1. If you suffer a work-related injury, your employer or its insurance company must pay for reasonable surgical and medical services and supplies, orthopedic appliances and prosthesis, including training in their use.

2. In order to ensure that your medical treatment will be paid for by your employer or the insurance company, you must select from one of the following health care providers:

   **TO ENSURE PROMPT APPOINTMENTS WITH THE BELOW PHYSICIANS OR WORKWELL NETWORK PROVIDER PLEASE CALL 1-800-662-2400**

   **PRIMARY CARE**  
   Jona Lamphier, D.O.  
   236 Main Street  
   Westfield, PA 16950  
   Scheduling 1-800-662-2400

   **PAIN MANAGEMENT**  
   Phong Nguyen, D.O.  
   1001 East Second Street  
   Coudersport, PA 16915  
   Scheduling 1-800-662-2400

   **ORTHOPEDICS**  
   Andrew Gottschalk, M.D.  
   1001 East Second Street  
   Coudersport, PA 16915  
   Scheduling 1-800-662-2400

   **ORTHOPEDICS**  
   Bradley Giannotti, M.D.  
   128 Lyons Street  
   Ulysses, PA 16948  
   Scheduling 1-800-662-2400

   **OPHTHALMOLOGY**  
   Kurt Benham, M.D.  
   12 Martin Street  
   Wellsville, NY 14895  
   Scheduling 1-800-662-2400

   **GENERAL SURGERY**  
   Frank Horn, M.D.  
   1001 East 2nd Street  
   Coudersport, PA 16915  
   Scheduling 1-800-662-2400

   **PHARMACY/PRESCRIPTIONS**  
   TMESYS (a PMSI program)  
   800-964-2531

You must continue to visit one of the physicians listed above, if you need treatment, for ninety (90) days from the date of your first visit.

3. If one of the persons above refers you to another licensed specialist, your employer or their insurer will pay the bill for these services.

4. After this ninety (90) day period, if you still need treatment and your employer has provided a list as set forth above, you may choose to go to another health care provider for treatment. You should notify your employer of this action within five days of your visit to said provider.

5. If a physician on the list prescribes invasive surgery, you may obtain a second opinion from any physician of your choice. If the second opinion is different than the listed physician’s opinion, you may determine which course of treatment to follow; however, the second opinion must contain a specific and detailed treatment plan. If you choose the second opinion, the procedures in that opinion must be performed by one of the physicians on the list for the first ninety (90) days.

6. If you are faced with a medical emergency, you may secure assistance from a hospital, physician, or health care provider of your choice for your work-related injury. However, when the emergency is resolved, you must seek treatment from a provider on the above list.