



NORTH ORANGE COUNTY
COMMUNITY COLLEGE DISTRICT

1830 W. ROMNEYA DRIVE, ANAHEIM, CA 92801 - (714) 808-4779
AFTER HOURS CONTACT: 714-412-9760

INTRADISTRICT CORRESPONDENCE

To: Injured/Ill Employee
From: Tami A. Oh, District Risk Manager
Subject: Reporting On-The Job Injuries

As an employee of North Orange County Community College District (District), you are entitled to workers' compensation benefits if you sustain a work related injury or illness.

Attached are ***Workers' Compensation Claim Form (DWC-1) & Notice of Potential Eligibility, Employee's Account of the Injury, and Authorization*** forms. If your injury is a reportable claim, completion of first these attached forms is absolutely necessary in order to evaluate your claim and provide the necessary benefits. If your injury requires continued treatments, prescription medications, or if you were unable to work at least one full day after the date of injury, it is considered a reportable claim. If this is your case, please complete the *Employee* portion (top) of the Claim (DWC-1), *Employee's Account of the Injury*, and the *Authorization* forms and return them to the Risk Management department at Anaheim Campus IMMEDIATELY.

Any delay in reporting a work-related injury/illness or in the filing of the attached claim form may jeopardize your workers' compensation benefits or delay the processing of your claim. Upon receipt of the completed claim form, you will receive an acknowledgment copy of the form and a benefits letter, if applicable. **If you are in need of medical attention, you must obtain authorization for treatment from your manager, Campus Health Center personnel, or myself, and receive treatment at one the following designated occupational medical facilities:**

St. Jude Heritage Medical Group, Department of Occupational & Environmental Health Services
2720 N. Harbor Blvd., Suite 130, Fullerton, CA 92835 (Open 24 hrs, 7 days) Tel. 714-449-6200
Located on Harbor Blvd. between Bastanchury and Imperial Hwy (Hwy 90) **Please note that St. Jude Medical Center/emergency room appear first as you are heading north bound on Harbor Blvd. Continue on Harbor until you pass Bastanchury and the occupational medical center is on the right side.**

First Care Industrial Medicine Center (Health Point Medical Group, Inc./S. Cal Orthopedic Sports Medicine Center)
7052 Orangewood Ave #6, Garden Grove, CA 92841 (Open 24 hrs, 7 days a week) Tel. 714-903-1100
Located on the corner of Knott Avenue and Orangewood Avenue

Concentra-La Palma
26 Centerpointe Drive, Suite 115, La Palma, CA 90623 (Open 24 hrs, 7 days) Tel. 714-522-8020
Located between Walker and Valley View Avenue on the north side of Orangethorpe Avenue. Turn left at the stop sign as you enter Centerpointe Drive.

Please note that the cost of medical treatment with a non-approved physician will NOT be honored under the District's Workers' Compensation program. Therefore, it is critical that you receive medical care through an authorized physician. If you cannot reach your manager or visit the campus health center for any reason, please contact me at 714-808-4779 or 714-412-9760. (24/7). More information regarding available medical providers is on the next page.

If the listed facilities are not convenient, there are other medical facilities available within the District's Medical Provider Network. As notified separately, the North Orange County Community College District is participating in the Workers' Compensation Medical Provider Network – WellComp MPN, effective November 1, 2005. This program offers more choices for medical services for those employees who are seeking alternate medical providers. For additional information, please contact WellComp Patient Services Department directly via telephone at (800) 544-8150, or (909) 608-7171 ext. 411, send e-mail to info@WellComp.net, or visit the WellComp web-site: www.WellComp.net.

If you have an *Employee's Request for Pre-Designation of Physician* form on file with the District office **prior** to this injury/illness, you may use your pre-designated physician for treatment of this work related injury/illness. However, in the event of a life-threatening emergency, you will be directed to the closest emergency facility available. If you utilize your personal physician, you may wish to verify that the correct information is on file with this office. Otherwise, **any unauthorized visits or charges incurred may ultimately be your responsibility.**

The attached *Authorization for the Release of Medical/Employment Records* must be signed and returned to this office as it is required by your treating physician before medical information can be released to our workers' compensation administrator.

I wish you a speedy recovery. Please feel free to call me at (714) 808-4779 or send e-mail to: toh@noccd.edu if you have any questions or concerns regarding these forms, request for medical treatment, or any additional questions related to your injury. Your cooperation in promptly returning these forms is greatly appreciated.

Attachments: *Compensation Claim Form (DWC-1) & Notice of Potential Eligibility*
Employee's Account of Injury
Medical Authorization