Pennsylvania Workers’ Compensation and Workplace Safety
Please take a few minutes to complete and return this brief survey and help the bureau continue to produce a quality publication that meets the needs of Pennsylvania's workers' compensation community. (Your answers are confidential; we do not require your name or affiliation.)

Comments are always welcome, but to have your responses considered during production of the 2010 Annual Report, please return your completed survey by Feb. 1, 2011, to the following address:

Bureau of Workers’ Compensation
Information Services Section
1171 S. Cameron St., Room 324
Harrisburg, PA 17104-2501

1. Does your organization have a need for a hard copy Annual Report, or is online availability sufficient?

2. How is the Annual Report used in your organization?

3. What feature(s) do you consider the most useful?

4. What feature(s) do you consider the least useful?

5. Is there a current feature in the Annual Report that you believe could be improved? How should it be improved?

6. Are there certain statistics or a particular area of interest not currently covered that you would like to see reported in the future?

7. Do you have any other comments about the Annual Report?

Thank you for your interest in the Workers’ Compensation and Workplace Safety Annual Report.
Sandi Vito
Secretary for Labor & Industry

The Department of Labor & Industry’s Bureau of Workers’ Compensation and Office of Adjudication continued on a trajectory of achievement in 2009 that resulted in a workers’ compensation system providing even more efficient service to Pennsylvania’s workers, employers and insurers.

We have strengthened online services by increasing the number of forms that can be filed electronically, adding the notices of Compensation Denial, Stopping Temporary Compensation, Temporary Compensation Payable and Compensation Payable.

Revised self-insurance regulations, published as proposed rulemaking in April 2009, increase the clarity and consistency of existing procedures, provide more objective standards for qualifying for, and maintaining self-insurance status, and strengthen the department’s ability to effectively monitor and regulate workers’ compensation self-insurance in Pennsylvania.

More than 8,500 employers in the private and public sectors have developed state-certified workplace safety committees, through which collaboration between labor and management now protects more than 1.1 million workers and has provided businesses with workers’ compensation insurance premium savings totaling more than a third of a billion dollars.

Improved workplace safety, combined with a modern, efficient workers’ compensation system, will strengthen Pennsylvania and help it meet the challenges of competing successfully in a global marketplace.

Sincerely

Sandi Vito
In 2009, the Bureau of Workers’ Compensation and Workers’ Compensation Office of Adjudication accelerated efforts to provide the best possible customer service to all stakeholders.

The Office of Adjudication expanded the availability of alternate dispute resolution services by increasing the number of workers’ compensation judges providing mediation services and improving the delivery of the services through the hearing offices. Of the 6,162 claims mediated, 49 percent resulted in resolution of the claim.

We decreased the average amount of time it takes to decide cases to an all-time low 6.8 months. This statewide average has decreased every year since 2002, and has been reduced from 11.8 months in 1998. As judges continue to decide more cases than receive new petitions, the number of cases pending for more than 18 months has been reduced by 27 percent since 2007.

The Bureau of Workers’ Compensation continued to streamline processes and improve efficiency. Electronically, more forms can be filed, transactions completed and information provided.

Technological progress will continue in 2010 as the Office of Adjudication and the Bureau of Workers’ Compensation and Workers’ Compensation Appeal Board develop and implement a new computer system that will create greater efficiencies and provide even better service.

I congratulate everyone who has helped us to provide services more efficiently and be more responsive to our constituents. I look forward to even greater success in the years to come.

Sincerely,

Elizabeth Crum
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During 2009, the Bureau of Workers’ Compensation continued to build on the successes of previous years and to add new success stories in many areas of the bureau’s operation.

The Health and Safety Division’s data processing and management system, HandS, continues to pay dividends. By the end of 2009, the number of certified workplace safety committees exceeded 8,500, covering more than 1.1 million employees. Since the inception of the program, Pennsylvania employers with certified safety committees have realized more than $356,000,000 in workers’ compensation premium discounts. The convenience and accuracy of the HandS system have contributed greatly to the awareness and effectiveness of the program, and the Health and Safety Division is constantly fine-tuning HandS to make it more convenient and efficient to use.

The Uninsured Employers Guaranty Fund has seen continued growth and, as before, the bureau continues its emphasis on securing the payment of benefits when due from the uninsured employer. The number of cases filed with the fund exceeds 800. Together with our legal staff, the bureau has achieved reimbursements to the fund through the imposition of liens on bank accounts and other legal processes.

