WORKERS’ COMPENSATION PROCESS CHECKLIST

Any employee who sustains a work-related accident/injury must:

☐ Report incident immediately to immediate supervisor (or administrator, or site/school designee).

☐ Report incident immediately to Company Nurse, at 888-770-0925. **ALL INJURIES MUST BE CALLED IN!**

☐ Employee will provide all applicable information regarding injury incident to Company Nurse.

☐ Company Nurse will generate Incident Report, which VACoRP will use as a basis for the employer’s report to the Virginia Workers’ Compensation Commission.

☐ Panel of Physicians and Medical Release Form: The injured employee will be requested to complete the Panel of Physicians and Medical Release Form (joint form). A copy of this form is available on both the Employee Services and Safety and Health Services web pages.

☐ Express Scripts Temporary Prescription Card: If the treating physician gives the injured employee a prescription, the injured employee may use the Express Scripts Temporary Prescription Card for their first 15 days, not to exceed 150 pills. With almost 50 pharmacy choices, including all pharmacies in Gloucester, this card will enable injured employees from having any out-of-pocket medication expenses. A copy of this form is available on both the Employee Services and Safety and Health Services web pages.

☐ Request medical documentation from treating physician; a copy of this should be faxed to the workers’ compensation / injury coordinator (Craig Smith – Phone: 804.693.7927; Fax: 804.693.4526) as soon as possible following any/all related visit(s) to the doctor or testing/surgery facilities. **Additionally, a work note indicating work status (release to return to regular duty, or release to return to modified duty with restriction(s) listed, or restriction from work) must be turned into Employee Services** (our fax number is 804.693.4526). The treating physician may fax this paperwork directly to this office.

☐ Notify/provide paperwork to immediate supervisor (or administrator); keep them informed.

☐ Submit related bills to the workers’ compensation / injury coordinator (Craig Smith – 804.693.7927) for submission to the insurance carrier. **The fax number is 804.693.4526.**

☐ Submit related receipts for prescriptions (showing name of drug[s]/doctor/date/amount/proof of payment).

☐ Submit mileage form for related travel (to/from doctor’s office and testing/surgery facilities).

☐ Please note that benefits/payments are not guaranteed. Time lost for medical appointments might not be payable. Determinations regarding compensability and coverage are made by the Workers’ Compensation insurance carrier following a review of the claim, medical notes, etc.

☐ Refer to the Work-Related Accident/Injury Leave section of the Staff Leave policy – File No. GBDG for additional information.

☐ Call the workers’ compensation / injury coordinator (Craig Smith – 804.693.7927) if you have any questions.
Your safety and the safety of others is the #1 goal of Gloucester County Public Schools—in fact, it is a foundational part of Gloucester County Public Schools’ mission, vision, values, and goals. **It is our duty and responsibility to provide for, and contribute to, a safe learning and working environment.** Be diligent; be careful; be proactive—exercise good common sense at all times—please do your part to help prevent accidents within the Gloucester County Public Schools professional learning community—especially with slips, trips, and falls.

**Sometimes, however, accidents do happen.** You might slip. You might trip. You might fall. You might get injured in a different manner. **What do you do if you think you are injured? What do you do if you know you have been injured? The answer is the same—call Company Nurse!** Company Nurse is a third-party vendor we utilize for generating the first report of injury; Company Nurse is part of our workers’ compensation program. **Please notify your supervisor as well.** Even if the designated person for your school or department is not available to assist you (at the schools it is generally a school nurse or administrative professional in the office; in other departments it is generally the attendance/timekeeper person), please make the call yourself. We will also ask you to sign and date an “Approved Panel of Physicians & Medical Release Form” which lists the primary and specialist physicians that are on our approved panel for workers’ compensation matters.

**Where do I send the medical paperwork that is associated with this workplace injury?**

All medical, billing, and return to work (RTW) paperwork needs to be forwarded to the attention of Craig Smith in Employee Services & Communications. Please fax (or have the physician fax) the paperwork to 804-693-4526. **Please keep your supervisor informed about your return to work status.**

If you have any questions about worker’s compensation, injury reporting, or COMPANY NURSE, please call me directly at 804-693-7927 (office) or 804-694-7633 (cell). For more information/resources regarding worker’s compensation, please visit this web page: [http://gets.gc.k12.va.us/Departments/EmployeeServicesCommunications/tabid/16531/Default.aspx](http://gets.gc.k12.va.us/Departments/EmployeeServicesCommunications/tabid/16531/Default.aspx). **Have a safe and enjoyable school year!!!**
PART A.  MEDICAL RELEASE FORM

THE CLOSEST EMERGENCY FACILITY MAY BE USED IN AN EMERGENCY SITUATION. IF FOLLOW-UP CARE IS NEEDED ONCE THE EMERGENCY TREATMENT IS COMPLETED, PLEASE REFER TO THIS PANEL OF PHYSICIANS FORM AND YOUR SELECTION BELOW.

