

**Catasauqua Area School District  
Procedure for Worker's Compensation & Safety Committee**

**Step by Step**

1. **Notify your supervisor immediately and the school nurse, immediately. Also notify Mindy Redline (ext. 10006).**

**After Hours Procedure – Report to or call immediate supervisor.**

2. **If it is an emergency that you cannot wait, please go to the closest Emergency Room at a hospital. Please tell them it is a Worker's Compensation Claim (Company Name listed below).**

**School Claims Services  
P.O. Box 813  
New Cumberland PA, 17070  
866-402-6600  
Fax 866-402-6601  
[www.schoolclaimsservices.com](http://www.schoolclaimsservices.com)**

**Effective 7/1/15**

3. **If it is not an emergency you can call the telephone number listed below for an appointment.**

**Health Works – Bethlehem  
1770 Bathgate, Suite 200  
Bethlehem, PA 18017  
(484) 884-2249 – Appointment Number**

4. **Supervisor/nurse notifies someone on the Safety Committee as soon as possible (within 1 – 48 hours) so they proceed with an Incident Report.**

**Members of Safety Committee:**

**Kim Ceccatti, Thomas Moll, Raymond Blount, Fred Knauss, Lois Reed, Mindy Redline,  
Donna Tercha, Stacy Zellner and Dorothy Delbertis**

5. **Please fill out the forms that are in the Nurse's Office or Supervisor's Office and return all copies to Mindy Redline in the Administration Office,  
201 N.14<sup>th</sup> Street, Catasauqua, PA 18032 (610) 264-5571.**
6. **Please do not pay any bills. If you receive a bill please send it to Mindy in the Administration Office.**

**On the reverse side is a list of our Panel Physicians.**

**Revised June 8, 2016**

**NOTICE TO EMPLOYEES  
CATASAUQUA AREA SCHOOL DISTRICT**

**School Claims Service, LLC, Workers' Compensation Division, the claims administrator for the school district's workers' compensation carrier, Old Republic Insurance Company, has required that we post the following list of health care providers in accordance with Section 306 of the Workers' Compensation Act.**

**IN CASE OF A WORK-RELATED INJURY**

1. In order to ensure that your medical treatment will be paid for by your employer, or the insurance company, you must select from one of the licensed physicians or practitioners of the healing arts listed.
2. You must continue to visit one of the listed providers for ninety (90) days from the date of your first visit. If you do not comply with this requirement, your employer will be relieved from liability for payment of services rendered during this period.

**DESIGNATED PHYSICIANS**

**See Reverse Side**

You recognize and agree that your employer has posted a list of at least six (6) health care providers, at least three (3) of which are physicians and no more than four (4) of which are coordinated care organizations (CCO). You also acknowledge that you have been presented with this written notice setting forth your rights and duties under Section 306(f.1)(1)(I) of the Pennsylvania Workers' Compensation Act. Your rights and duties include the following:

1. I have the duty to obtain treatment for work-related injuries and illnesses from one or more of the designated health care providers for **ninety (90)** days from the date of first visit to a designated provider.
2. As long as treatment is obtained from a designated provider during the ninety (90) day period, all reasonable medical supplies and treatment related to the injury will be paid by my employer.
3. I have the right to switch from one designated health care provider on the list to another during the ninety (90) day period and my employer must pay for this treatment.
4. If I am referred by a designated provider to a non-designated provider, my employer shall provide for the treatment rendered by the referral provider.
5. I have the right to seek emergency medical treatment from any provider, but I understand that subsequent non-emergency treatment must be rendered by a designated provider for the remainder of the ninety (90) day period.
6. I have the right during the ninety (90) day period to seek medical treatment from a non-designated provider, but I understand my employer is not responsible to pay for these services.
7. After the expiration of the ninety (90) day period, I have the right to seek treatment from any health care provider, and my employer must pay for such treatment if it is reasonable and necessary.
8. If I treat with a non-designated health care provider after the expiration of the ninety (90) day period, I understand that I must provide my employer notice within five (5) days of my first treatment with the non-designated provider. If I fail to do so, my employer may not be responsible to pay for treatment rendered by the non-designated provider prior to notification; and
9. If the designated provider recommends invasive surgery, I am entitled to receive an additional opinion from any health care provider of my choice. If the additional opinion differs from that of the designated provider, I am entitled to select which course of treatment to follow. However, if I choose to follow the recommendation of my health care provider (the additional opinion), the treatment shall be performed by one or more of the designated health care providers for a period of ninety (90) days from the date of the visit to my health care provider (date of examination of the additional opinion).