Another area in which we have realized success is the medical fee review program. Due to the hard work of the Health Care Services Review Division, we have seen the number of pending fee review cases decline from approximately 23,000 to about 6,500 during the course of the year, with an accompanying improvement in the average time for issuing determinations. Moreover, the Health Care Services Review Division remains committed to further decrease the number of pending cases and to continue to improve timeliness.

2009 also brought the new 6th edition of the AMA Guides to the Evaluation of Permanent Impairment. This new edition required our Health Care Services Review Division to ensure that all physicians on the bureau’s impairment rating evaluation (IRE) list attain the necessary certification to continue to provide qualified medical evaluations to insurers and claimants in accordance with the Workers’ Compensation Act. The Health Care Services Review Division notified all the IRE physicians of the new requirements and verified certifications by the time of the effective date of the new guides.

We also have seen improvement in our service to the workers’ compensation community in the Self-Insurance Division. This division completed the implementation of Internet-based financial analysis services to better determine an applicant’s financial ability to self-insure. This improved information tool enhances the division’s ability to protect the injured employees of these companies from the consequences of business failure.

I have highlighted only some of the achievements of our dedicated staff at the bureau during 2009. In order to appreciate the full story of our achievements this year, don’t overlook the individual reports from our divisions and sections in the rest of this report.

Sincerely,

John Kupchinsky
A Brief History of Pennsylvania Workers’ Compensation Law

In 1915, the Pennsylvania Legislature enacted the Pennsylvania Workmen’s (Workers’) Compensation Act (Act). The statute charges the Department of Labor & Industry (department), Bureau of Workers’ Compensation (bureau), with carrying out the administrative and appeal obligations defined in the Act and specifies compensation for employees who are injured as a result of employment without regard to fault. Amendments eventually merged the compensation for injuries and occupational diseases into this Act. The statute defines the benefits available to Pennsylvania workers, the conditions under which benefits are available and the procedures for obtaining them.

The workers’ compensation system protects employees and employers. Employees receive medical treatment and are compensated for wage loss associated with work-related injuries and disease, and employers provide for the cost of such coverage while being protected from direct lawsuits by employees.

Workers’ compensation coverage is mandatory for most employers under Pennsylvania law. Employers who do not have workers’ compensation coverage may be subject to lawsuits by employees and to criminal prosecution by the commonwealth.

Some employers are exempted from workers’ compensation coverage. Exemptions include: people covered under other workers’ compensation acts, such as railroad workers, longshoremen and federal employees; domestic servants (coverage is optional); agricultural workers who work fewer than 30 days or earn less than $1,200 in a calendar year from one employer; and employees who have requested, and been granted, exemption due to religious beliefs or their executive status in certain corporations.

In Pennsylvania, employers can obtain workers’ compensation insurance through a licensed insurance carrier or the State Workers’ Insurance Fund. In addition, employers can apply to the bureau to seek approval to self-insure their liability. Self-insurance is granted by the bureau based on criteria established by the Act and the department.

Employees are covered for the entire period of their employment. Therefore, coverage begins the first day on the job. Injuries or diseases caused or aggravated by employment are covered under workers’ compensation, regardless of the employee’s previous physical condition.

Mission Statement

The Pennsylvania workers’ compensation program was established to reduce injuries and provide wage-loss and medical benefits to Pennsylvania employees who become ill or injured through the course of their employment so they can heal and return to the workforce.

The bureau is responsible for carrying out the provisions of the Act and related legislation and for fulfilling the overall purpose of Pennsylvania’s workers’ compensation system. In carrying out the requirements of the Act, the bureau has several primary roles:

1. Obtain, review and maintain records on certain loss-time work injuries and benefit documents.
2. Certify individual self-insured employers and self-insured employer pools and determine their monetary security requirements.
3. Resolve areas of contention among the participants in the workers’ compensation system.
4. Enforce the provisions of the Act.
5. Promote the health and safety of Pennsylvania’s employees in accordance with the 1993 and 1996 amendments to the Act.
Basic Benefits

1. Replacement of Lost Wages. A portion of the workers’ salary – up to a maximum amount provided by law – is paid for the time lost from work as a result of a work-related disability, if the disability lasts longer than seven calendar days. These payments are tax free. The maximum allowable weekly benefit for calendar year 2009 was $836. Partial disability benefits consisting of two-thirds of the gross difference in wage loss for up to 500 weeks are paid to employees who suffer a partial disability resulting from a work-related injury or disease. Benefits can possibly be subject to other reductions or offsets.