____ I will select a doctor, if needed, from the panel below.

____ I decline to select a doctor from the above panel. I understand that I will have to pay for any medical treatment or doctor’s bills, and that I may be denied workers' compensation for any absence based on a disability which is not certified by an approved panel doctor.

I hereby authorize Company Nurse, VACo CompCare, the employer, or their representatives to be furnished with any information requested to include, but not limited to: medical records, treatment, including work status, diagnosis, prognosis, estimates of disability, recommendations for further treatment, and/or other related records. This information is to be used for the sole purposes of evaluating and handling a Virginia Workers’ Compensation claim, and assuring timely medical care as a result of the incident occurring on or about the date noted below, and for no other purpose now or in the future.

__________________________________                              _______________________
Signature of Employee                                                                 Date

__________________________________                              _______________________
Signature of Employer Representative                                                      Date

WE REQUEST THAT THIS FORM BE COMPLETED AND SUBMITTED, EVEN THOUGH THE EMPLOYEE MAY NOT PLAN TO SEE A PANEL DOCTOR.

NOTE TO SUPERVISOR OR SITE/SCHOOL WORKERS' COMPENSATION COORDINATOR:

① Please have the employee sign and date this release form, even if they don’t plan on seeing a Physician/doctor right away.
② Please sign and date this form as a witness.
③ Please fax this form to 804-693-4526 before sending the original in the Inter-Office Mail to the attention of Craig W. Smith in Employee Services.
④ Please ask the employee to forward all medical billing and return-to-work information to the attention of Craig W. Smith in Employee Services. If you have additional questions, please feel free to call 804-693-7927 or email cwsmith@gc.k12.va.us.

Gloucester County Public Schools
Thomas Calhoun Walker Education Center
6099 T.C. Walker Road
Gloucester, VA 23061
• Craig W. Smith • Ph: 804-693-7927 • Fx: 804-693-4526 • Em: cwsmith@gc.k12.va.us •

Gloucester County Public Schools
Revised: 1/8/2015
PART B.  

APPROVED PANEL OF PHYSICIANS

<table>
<thead>
<tr>
<th>Practice</th>
<th>Phone</th>
<th>Fax</th>
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</thead>
<tbody>
<tr>
<td><strong>Riverside Urgent Care at Hayes</strong></td>
<td><strong>804-684-5565</strong></td>
<td><strong>804-684-5863</strong></td>
</tr>
<tr>
<td>Hayes, VA 23072</td>
<td>David Justis, MD</td>
<td>Bonnie Riportelli, MD</td>
</tr>
<tr>
<td></td>
<td>SuChong Weber, MD</td>
<td>Raul Rodriguez, MD</td>
</tr>
<tr>
<td></td>
<td>Deborah Bostock, MD</td>
<td>Lalani McCann, MD</td>
</tr>
<tr>
<td><strong>Occupational Medicine and Family Practice</strong></td>
<td><strong>757-599-3623</strong></td>
<td><strong>757-599-1819</strong></td>
</tr>
<tr>
<td>732 Thimble Shoals Blvd., Suite 102</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Newport News, Virginia 23606</td>
<td>Roxanne Dietzler, DO</td>
<td></td>
</tr>
<tr>
<td><strong>TPMG—Yorktown (Family Practice)</strong></td>
<td><strong>757-898-7261</strong></td>
<td><strong>757-890-0139</strong></td>
</tr>
<tr>
<td>307 Cook Rd.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Yorktown, VA 23692</td>
<td>John Bryant, MD</td>
<td>Hawes Campbell, III, MD</td>
</tr>
<tr>
<td></td>
<td>Ann Marie Campolattaro, MD</td>
<td>Carl Lindeman, MD</td>
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</tbody>
</table>

