGNATED HEALTH CARE PROVIDER</u>	<u>TELEPHONE</u>	<u>SPECIALTY</u>
THE OCCUPATIONAL HEALTH CENTER KATHRYN BUEGE, D.O. 1910 SASSAFRAS ST., ERIE, PA 16502	452-7879	OCCUPATIONAL HEALTH
PRIORITY CARE DONALD VISCUSI, M.D. 3010 WEST LAKE ROAD, ERIE, PA 16505	833-2385	OCCUPATIONAL MEDICINE
CRAIG COSTELLO, D.C. 2556 WEST 12 STREET, ERIE, PA 16505	835-9020	CHIROPRACTOR
JOHN KOZIK, D.C. 8800 PERRY HIGHWAY, ERIE, PA 16509 1055 E. MAIN ST., CORRY, PA 16407	864-8300 664-2216	CHIROPRACTOR
CHARLES HEWETT, D.C. 260 EAST GORE ROAD, ERIE, PA 16509	825-0851	CHIROPRACTOR
DAVID BABINS, M.D. 100 PEACH STREET, SUITE 400 ERIE, PA 16507	454-8287	ORTHOPEDICS
HAND, MICROSURGERY & RECONSTRUCTION JOHN HOOD, M.D. MARY BETH CERMAK, M.D. JOHN LUBAHN, M.D. 300 STATE STREET, ERIE, PA 16506	456-6022	ORTHOPEDIC HAND SPECIALISTS
HOWARD LEVIN, M.D. 2640 ZUCK ROAD, ERIE, PA 16506	838-9555	OPHTHALMOLOGY
ADVANCED REHABILITATION 3010 WEST LAKE ROAD, ERIE, PA 4500 PINE AVENUE, ERIE, PA	833-2022 825-8900	PHYSICAL THERAPY
REHAB SOLUTIONS 1910 SASSAFRAS ST., ERIE, PA 16502 3822 COLONIAL AVENUE, ERIE, PA 16506	452-5231 833-7249	PHYSICAL THERAPY
JOSEPH KOHLER, III, PC 219 WEST 7 STREET, ERIE, PA 16501	452-4838	DENTAL

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3. YOU MUST CONTINUE TO VISIT ONE OF THESE PROVIDERS LISTED ABOVE, IF YOU NEED TREATMENT, FOR NINETY (90) DAYS FROM THE DATE OF YOUR FIRST VISIT.
 4. AFTER THIS NINETY (90) DAY PERIOD, IF YOU STILL NEED TREATMENT, YOU MAY CHOOSE TO GO TO ANOTHER PHYSICIAN OR OTHER HEALTH CARE PROVIDER FOR TREATMENT. YOU SHOULD NOTIFY YOUR EMPLOYER AND ITS INSURANCE COMPANY OF THIS ACTION WITHIN FIVE (5) DAYS OF YOUR VISIT TO THE PROVIDER OF YOUR CHOICE.
 5. YOUR BILLS WILL BE PAID FOR IF YOUR PHYSICIAN OR OTHER HEALTH CARE PROVIDER FILES REPORTS AS REQUIRED. THESE REPORTS MUST BE FILED WITHIN TEN (10) DAYS AFTER YOUR FIRST VISIT AND AT LEAST ONCE A MONTH FOR AS LONG AS TREATMENT CONTINUES.
 6. IF ONE OF THE PROVIDERS LISTED ABOVE REFERS YOU TO ANOTHER PHYSICIAN OR OTHER HEALTH CARE PROVIDER, YOUR EMPLOYERS OR ITS INSURER WILL PAY THE REASONABLE BILLS FOR THESE SERVICES.
 7. IF YOU ARE FACED WITH A MEDICAL EMERGENCY, YOU MAY SECURE ASSISTANCE FROM A HOSPITAL OR PHYSICIAN OR OTHER HEALTH CARE PROVIDER OF YOUR CHOICE. YOU MUST THEN SEEK SUBSEQUENT TREATMENT FROM A PHYSICIAN OR OTHER HEALTH CARE PROVIDER LISTED ABOVE FOR AT LEAST THE FIRST NINETY (90) DAYS FROM THE DATE OF YOUR FIRST VISIT.