



**NOTICE OF RIGHTS AND DUTIES**

Pennsylvania law requires employers to notify employees of their rights and duties regarding medical services provided under the Workers' Compensation Law (the Act). This notice will provide you a summary of the applicable provisions of the Act:

- Your employer has established a medical panel, which includes at least six designated health care providers, no more than four of whom are coordinated care organizations and no fewer than three of whom are physicians. The employer has not included on this list a physician or health care provider who is employed, owned or controlled by the employer or the employer's insurer unless employment, ownership or control is disclosed on the list.
- You have a 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.
- You have the right to seek treatment or medical consultation from a nondesignated provider during the 90-day period, but these services shall be at your expense for the applicable 90 days.
- You have 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 the designated provider during the 90-day period.
- You have the right, during this 90-day period, to switch from one health care provider on the list to another health care provider on the list, and that all treatment shall be paid for by your employer.
- You have the right to seek treatment from a referral provider if a designated provider refers you, and your employer shall pay for treatment rendered by the referral provider.
- You have the right to seek emergency medical treatment from any provider, but subsequent nonemergency treatment shall be by a designated provider for the remainder of the 90-day period.
- You have a right to seek treatment from any health care provider after the 90-day period has ended, and that treatment shall be paid for by your employer, if it is reasonable and necessary.
- After ninety (90) days from the date of first treatment, you have a duty to notify your employer of treatment by a nondesignated provider within 5 days of the first visit to that provider. Your employer may not be required to pay for treatment rendered by the nondesignated provider prior to receiving this notification. However, your employer shall pay for these services once notified, unless the treatment is found unreasonable by a utilization review organization.
- You have the right to seek an additional opinion from any health care provider of your choice when a designated provider prescribes invasive surgery for you. If the additional opinion differs from the opinion of the designated provider and the additional opinion provides a specific and detailed course of treatment, you shall determine which course of treatment to follow. If you opt to follow the course of treatment outlined by the additional opinion, the treatment shall be performed by one of the health care providers on your employer's designated list for 90 days from the date of the first visit to the provider of the additional opinion.

**ACKNOWLEDGEMENT OF RIGHTS AND DUTIES**

I hereby acknowledge that my employer has provided me with a copy of this "Notice of Rights and Duties". I have been informed of and I understand my rights and duties pertaining to medical treatment for work related injuries thereunder. This notice was presented to me at (check one):

- Time of hire or orientation
- Immediately after the injury, or as soon thereafter as possible
- Other: \_\_\_\_\_

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Employee Signature	Date	Employer Representative	Date
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