NOTICE TO ALL EMPLOYEES

IN THE EVENT OF A WORK INJURY, IT IS YOUR RESPONSIBILITY TO IMMEDIATELY REPORT THE INJURY TO YOUR SUPERVISOR. IF YOU ARE INJURED WHILE AT WORK, YOUR EMPLOYER HAS ARRANGED FOR PAYMENT OF YOUR MEDICAL CARE WITH:

BLOOMSBURG UNIVERSITY OF PA/SSHE/INSERVCO

IN CASE OF A WORK-RELATED INJURY OR DISEASE

**Rev 1/17/17**

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<tr>
<th>IN ACCORDANCE WITH THE PENNSYLVANIA WORKERS’ COMPENSATION ACT, YOU MUST CHOOSE A MEDICAL PROVIDER FROM THE LIST BELOW:</th>
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<td>If you suffer a work-related injury or disease, your employer or its insurance company will pay for reasonable surgical and medical services, medication, supplies, orthopedic appliances and prostheses, including training in their use. In order to ensure that your medical treatment will be paid for by your employer or its insurance company, you must select from one of the licensed physicians or practitioners of the healing arts listed below:</td>
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**Emergency Care**  
The Bloomsburg Hospital  
549 East Fair Street, Bloomsburg, PA 17815  
(570) 387-2100

**Occupational Medicine**  
WorkPlace Health  
1103 Old Berwick Road, Bloomsburg, PA 17815  
(570) 317-2794

Mid-State Occupational Health Services  
6850 Lows Road, Suite 325B, Bloomsburg, PA 17815  
(570) 317-2763

**Orthopedics**  
Scott J. Boyle, D.O.  
3151 Columbia Boulevard, Bloomsburg, PA 17815  
1-866-937-9900

David J. Ball, D.O.  
2701 Columbia Boulevard, Suite A, Bloomsburg, PA 17815  
(570) 387-2282

**General Surgery**  
Roger F. Crake, M.D.  
695 East 16th Street, Suite C, Berwick, PA 18603  
(570) 759-3561

Jose F. Derr, D.O.  
101 West 9th Street, Berwick, PA 18603  
(570) 759-2600

**Physical Therapy**  
Phoenix Rehabilitation and Health Services  
1000 Market Street, Suite 11, Bloomsburg, PA 17815  
(570) 784-1896

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<th>That the employee has the duty 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.</th>
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<td>That 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.</td>
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<td>That 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.</td>
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<td>That 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.</td>
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<td>That the employee has the right to seek emergency medical treatment from any provider, but that subsequent nonemergency treatment shall be by a designated provider for the remainder of the 90-day period.</td>
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<tr>
<td>That the employee has the right to seek treatment or medical consultation from a nondesignated provider during the 90-day period, but that these services shall be at the employee’s expense for the applicable 90 days.</td>
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<tr>
<td>That the employee has the right to seek treatment from any health care provider after the 90-day period has ended, and that treatment shall be paid for by the employer, if it is reasonable and necessary.</td>
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</table>
That 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.