**My employer has informed me of my rights and duties, and my signature acknowledges that I have been so informed and understand my rights and duties.**

\_\_\_\_\_  
DATE

\_\_\_\_\_  
EMPLOYEE'S SIGNATURE

\_\_\_\_\_  
EMPLOYEE'S NAME (PLEASE PRINT)

\_\_\_\_\_  
DATE

\_\_\_\_\_  
WITNESS

**CATASAUQUA AREA SCHOOL DISTRICT  
DESIGNATED PHYSICIANS**

<b>MEDICAL PROVIDER</b>	<b>ADDRESS</b>	<b>PHONE</b>	<b>SPECIALTY</b>
Cedar Crest Emergicenter	1101 South Cedar Crest Blvd Allentown, PA 18103	610-435-3111	Occupational Medicine
Coordinated Health Systems	1401 North Cedar Crest Blvd Allentown, PA 18104	610-433-8080	Occupational Medicine
	2775 Schoenersville Rd. Bethlehem, PA 18017	610-861-8080	
Healthworks	1243 South Cedar Crest Blvd Allentown, PA 18103	610-402-9200	Occupational Medicine
	1770 Bathgate Drive Suite 200 Bethlehem, PA 18017	484-884-2249	
Vitaly Sawyna, MD	2224 Liberty Street Allentown, PA 18104	610-437-3585	Surgery
St. Lukes Estes Surgical Associates	St. Lukes Hospital-Allentown Campus	610-954-2200	Surgery
	1736 Hamilton Street Allentown, PA 18104		
Saeed Bazel, MD	65 East Elizabeth Ave. Suite 303 Bethlehem, PA 18018	610-865-7929	Surgery
Coordinated Health Systems	1503 North Cedar Crest Blvd Allentown, PA 18104	610-821-4848	Orthopedics
Coordinated Health Systems	2775 Schoenersville Road Bethlehem, PA 18017	610-861-8080	Orthopedics
St. Lukes Physician Group	1901 Hamilton St. # 100 Allentown, PA 18104	484-526-1735	Orthopedics
Orthopedic Associates of Allentown	250 Cetronia Road Allentown, PA 18104	610-973-6200	Orthopedics
Lehigh Valley Center for Sight	1739 West Fairmont Street Allentown, PA 18104	610-437-4988	Ophthalmology
Bethlehem Eye Associates	800 Easton Ave. 1st Floor Bethlehem, PA 18018	610-691-3335	Ophthalmology
Stephen Kulick, DC Patrick Smarch, DC	1850 East Emmaus Ave. Allentown, PA 18103	610-791-1020	Chiropractic
Losagio Chiropractic Center	1220 Illicks Mill Road Bethlehem, PA 18017	610-865-8155	Chiropractic
St. Lukes Neurology Assoc.	Integrated Health Campus 240 Cetronia Road	484-426-2626	Neurology
	North Building, Suite 210 A Allentown PA 18104		
Jeffrey Gould ,MD	510 Delaware Ave. Bethlehem, PA 18015	610-866-6614	Neurology
Good Shepherd Rehab	1651 North Cedar Crest, Ste 100 Allentown, PA 18104	484-788-0700	Physical Medicine & Rehabilitation
Coordinated Health Systems	2775 Schoenersville Road Bethlehem, PA 18017	610-861-8080	Physical Medicine & Rehabilitation
	1230 South Cedar Crest Blvd. Suite 306 Allentown, PA 18103		
Chirag Kalola, MD Good Shepherd Physician Group	850 South Fifth Street Allentown, PA 18103	610-776-3278	Physiatry/EMG's
	2901 Emerick Blvd. Bethlehem, PA 18020		
OAA Orthopedic Specialists	2597 Schoenersville Road Suite 304 Bethlehem, PA 18017	610-973-6350	Physiatry/EMG's
Dr. Neal Kramer Dr. Mark Maehrer	2597 Schoenersville Road Suite 304 Bethlehem, PA 18017	610-868-6353	Podiatry
One Call Medical	For locations and appointments, please call	1-866-626-7243	Diagnostic Testing
Premier Comp PT Network	For closest location, please call	1-888-594-4001	Physical Therapy
Cypress Care	For closest location, please call	1-800-419-7191	Durable Medical Equip.
United Medical Equipment	For closest location, please call	1-800-397-9900	Durable Medical Equip.
Corvel Pharmacy Card	If you need assistance or if you do not have a card, please call	1-800-563-8438	Pharmacy