To All Employees:

The workers’ compensation law provides wage loss and medical benefits to employees who cannot work, or who need medical care, because of a work-related injury.

Benefits are required to be paid by your employer if self-insured, or through insurance provided by your employer. Your employer is required to post the name of the company responsible for paying workers’ compensation benefits at its primary place of business and at its sites of employment in a prominent and easily accessible place. It is also required to be posted in any areas used for treatment of injured employees or for the administration of first aid.

You should report immediately any injury or work-related illness to your employer. Your benefits could be delayed or denied if you do not notify your employer immediately.

If your claim is denied by your employer, you have the right to request a hearing before a Workers’ Compensation Judge.

The Bureau of Workers’ Compensation cannot provide legal advice. However, you may contact the Bureau of Workers’ Compensation for additional general information:

Bureau of Workers’ Compensation  
1171 South Cameron Street, Room 103  
Harrisburg, Pennsylvania 17104-2501  
Telephone No. within Pennsylvania: 1-800-482-2383  
Telephone No. outside of this Commonwealth: 717-772-4447  
TTY: 1-800-362-4228 (for hearing and speech impaired only)  
www.dli.state.pa.us, PA keyword: workers’ comp

For a complete list of panel physicians, please refer to http: www.bc.pitt.edu/wc. Please contact UPMC Work Partners-Claims Management Services at 412-473-7406 or the Workers’ Compensation office at 412-624-1198 with any additional questions.

I, ________________________________, employee of the University of Pittsburgh, hereby certify that I have been provided with, read, and understood the information set forth above consistent with the requirements of the Pennsylvania Workers’ Compensation Act.

Employee Signature: ________________________________ Date: ____________________

Form - B