2. Payment of Medical Expenses. Reasonable and necessary work-related medical expenses are paid regardless of the duration of required treatment and apply even though the employee may not have lost time from work.

3. Specific Loss Benefits. Benefits are payable if a work-related injury results in loss of vision, hearing and/or the use of limbs (including fingers and toes). Specific loss benefits are paid without regard to the amount of time lost from work. A separate healing period is also defined for each loss.

4. Disfigurement Benefits. Benefits are payable if there is a serious, permanent disfigurement of the head, face or neck.

5. Death Benefits. The employee’s dependents may claim benefits if a work-related injury or disease results in the employee’s death. Also, reasonable burial expenses are payable to a maximum amount set by law.

6. Subsequent Injuries. Additional compensation may be available through the Subsequent Injury Fund. This fund is administered by the commonwealth and pays workers who have had a specific loss of use for a hand, arm, foot, leg or eye and who incur total disability caused by loss of use of another hand, arm, foot, leg or eye. Then, the commonwealth makes payments for the duration of the workers’ total disability.
## Benefits Paid, 2006-2009

*Indemnity and Medical Breakdown*

<table>
<thead>
<tr>
<th>Year</th>
<th>Indemnity Compensation Paid</th>
<th>Medical Compensation Paid</th>
<th>Total Compensation Paid</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>2009</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Insurance Carriers</td>
<td>$1,050,062,249</td>
<td>$893,381,089</td>
<td>$1,943,443,338 (67.8%)</td>
</tr>
<tr>
<td>SWIF*</td>
<td>$179,631,841</td>
<td>$130,223,066</td>
<td>$309,854,907 (10.8%)</td>
</tr>
<tr>
<td>Individual Self-Insurers</td>
<td>$297,061,327</td>
<td>$253,083,673</td>
<td>$550,145,000 (19.2%)</td>
</tr>
<tr>
<td>Group Self-Insurance Funds</td>
<td>$31,706,554</td>
<td>$31,800,326</td>
<td>$63,506,880 (2.2%)</td>
</tr>
<tr>
<td>Total</td>
<td>$1,558,461,971 (54.36%)</td>
<td>$1,308,488,154 (45.64%)</td>
<td>$2,866,950,125 (100%)</td>
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<tr>
<td><strong>2008</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Insurance Carriers</td>
<td>$1,009,903,757</td>
<td>$876,147,539</td>
<td>$1,886,051,296 (66.1%)</td>
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<tr>
<td>SWIF*</td>
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<td>$348,632,431 (12.2%)</td>
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<tr>
<td>Individual Self-Insurers</td>
<td>$318,547,152</td>
<td>$240,682,698</td>
<td>$559,229,850 (19.6%)</td>
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<tr>
<td>Group Self-Insurance Funds</td>
<td>$29,190,775</td>
<td>$30,632,337</td>
<td>$59,823,112 (2.1%)</td>
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<tr>
<td>Total</td>
<td>$1,576,086,028 (55.23%)</td>
<td>$1,277,650,661 (44.77%)</td>
<td>$2,853,736,689 (100%)</td>
</tr>
<tr>
<td><strong>2007</strong></td>
<td></td>
<td></td>
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<tr>
<td>Insurance Carriers</td>
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<td>$800,729,087</td>
<td>$1,793,591,924 (65.3%)</td>
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<tr>
<td>SWIF*</td>
<td>$200,050,570</td>
<td>$142,100,777</td>
<td>$342,151,347 (12.5%)</td>
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<tr>
<td>Individual Self-Insurers</td>
<td>$328,441,448</td>
<td>$226,823,493</td>
<td>$555,264,941 (20.2%)</td>
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<tr>
<td>Group Self-Insurance Funds</td>
<td>$27,914,824</td>
<td>$28,660,144</td>
<td>$56,574,968 (2.0%)</td>
</tr>
<tr>
<td>Total</td>
<td>$1,549,269,679 (56.39%)</td>
<td>$1,198,313,501 (43.61%)</td>
<td>$2,747,583,180 (100%)</td>
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<tr>
<td><strong>2006</strong></td>
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<tr>
<td>Insurance Carriers</td>
<td>$972,282,307</td>
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<td>SWIF*</td>
<td>$178,666,723</td>
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<tr>
<td>Individual Self-Insurers</td>
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<td>$219,232,965</td>
<td>$545,555,706 (20.3%)</td>
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<tr>
<td>Group Self-Insurance Funds</td>
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<td>$28,573,993</td>
<td>$54,161,515 (2.0%)</td>
</tr>
<tr>
<td>Total</td>
<td>$1,502,859,293 (55.99%)</td>
<td>$1,181,505,668 (44.01%)</td>
<td>$2,684,364,961 (100%)</td>
</tr>
</tbody>
</table>

