

# NEW HOPE-SOLEBURY SCHOOL DISTRICT

## WHAT TO DO IN CASE OF A WORK-RELATED INJURY

EFFECTIVE JULY 1, 2018 THROUGH JUNE 30, 2019

If you suffer a work-related injury, your health and wellbeing are our first concern. If the injury is of a serious nature and requires the assistance of an ambulance or rescue personnel, they should be contacted immediately. If the injury is of a less serious nature, the following procedures must be followed:

1. If you suffer a work-related injury, the first thing you **MUST** do is report the injury to your supervisor. S/he or a designated person in your building will provide you with an SDIC packet, and your first step is to call SDIC @ (800) 445-6965 ext. 2101. You must also contact **Megan Candido, Supervisor of Personnel Relations, OR Andy Lechman, Business Administrator**.
2. If you require a prescription for your work-related injury or disease, do not use your personal health plan prescription card. Please use the Mitchell International First Fill sheet, which you will receive in the claim package. When you call in your report of injury to SDIC, they will assign you a claim number. Please use this claim number when seeing a panel physician.
3. If you suffer a work-related injury, **NEW HOPE SOLEBURY SCHOOL DISTRICT** or our insurer will pay reasonable surgical and medical services and supplies, orthopedic appliances and prosthetics, including training in their use when needed. In order to insure that your medical treatment will be paid for by **New Hope Solebury School District** or our insurer, **you must select from one of the health-care providers listed below for your initial care:**

Patient First (multiple locations)  
713 Bethlehem Pike  
Montgomeryville, PA 18936  
(267) 695-3944  
**Area of Specialty: Occupational Medicine**

WORKNET  
(multiple locations)  
1800 Byberry Road, Suite 705  
Huntington Valley, PA 19006  
(215) 947-5005  
**Area of Specialty: Occupational Medicine**

Upper Bucks Orthopedic and Sports Medicine  
711 Lawn Avenue, Building 3  
Sellersville, PA 18960  
(215) 257-3700  
**Area of Specialty: Orthopedics**

**Dental – One Call Care Management:**  
**(888) 539-0577**

**For Physical Therapy:**  
**NovaCare Rehabilitation**  
**For the nearest facility contact:**  
**(866) 723-NOVA (central scheduling)**

**One Call Care Management (Align):**  
**(866) 389-0211**  
**Area of Specialty: Chiropractic/Physical Therapy**

**For MRI/EMG/X-Ray/CT Scan**  
**One Call Care Management**  
**For the nearest facility contact:**  
**1 (800) 453-0574 (central scheduling)**

Family Care Medical Center  
1700 Horizon Drive, Suite 203  
Chalfont, PA 18914  
(215) 997-0890  
**Area of Specialty: Family Medicine**

Village at Newtown Medical Center  
11 Friends Lane, Suite 101  
Newtown, PA 18940  
215-579-1300  
**Area of Specialty: Family Medicine**

Doylestown Family Practice  
300 Spruce Street  
Doylestown, PA 18901  
(215) 230-7800  
**Area of Specialty: Family Medicine**

Bucks County Orthopedic Specialists (multiple locations)  
800 West State Street, Suite 202  
Doylestown, PA 18901  
(215) 348-7000  
**Area of Specialty: Orthopedics**

Matossian Eye Associates  
501 Hyde Park, Route 202  
Doylestown, PA 18902  
(215) 230-9200  
**Area of Specialty: Ophthalmology**

**For Prescriptions: Please use your Mitchell International card at your local pharmacy to bill SDIC directly (Giant, CVS, Rite Aid, Walgreens, Wal-Mart, Acme)**

**For Durable Medical Equipment:**  
**One Call Care Management**  
**(800) 848-1989**  
**Equipment: wheelchairs, walkers, crutches, TENS units, orthotics & prosthetics, etc.**

4. Please call in advance for an appointment if you need treatment. You must continue to treat with one of these providers for ninety (**90 days**) from the date of your first visit.
5. If, after this ninety (90) day period, you still need treatment and the **New Hope Solebury School District** has provided this list as set forth above, you may choose to continue with this health care provider, or you may choose another provider. You must notify **Megan Candido, Supervisor of Personnel Relations** OR **Andy Lechman, Business Administrator** of this action within five (5) days of your first visit to the health care provider of your choice. Your bills will be paid if you have provided proper notice and if your provider files reports as required. (These reports must be filed within ten (10) days after your first visit and at least once a month for as long as treatment continues).
6. If one of the health care providers listed above refers you to a specialist, the **New Hope Solebury School District** or our insurer will pay for these services as provided by law.

All workers' compensation claims will be processed on behalf of the School District by:

**SCHOOL DISTRICTS INSURANCE CONSORTIUM**  
P.O. BOX 1249  
NORTH WALES, PA 19454  
Phone: (800) 445-6965

**ACKNOWLEDGMENT: I have been informed of and understand my rights and duties as specified herein.**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please Print Name: \_\_\_\_\_

**\*At time of distribution, this information is accurate to the best of our knowledge. This panel is subject to change based on information received from the medical provider.**