CITY OF PITTSBURGH: NOTICE CONCERNING MEDICAL TREATMENT FOR YOUR WORK-RELATED INJURY OR ILLNESS

The City of Pittsburgh (hereinafter "employer") has selected the following list of physicians and other health care providers (hereinafter "listed panel provider"). **Should you require medical attention for your work-related injury or illness, you must select from one of the listed panel providers. If you require ongoing treatment you must continue to visit one of the providers listed below for ninety (90) days from the date of your first visit.**

This list is posted at your department's main office for you to view. Also, you may obtain a copy of this list from UPMC Work Partners Claims Management Services at 1-800-633-1197.

If you are injured at work or suffer an occupational illness, you have certain legal RIGHTS and DUTIES under Section 306(f.1)(l)(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-related injury or occupational illness. Your employer must pay for the treatment, as long as the treatment is by one of the listed panel providers.

You have the RIGHT to choose which of the listed panel providers will treat you for your work-related injury or illness.

You have the RIGHT to switch among any of the listed panel providers when you receive treatment; and if a listed panel provider refers you to a physician not on your employer's list, you have the right to receive treatment from the referral physician.

You have the RIGHT to receive treatment at the closest Emergency Department for your initial care. However, non-emergency treatment and follow up care must be given by a listed panel provider.

If you seek treatment for your work-related injury or illness from a physician of your choice, your employer may not have to pay for this medical treatment during this 90-day period.

If a listed panel provider prescribes surgery for you, you have the RIGHT to receive a second opinion from any physician of your choice. The City shall pay the cost for the second opinion provided that the physician chosen is Board certified in the specialty area for which the surgery is recommended. If that opinion is different from the opinion of the listed panel 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 panel provider for a period of 90 days after the date of your visit to the provider of the second opinion. **Therefore in this situation you may be required to treat with listed panel provider for up to 180 days.**

You have the DUTY to visit one or more of the listed panel providers for the first 90 days of treatment for your work-related injury or illness if you expect your employer to pay for the medical treatment you receive.

IMPORTANT: The list of panel providers is on the reverse side of this form.

MEDICAL TREATMENT AFTER THE FIRST 90 DAYS

You have the RIGHT to receive treatment from any physician of your choice, whether or not they are a listed panel provider. Your employer must pay for this treatment, as long as it is reasonable and necessary for your work-related injury or occupational illness and has been properly documented by the physician of your choice.

You have the DUTY to notify your employer if you receive treatment from a physician of your choice. You must notify your employer within 5 days of the first visit to any physician that is not a listed panel provider. The employer may not be required to pay for treatment received until you have given this notice.

By signing this form I have been informed of and understand my medical treatment rights and duties with regard to work-related injuries and occupational illnesses. My refusal to sign this form does not release me of my medical treatment duties regarding work-related injuries and occupational illnesses. This notice was presented to me at (check one):

□ TIME OF HIRE □ WHEN INJURED

Employee Print:_____

Employee Signature:_____Date:_____

Supervisor Signature:_____Date:_____

(Give a copy of this two-sided form to the employee; send original to the Department of Personnel & C.S.C.)

CITY OF PITTSBURGH WORKERS' COMPENSATION
HEALTH CARE PROVIDER PANEL LISTING
IN CASE OF A WORK-RELATED INJURY:

1. **You must immediately report the injury to your supervisor and also to UPMC Work Partners Claims Management Service at 1-800-633-1197. If there are any questions concerning this Notice, please call UPMC Work Partners.**

2. To ensure that the City of Pittsburgh will pay bills associated with medical treatment of your work-related injury, you must select from one of the listed panel providers below.

3. If you require emergency medical care, you may seek treatment at the closest Emergency Department for your initial care. Any additional medical treatment must be obtained by one of the listed panel providers below.

4. You are required by law to treat with one of the listed panel providers for 90 days from the date of your first visit. Failure to treat with these providers may result in the City of Pittsburgh denying responsibility for payment of bills for the first 90 days of treatment. Should it be necessary to treat with a physician not listed, the listed panel provider will make the appropriate referral.

5. After the 90-day period, if continued treatment is prescribed, you may choose to go to a physician of your choice for treatment. However, you must notify UPMC Work Partners of this action within five (5) days of visit to the physician of your choice. Bills associated with such treatment of a work-related injury or illness will be paid if the licensed physician of your choice files reports as required. (These reports must be filed within 21 days after the first visit and, at least once a month for as long as treatment continues.)