*Note: TPMG is the Tidewater Physicians Multispecialty Group*

<table>
<thead>
<tr>
<th>Practice</th>
<th>Phone</th>
<th>Fax</th>
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</thead>
<tbody>
<tr>
<td><strong>M.D. Express Urgent Care</strong></td>
<td><strong>804-824-9962</strong></td>
<td><strong>804-824-9963</strong></td>
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<tr>
<td>6567 George Washington Mem. Hwy</td>
<td></td>
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<tr>
<td>Gloucester, VA 23061</td>
<td>Michael Renforth, M.D.</td>
<td>Su Chong Weber, M.D.</td>
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<tr>
<td></td>
<td>Michael Rogowski, M.D.</td>
<td>Chan Park, M.D.</td>
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<tr>
<td></td>
<td>April Foster, M.D.</td>
<td>Charanjit Virk, M.D.</td>
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<tr>
<td></td>
<td>Alex Rizk, M.D.</td>
<td>Nancy Ferrel, M.D.</td>
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<tr>
<td></td>
<td>Elisa Labenne, M.D.</td>
<td>Eric Obie, M.D.</td>
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<tr>
<td></td>
<td>Olu Gisanrin, M.D.</td>
<td>Amaris Jitaru, M.D.</td>
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<tr>
<td></td>
<td>Carol Purdy, DO</td>
<td></td>
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<tr>
<td><strong>Newport News</strong></td>
<td><strong>757-369-9446</strong></td>
<td><strong>757-369-9554</strong></td>
</tr>
<tr>
<td>12997 Warwick Boulevard</td>
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<td></td>
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<tr>
<td>Newport News, VA 23602</td>
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</tr>
<tr>
<td>Ph: 757-369-9446 Fx: 757-369-9554</td>
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<tr>
<td><strong>Hampton</strong></td>
<td></td>
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<tr>
<td>3321 West Mercury Boulevard</td>
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<tr>
<td>Hampton, VA 23666</td>
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</tr>
<tr>
<td>Ph: 757-224-0056 Fx: 757-224-0166</td>
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<tr>
<td><strong>Yorktown/Grafton</strong></td>
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<tr>
<td>Grafton Square, 4740 George Washington Mem.</td>
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<tr>
<td>Hwy., Suite A Yorktown, VA 23693</td>
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<tr>
<td>Ph: 757-890-6339 Fx: 757-890-6260</td>
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<tr>
<td><strong>Williamsburg</strong></td>
<td></td>
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<tr>
<td>120 Monticello Avenue at Richmond Road</td>
<td></td>
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<tr>
<td>Williamsburg VA 23185-2813</td>
<td></td>
<td></td>
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<tr>
<td>Ph: 757-564-3627 Fx: 757-564-6449</td>
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Gloucester County Public Schools
Thomas Calhoun Walker Education Center
6099 T.C. Walker Road
Gloucester, VA 23061
- Craig W. Smith • Ph: 804-693-7927 • Fx: 804-693-4526 • Em: cwsmith@gc.k12.va.us

GLOUCESTER COUNTY PUBLIC SCHOOLS
WORKERS’ COMPENSATION MEDICAL RELEASE FORM and PANEL OF PHYSICIANS & SPECIALISTS

Revised: 1/8/2015
PART C. APPROVED PANEL OF SPECIALISTS

PLEASE NOTE: The authorized treating panel physician directs the referral process to the authorized treating specialist physician, which may or may not include one of the physicians noted below.

Hampton Roads Orthopedics and Sports Medicine
Phone: 757-873-1554  Fax: 757-873-3239
730 Thimble Shoals Blvd., Suite 130
Newport News, Virginia  23606
John Aldridge, MD
Anthony Carter, MD
Thomas Fithian, MD
Adrian Baddar, MD
Daniel Cavazos, MD
Jon Swenson, MD

Sentara Orthopedics and Sports Medicine
Phone: 757-253-0603  Fax: 757-645-2701
5335 Discovery Park Blvd., Suite B
Williamsburg, Virginia  23188
Charles Wilhelm, MD
Larry Washburn, MD
Alexander Lambert, MD

TPMG Orthopedics
Tidewater Physicians Multispeciality Group Orthopedics
860 Omni Blvd., Suite 203
Newport News, Virginia  23606
Daniel Carr, MD
Jeffery Moore, MD
Thomas Durbin, MD
Robert Grant, MD
Michael Potter, MD
Lara Quinlan, MD

TPMG Orthopedics
Tidewater Physicians Multispeciality Group Orthopedics
4125 Ironbound Rd., Suite 200
Williamsburg, Virginia  23188
Daniel Carr, MD
Michael Potter, MD
Jim Dallas, MD
Jeffery Moore, MD
Andre Johnson, MD
Lara Quinlan, MD

Tidewater Ortho
5208 Monticello Avenue, Suite 180
Williamsburg, VA  23188
Colin M. Kingston, MD
Michael E. Higgins, MD
Nicholas K. Sabljan, MD
Paul Maloof, MD

Tidewater Ortho
901 Enterprise Parkway, Suite 900
Hampton, VA  23666
Loel Z. Payne, MD
Jonathan R. Mason, MD
John J. McCarthy III, MD
Robert M. Campolattaro, MD
Nicholas A. Smerlis, MD
Amanda Watkins, PA-C

