

WORKERS' COMPENSATION INFORMATION

In Pennsylvania, the workers' compensation law provides wage loss and medical benefits to employees who cannot work, or who need medical care, because of 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 workers' compensation benefits at its primary place of business and at its sites of employment in a prominent and easily accessible place, including without limitations, area 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 no 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, Pennsylvania 17104-2501 Telephone number within Pennsylvania (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.

ACKNOWLEDGEMENT

I, _____, Employee of

USCAA/AmeriCorps______, hereby

certify I was provided with the above statement on ____/ / ___(date).



WHAT TO DO INCASE OF A WORK-RELATED INJURY

If you suffer a work-related injury, your health and well-being are our first concerns. If the injury is of a serious nature and requires the assistance of an ambulance or emergency squad, they should be contacted IMMEDIATELY. If the injury is of a less serious nature the following information will be helpful and these procedures must be followed:

- 1) If you suffer a work-related injury, Union-Snyder Community Action Agency, or its insurer (PCOMP), must pay for reasonable surgical and medical services and supplies, orthopedic appliance, and prostheses, including training in their use.
- To ensure that your medical treatment will be paid for by Union-Snyder Community Action Agency or its insurer (PCOMP), you must select from one of the health care providers listed on the "Workers' Compensation Panel".
- 3) If you suffer a work-related injury, the first thing you should do is report the injury to your supervisor and ask that PCOMP Compensation Claims form is completed and submitted.
- 4) If you do require treatment, you must continue treatment with one of the health care providers listed on the "Workers' Compensation Panel".
- 5) After this ninety (90) day period, if you still need treatment, you may choose to continue with this health care provider, or you may choose another health care provider. You must notify Audrey Cherry of this action within five (5) days of your first visit to the provider of your choice for the bills to be paid. Your bills will be paid if your health care provider files the report as required (ten days after your first visit and at least once a month for as long as treatment continues).
- 6) If one of the health care providers on the "Workers' Compensation Panel" refers you to a Specialist, Union-Snyder Community Action Agency, or its insurer (PCOMP) will pay for these services.

The designated person for you to contact is Audrey Cherry| Fiscal Assistant| Union-Snyder Community Action Agency.

The Workers' Compensation Insurer for Union-Snyder Community Action Agency is:

County Commissioners Association of Pennsylvania CCAP PO Box 60769 Harrisburg, PA 17106-0769 1-800-895-9039 www.pacounties.org/insurance

WORKERS' COMPENSATION PANEL		
Employer: Union-Snyder Community Action Agency	Forward all bills and reports to:	
713 Bridge Street, Suite 10	PCOMP	
Selinsgrove, PA 17870	P.O. Box 60769	
Telephone: (570) 374-0181	Harrisburg, PA 17106	
Fax: (570) 374-2330	Telephone: 800-895-9039	
Contact: Audrey Cherry	Fax: (888) 692-2368	
E-mail: acherry@union-snydercaa.org	1	
Effective Date: February 2020		
URGENT CARE	OCCUPATIONAL MEDICINE Mid-State Occupational Health Services (14.1 miles)	
Med Express Urgent Care	Mid-State Occupational Health Services (14.1 miles) 130 Buffalo Road	
1597 N. Susquehanna Trail, #3		
Selinsgrove, PA 17870	Suite 104	
(570) 743-7821	Lewisburg, PA 17837	
United Correct Eveneration (14.1 miles)	570-523-7774	
Urgent Care of Evangelical (14.1 miles)		
7095 West Branch Hwy (Rt 15)		
Lewisburg, PA 17837		
(570) 523-3006		
All injuries	All injuries	
ORTHOPEDIC SURGERY	GENERAL SURGERY	
Sun Orthopedics Evangelical	Surgical Specialists of Evangelical (14.1 miles)	
21 Susquehanna Valley Mall Drive	24 Lystra Drive	
Selinsgrove, PA 17870	Lewisburg, PA 17837	
(570) 524-4446	(570) 523-3290	
800-598-5096		
Branch of surgery broadly concerned with the skeletal		
system(bones)	General surgery/abdominal tears	
NEUROSURGERY	OPHTHALMOLOGIST	
Geisinger Clinic (18.8 miles)	The Eye Center of Central PA (14.1 miles)	
100 N. Academy Avenue	137 JPM Road	
Danville, PA 17822	Lewisburg, PA 17837	
((570) 271-6590	(570) 523-3937	
	866-995-3937	
Treats spine and nerve conditions	Treats eye injuries	
PHYSICAL THERAPY	CHIROPRACTOR	
To schedule physical therapy:	Gregory T. Reese, D.C.	
Contact One Call	1372 North Susquehanna Trail, Suite 120	
(866) 389-0211	Selinsgrove, PA 17870	
pt@onecallcm.com	(570) 743-2342	
Exercise and equipment to help patient regain or improve		
physical abilities	Manipulated body to relieve pain	
<u>IMAGING</u>		
To schedule diagnostic imaging tests:	In the event of an emergency, please go to the nearest	
Contact One Call	hospital for treatment. You must contact your	
(800) 872-2875	employer immediately!	
Diagnostics@oncecallcm.com	1	
MRI's, X-rays, CT Scans, Ultrasound, Etc		
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EMPLOYEES ACKNOWLEDGEMENT OF RIGHTS AND RESPONSIBILITIES

The Pennsylvania Workers' Compensation Act requires that employees be given written notice of their rights and responsibilities under Section 306 (f.1)(1)(i) of the Act if a list of designated health care providers is established by the employer.

As an employee of Union-Snyder Community Action Agency you have the right to seek emergency medical treatment from any emergency health care provider; for post-emergency and other non-emergency work related injuries or illness, you must obtain treatment from a designated health care provider from the panel list for 90 days. The penalty for not using a designated health care provider is that Union-Snyder Community Action Agency or workers' compensation is not liable for the medical bills incurred. Specific rights and responsibilities are:

- The responsibility to obtain treatment for work-related injuries and illnesses from one or more of the designated health care providers for 90 days from the date of the first visit to a designated provider. 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.
- The right to have all reasonable medical supplies and treatment related to the injury paid for by your employer as long as treatment is obtained from a designated provider during the 90-day period.
- The right, during this 90-day period, to switch from one designated health care provider to another designated provider.
- The right to seek treatment from a provider if you are referred to that provider by a designated provider.
- The right to a second opinion from a provider of your choice when invasive surgery is prescribed by the designated provider. 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.
- The right to seek treatment or medical consultation from a non-designated provider during the 90-day period, but the services shall be **at your expense** for the applicable 90 days.
- The right to seek treatment from any health care provider after the 90-day period has ended. The employer must pay for this treatment as long as it is **reasonable and necessary** for your work injury or illness and has been documented by the physician or other health care provider.
- The responsibility to notify your employer of treatment by a non-designated provider (after the 90-day period) within five days of the first visit to that provider.

I HAVE BEEN INFORMED OF MY MEDICAL TREATMENT RIGHTS AND RESPONSIBILITIES WITH REGARD TO WORK-RELATED INJURIES AND ILLNESSES. My signature on this form indicates that I have been informed and understand these rights and responsibilities.

If you have questions, be sure to have your rights and responsibilities explained to you before signing this form.

I,______, have been informed of my medical treatment rights and responsibilities with regard to work-related injuries and occupational illness. This notice was presented to me at: (circle one)

Time of Hire	Time of injury	Other	
Employee:	Date:		
Employer Representative:	Date:		
Employee refuses to sign but was provided a copy of this document and a panel provider list.			