6. Billing Address for UPMC Work Partners: PO Box 2971, Pittsburgh, PA 15230.

OCCUPATIONAL MEDICINE

All Work Related Injuries: Mon-Fri

Concentra Medical Center – Oakland
120 Lytton Avenue, Suite 275
Pittsburgh, PA 15213
(412) 621-5430 **Hours: 8a-5p**

Concentra Medical Center – Aspinwall
15 Freeport Road, Suite 100
Pittsburgh, PA 15215
(412) 784-1678 **Hours: 7a-7p**

Concentra Medical Center – Robinson
4390 Campbells Run Road
Pittsburgh, PA 15205
(412) 429-9675 **Hours: 8a-5p**

Concentra Medical Center-West End
Gateway View Plaza
1600 West Carson Street
Pittsburgh, PA 15219
(412) 391-1137 **Hours: 7a-7p**
Sat 9a-1p

CHIROPRACTIC CARE

John Depasqua, DC
305 Mt. Lebanon Blvd., Suite 100
Pittsburgh, PA 15234
(412) 531-4800

EMERGENCY CARE

UPMC Mercy Emergency Department*
1400 Locust Street
Pittsburgh, PA 15219
(412) 232-8222
All follow-up care must be coordinated with a panel provider

PHYSICAL THERAPY

Centers for Rehabilitation Services*
Center for Sports Medicine
(412) 432-3700
Multiple CRS locations available
~or~
Any listed **Concentra Medical Center**

NEUROSURGERY

University of Pittsburgh Physicians*
Dr. Daniel Wecht 1-866-804-5282
Dr. William Bookwalter 1-877-463-3701
Multiple office locations available

OPHTHALMOLOGY

Eye Injuries
Drs. Berkowitz and Rosenberg
532 S. Aiken Avenue, Suite 520
Pittsburgh, PA 15232
(412) 621-5822
~or~
Eye Physicians & Surgeons
Drs. Balouris and Maher
200 Delafield Road, Suite 2020
Pittsburgh, PA 15215
(412) 784-9060

ORTHOPEDICS

University of Pittsburgh Physicians*
Drs. Fowler, Goitz, Kaufmann, Lin, Manway, Mares, Rabuck, Sisk, Vyas, and Wukich
Oakland and other locations available
(412) 605-3239
~or~
Dr. Victoria Langa
120 Lytton Avenue, Suite 275
Pittsburgh, PA 15213
(412) 621-5430
~or~
Orthopaedic Specialists-UPMC*
Drs. Christopher Schmidt & Alan Klein
South Hills, North Hills and Monroeville
(412) 366-7444 or 1-877-471-0935
~or~
Pittsburgh Bone & Joint
Drs. Chamberlin, Hartmann, Honkala, Kappakas, Radkowsi, and Weiss
495 Waterfront Drive, Suite 220
Homestead, PA 15120
(412) 325-0005

(*) In accordance with Section 306 (f.1)(1)(i) of the Workers' Compensation Act and 34 Pa. Code Section 127.753 Disclosure Requirements, this health care provider is employed, owned, or controlled by UPMC

GENERAL SURGERY

Pittsburgh Vascular Surgical Associates
Dr. Fredric Jarrett
5200 Centre Avenue, Suite 705
Pittsburgh, PA 15232
(412) 681-8720
~or~
University of Pittsburgh Physicians*
Drs. Bartels, Garrett, Goldstein, Peluso & Ramakrishna
100 Delafield Rd., Suite 113
Pittsburgh, PA 15215
(412) 782-2400

HAND AND PLASTIC SURGERY

Dr. James P. O'Toole
5200 Centre Avenue, Suite 703
Pittsburgh, PA 15232
412-345-1615

PHYSICAL MEDICINE & REHAB

Dr. Brian Ernstoff *
120 Lytton Avenue, Suite 275
Pittsburgh, PA 15213
(412) 621-5430

PHARMACY: No out of pocket charge

Express Scripts Inc.
Multiple pharmacy locations
Call 1-866-759-6146 for assistance
BIN#003858
Group# KYRA
Pharmacy Help Desk: 1-800-824-0898

BLOODBORNE PATHOGEN EXPOSURES & INFECTIOUS DISEASE PROGRAM

Call any listed Concentra location to speak with the on-call physician if immediate after hours assistance is needed.

DIAGNOSTIC TESTING

One Call Medical/RIN
Multiple Facility Locations
1-800-453-0574

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