*SWIF: State Workers’ Insurance Fund

Source: Bureau of Workers’ Compensation, Pennsylvania Department of Labor & Industry
Total Workers’ Compensation Paid (Medical and Indemnity) 2006-2009

Indemnity Compensation Paid

<table>
<thead>
<tr>
<th>Year</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
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<td>$1,500,000,000</td>
</tr>
<tr>
<td>2007</td>
<td>$1,520,000,000</td>
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<tr>
<td>2008</td>
<td>$1,560,000,000</td>
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<tr>
<td>2009</td>
<td>$1,580,000,000</td>
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</tbody>
</table>

Medical Compensation Paid

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<th>Year</th>
<th>Amount</th>
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<tbody>
<tr>
<td>2006</td>
<td>$2,700,000,000</td>
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<tr>
<td>2007</td>
<td>$2,800,000,000</td>
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<tr>
<td>2008</td>
<td>$2,850,000,000</td>
</tr>
<tr>
<td>2009</td>
<td>$2,900,000,000</td>
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</tbody>
</table>

Total Compensation Paid

<table>
<thead>
<tr>
<th>Year</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>2006</td>
<td>$4,300,000,000</td>
</tr>
<tr>
<td>2007</td>
<td>$5,200,000,000</td>
</tr>
<tr>
<td>2008</td>
<td>$5,500,000,000</td>
</tr>
<tr>
<td>2009</td>
<td>$5,800,000,000</td>
</tr>
</tbody>
</table>
Employers are required to post form LIBC-500, *Remember: It Is Important to Tell Your Employer About Your Injury*, to inform employees of the name, address and phone number of their workers’ compensation insurance company, their third-party administrator or internal workers’ compensation contact person.

An employee injury is to be reported to the employer within 21 days; if not reported within 120 days from date of injury or having knowledge of a work-related disease, no compensation is allowed (except for cases involving progressive diseases).

Employers are required to immediately report all employee injuries to their insurer or, if self-insured, to report them to the person responsible for management of the employer’s workers’ compensation program. Employers are also required to file a First Report of Injury (formerly the Employer’s Report of Occupational Injury or Disease) with the Bureau of Workers’ Compensation within 48 hours for every injury resulting in death, and within seven days for all other injuries that result in disability lasting more than a day, shift or turn of work. This document must be submitted electronically.

Within 21 days from the date the employee provides notification of an injury, the employer/carrier denies liability and issues a Notice of Workers’ Compensation Denial (LIBC-496) to the employee. The claim is now closed, though the injured worker can seek legal advice to pursue a claim through the litigation system. See the Flow of a Litigated Workers’ Compensation Claim on page 11 for more information.

Within 21 days from the date the employee provides notification of an injury, the employer/carrier issues a Notice of Temporary Compensation Payable (LIBC-501) to extend the investigation period to 90 days before accepting or denying full liability for the injury. This must be filed with the bureau in conjunction with the Statement of Wages (below).

When the employer elects to stop paying the injured worker temporary compensation, a Notice Stopping Temporary Compensation (LIBC-502) is completed. The employer may then issue either a Notice of Workers’ Compensation Denial, Notice of Compensation Payable or Agreement for Compensation.

Within 21 days from the date the employee provides notification of an injury, the employer/carrier accepts liability for the injury and issues a Notice of Compensation Payable (LIBC-495). This must be filed with the bureau in conjunction with the Statement of Wages (below).

Within 21 days from the date the employee provides notification of an injury, the employer/carrier accepts liability for the injury and issues an Agreement for Compensation (LIBC-336). This must be filed with the bureau in conjunction with the Statement of Wages (below).

Employers must use the Statement of Wages (LIBC-494C) to calculate the employee’s wages and should send a copy to the injured employee. This form must be submitted concurrently with a Notice of Temporary Compensation Payable, Notice of Compensation Payable or an Agreement for Compensation (above).