Orthopaedic & Spine Center
250 Nat Turner Blvd.
Newport News, VA  23606
Boyd W. Haynes, MD
Jeffrey R. Carlson, MD
Mark W. McFarland, DO
Jeffrey F. Andrus, MD
Robert J. Snyder, MD
Martin R. Coleman, MD
Raj N. Sureja, MD
John D. Burrow, MD

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• Craig W. Smith • Ph: 804-693-7927 •
• Fax: 804-Fx: 804-693-4526 •
• Em: cwsmith@gc.k12.va.us •

All medical billing and return-to-work documentation, as well as questions or inquiries, may be directed to the attention of: • Craig W. Smith in Employee Services & Communications •  Phone: (804) 693-7927 • Phone: (804) 693-4526 • Email: cwsmith@gc.k12.va.us • or our Workers’ Compensation insurance provider noted above (VACORP).

Gloucester County Public Schools  Revised: 1/8/2015
To the Injured Worker:
On your first visit, please give this notice to any pharmacy listed on the back side to speed processing your approved workers’ compensation prescriptions (based on the guidelines established by your employer).
Questions or need assistance locating a participating retail network pharmacy? Call the Express Scripts Patient Contact Center at 800.945.5951.

Atencion Trabajador lesionado:
Este formulario de identificación para servicios temporales de prescripción de recetas por compensación del trabajador DEBERÁ SER PRESENTADO a su farmacéutico al surtir su(s) receta(s) inicial(es).
Si tiene cualquier duda o necesita localizar una farmacia participante, por favor contacte al área de Atención a Clientes de Express Scripts, en el teléfono 800.945.5951.

To the Pharmacist:
Express Scripts administers this workers’ compensation prescription program. Please follow the steps below to submit a claim. Standard claim limitations include quantity exceeding 150 pills or a day supply exceeding 14 days. This form is valid for up to 30 days from DOI. Limitations may vary. For assistance, call Express Scripts at 888.786.9640.

Pharmacy Processing Steps
Step 1: Enter bin number 003858
Step 2: Enter processor control A4
Step 3: Enter the group number as it appears above
Step 4: Enter the injured worker’s nine-digit ID number
Step 5: Enter the injured worker’s first and last name
Step 6: Enter the injured worker’s date of injury
(enter in DOI field in the format YYYYMMDD)

Express Scripts

ID #:
Your SSN is your temporary ID number; present to the pharmacy at the time prescription is filled. You will receive a new ID number shortly.
Date of Injury: __________/__________/_________ MM/DD/YYYY
Group #: M5L2017
Employee Date of Birth: __________/__________/_________

Thank you for using a participating retail network pharmacy. Even though there is no direct cost to you, it’s important that we all do our part to help control the rising cost of healthcare.
Please see other side for a list of participating retail network pharmacies.

To the Supervisor or Injured Worker:

Employee Information
First
M
Last

Street Address or PO Box

City
State
ZIP

Employer Name
Gloucester County Public Schools
6099 T.C. Walker Road
Gloucester, VA 23061
Em: cwsmith@gc.k12.va.us
Ph: (804) 693-7927
Fx: (804) 693-4526

For additional information or questions about this service, please contact Craig Smith at the phone number or email address above.
<table>
<thead>
<tr>
<th>ACCREDO HEALTH GROUP</th>
<th>GIANT DISCOUNT DRUG</th>
<th>RICHMOND TREATMENT CENTER</th>
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<td>RX SERVICE</td>
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<td>GLOUCESTER PHARMACY</td>
<td>SAFEWAY PHARMACY</td>
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<td>SAM'S CLUB</td>
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<td>KAISER PERMANENTE PHCY</td>
<td>SHOPPERS PHARMACY</td>
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<td>STERLING AUTOMATED REFiLL CnTR</td>
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<td>UKROP'S PHARMACY</td>
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<td>NEIGHBORCare PHARMACY</td>
<td>WALGREEN'S</td>
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<td>WAL-MART</td>
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<td>WEGMANS FOOD MARKETS</td>
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<td>WEGMANS PHARMACY</td>
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<td>RICHMOND SOUTHSIDE TREATMENT CENTER</td>
<td>WEIS PHARMACY</td>
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**Gloucester County Public Schools**
6099 T.C. Walker Road
Gloucester, VA 23061
Em: cwsmith@gc.k12.va.us
Ph: (804) 693-7927
Fx: (804) 693-4526

**HAVE A QUESTION?**
Please contact Craig Smith

For additional information or questions about this service, please contact Craig Smith at the phone number or email address above.