

EMPLOYEE INSTRUCTIONS FOR CLAIMS REPORTING

Please read the entire contents of the packet and follow directions below.

1. Call **1-800-445-6965** to report your work-related claim as soon as possible.
2. Advise your Workers' Compensation Coordinator that you have reported your work-related claim.
3. You must seek medical treatment for your claimed injury with one of the providers listed on your **POSTED PANEL** for ninety (90) days from the date of your first visit.
4. Please use the enclosed Pharmacy Sheet and temporary pharmacy card. You may fill your prescription at your local Walgreen's, CVS Pharmacy, Rite Aid, Wal-Mart, Giant, Acme or Eckerd. The Jordan Reses Company, our pharmacy management company, will send you a personalized pharmacy card for future prescriptions. Jordan Reses can be reached at: 1-800-848-4050.
5. Please provide your claim number and SDIC's address to all medical providers.
6. Please complete the enclosed documents as promptly as possible.
7. Please notify your **Claims Representative at SDIC** and your **Workers' Compensation Coordinator** immediately when you receive a **return to work date**.

Please call **1-800-445-6965** if you need any assistance or have questions regarding your work-related injury.

**School Districts Insurance Consortium
P.O. Box 1249
North Wales, PA 19454**

1-800-445-6965