

**INSERVCO INSURANCE SERVICES, INC.**

**Workers' Compensation Program: Designated Health Care Providers**

**NOTICE TO EMPLOYEES IN CASE OF WORK-RELATED INJURIES**

If you suffer a work-related injury, immediately report the injury to your supervisor. Failure to do so may delay your benefits or may cause you to lose your rights to benefits. For necessary medical treatment and supplies to be paid by your employer:

- All treatment must be obtained from one of the healthcare providers listed below.
- You must continue to visit one of the healthcare providers listed below if you need treatment for 90 days from the date of your first visit. If one of the providers listed below refers you to another licensed specialist, those services will be paid.
- After this 90-day period, if you still need treatment, you may go to another healthcare provider for treatment as long as you notify your claims adjuster within five (5) days of your visit to a new provider.
- If a listed physician prescribes invasive surgery, you have the right to obtain a second opinion from a physician of your choice. If a second opinion differs from that of the listed physician's opinion, you may determine which course of treatment to follow; however, the second opinion must contain a detailed treatment plan. If you choose the treatment prescribed in the second opinion, you must receive the treatment from a listed provider for a period of 90 days after the date of your visit to the provider of the second opinion.

If you are faced with a medical emergency, you may secure initial emergency treatment from any emergency facility. However, when the emergency is resolved, follow-up treatment must be obtained from one of the following healthcare providers. If you choose to treat with an out-of-state provider, you may be subject to balance billing.

| <b>NAME OF PROVIDER</b>             | <b>STREET</b>          | <b>CITY, STATE, ZIP</b> | <b>PHONE</b> | <b>SPECIALTY</b>  |
|-------------------------------------|------------------------|-------------------------|--------------|-------------------|
| Alley Medical Center                | 301 West Third Street  | Berwick, PA 18603       | 570.759.0351 | Family Practice   |
| Susquehanna Valley Medical Spec.    | 6850 Lows Rd. Ste. 325 | Bloomsburg, PA 17815    | 570.784.7300 | Family Practice   |
| Susquehanna Valley Medical Spec.    | 6850 Lows Rd.          | Bloomsburg, PA 17815    | 570.784.7300 | Internal Medicine |
| WorkPlace Health                    | 1103 Old Berwick Rd.   | Bloomsburg, PA 17815    | 570.317.2794 | Occ. Medicine     |
| Eye Care Specialists                | 126 West Front Street  | Berwick, PA 18603       | 570.752.7458 | Ophthalmology     |
| David J. Ball, DO                   | 2701 Columbia Blvd.    | Bloomsburg, PA 17815    | 570.387.2282 | Orthopedics       |
| Susquehanna Valley Medical          | 6850 Lows Rd. Ste. 325 | Bloomsburg, PA 17815    | 570.784.7300 | Orthopedics       |
| Phoenix Rehab. & Health Services    | 1701 Fowler Ave.       | Berwick, PA 18603       | 866.446.2848 | Physical Therapy  |
| Susquehanna Valley Med. Specialties | 6850 Lows Road         | Bloomsburg, PA 17815    | 866.446.2848 | Physical Therapy  |
| Maloney Chiropractic                | 500 Central Rd.        | Bloomsburg, PA 17815    | 866.446.2848 | Chiropractic      |

**FOR PRESCRIPTION MEDICATIONS AND DURABLE MEDICAL EQUIPMENT OR TO SCHEDULE PHYSICAL THERAPY, CHIROPRACTIC AND DIAGNOSTIC IMAGING APPOINTMENTS, AND LOCATIONS CLOSE TO YOU, PLEASE CALL KEYSERSCRIPTS AT 1.866.446.2848.**

All of your healthcare provider bills and reports need to be sent to the following address for review and payment in accordance with the Pennsylvania Workers' Compensation Act:

Inservco Insurance Services, Inc. P.O. Box 3899, Harrisburg, PA 17105-3899  
 Phone: 1.800.356.0438 - Fax: 1.866.356.0438