

**NOTIFICATION OF EMPLOYEE'S RIGHTS AND DUTIES
UNDER THE PENNSYLVANIA WORKERS' COMPENSATION ACT**

In accordance with Section 306 (f.1)(1)(i) of the Pennsylvania Workers' Compensation Act and Section 127.755 of the Rules and Regulations of the Bureau of Workers' Compensation your employer is obligated to notify you of your rights and duties pertaining to medical treatment for a work injury and income status. You are required to acknowledge this notification of your rights and duties in writing.

Your employer has posted in the work place a list of at least six designated health care providers for treatment of work injuries.

You have the duty to obtain treatment for a work-related injury or illness 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 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.

You have the right, during this 90 day period, to switch from one health care provider on the list to another provider on the list, and this treatment will be paid for by your employer.

You have the right to seek treatment from a referral provider if you are referred by a designated provider. Your employer will pay for the treatment rendered by the referral provider.

You have the right to seek emergency medical treatment from any provider, but subsequent nonemergency treatment must be by a designated provider for the remainder of the 90 day period.

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 day period.

Should evasive surgery be prescribed for you by a designated provider, you have the right to seek a second opinion from any health care provider of your choice. However, you must return to the designated provider for follow up on any alternative treatment regimen that is recommended.

You have the right to seek treatment from any health care provider after the 90 day period has ended, and that treatment will be paid for by your employer, if it is reasonable and necessary.

You are required to regularly report receipt of all other income you receive while collecting workers' compensation, including: unemployment benefits, other wages, "old age" Social Security benefits, pension benefits and severance pay.

You have the 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 a nondesignated provider prior to receiving this notification. However, your employer will be responsible to pay for these services once notified, unless the treatment is found to be unreasonable by a Utilization Review Organization in accordance with the provisions of the Workers' Compensation Act.

I hereby acknowledge that I have been informed of these rights and duties, and that I understand my responsibilities as set forth herein. I also understand that Bureau Regulation 127.755 specifically provides that an employee may not refuse to sign this acknowledgment of notification of their rights and duties in order to avoid any duties specified in this notice.

Employee Signature

Social Security Number

Date