When an injured worker returns to their previous employment, the insurer may file a Notice of Suspension or Modification (LIBC-751) within seven days of the injured party’s return to work. Additional LIBC-751s for further modifications may be filed as necessary within seven days of the modification date.

The insurer must file the LIBC-392A, Final Statement of Account of Compensation Paid, with the bureau after the final payment of compensation.

The insurer may file a Supplemental Agreement (LIBC-337) to alter the worker’s benefits.

The insurer must file the LIBC-392A, Final Statement of Account of Compensation Paid, with the bureau after the final payment of compensation.

The Final Receipt (LIBC-340) is filed when an injured worker’s benefits terminate. The worker has three years from the date of the last received workers’ compensation check to file a claim petition contesting the termination of payments.
Employers are required to post form LIBC-500, *Remember: It is Important to Tell Your Employer About Your Injury*, to inform employees of the name, address and phone number of their workers’ compensation insurance company, their third-party administrator or internal workers’ compensation contact person.

An employee injury is to be reported to the employer within 21 days; if not reported within 120 days from date of injury or having knowledge of a work-related disease, no compensation is allowed (except for cases involving progressive diseases).

Employers are required to immediately report all employee injuries to their insurer or, if self-insured, to report them to the person responsible for management of the employer’s workers’ compensation program. Employers are also required to file a First Report of Injury (formerly Employer’s Report of Occupational Injury or Disease) with the Bureau of Workers’ Compensation within 48 hours for every injury resulting in death, and within seven days for all other injuries that result in disability lasting more than a day, shift or turn of work. This document must be submitted electronically.

Within 21 days from the date the employee provides notification of an injury, the employer/carrier accepts liability for the injury and issues a Notice of Compensation Payable, a Notice of Temporary Compensation Payable or an Agreement for Compensation. See the Flow of a Pennsylvania Workers’ Compensation Claim on page 10 for more detailed information.

Within 21 days from the date the employee provides notification of an injury, the employer/carrier denies liability and issues a Notice of Workers’ Compensation Denial to the employee.

Generally, the employee has three years from the date of injury to file a Claim Petition (LIBC-362). The law also provides that injured workers may reopen their claim within three years from the last date an indemnity payment was made on a claim. (Mere paying of medical benefits would not be the same as reopening the claim.)

Workers’ compensation petitions are normally assigned to a workers’ compensation judge by the bureau according to the county in which the employee lives.

Once assigned, all parties involved in the case are notified in writing as to the date, time and place of hearing.

A workers’ compensation judge hears evidence presented by both the defendant (employer/insurer) and claimant at one or more hearings that may be extended by the need to obtain medical evidence and hear other witnesses.

The workers’ compensation judge will schedule the case for mediation, unless the judge concludes it would be futile. If this mediation does not take place or lead to settlement, the parties may at any time ask for an informal conference or settlement conference with a workers’ compensation judge.

A written decision is circulated to involved parties after a case is closed (all evidence has been submitted and the judge has everything necessary to render a decision). No further action is taken.

Either party has 20 days from the date the workers’ compensation judge’s decision is circulated to all parties to file an appeal with the Workers’ Compensation Appeal Board.

Either party has 30 days from the date of publication of the Workers’ Compensation Appeal Board’s opinion to file an appeal with the Commonwealth Court.

Either party has 30 days from the date of publication of the Commonwealth Court’s decision to file a Petition for Allowance of an Appeal with the Pennsylvania Supreme Court.
The administration of the Pennsylvania workers’ compensation system is funded by a spending authorization appropriated by the state legislature and approved by the governor. The money for these expenditures comes from five special funds established through assessments:

1. **The Workers’ Compensation Administration Fund**
   - **Purpose:** Provides funding for the administrative operations of the bureau, the Workers’ Compensation Office of Adjudication and the Workers’ Compensation Appeal Board.
   - **Assessment Amount:** For fiscal year 2008/09, the amount assessed totaled $60,010,984 and represented 2.19 percent of compensation paid in calendar year 2007.

2. **The Supersedeas Fund**
   - **Purpose:** To provide relief to employers/insurers for payments made during litigation of claims contesting whether compensation is payable. When an employer/insurer files a petition for termination, modification or suspension of benefits, a supersedeas hearing can also be requested. At this hearing, the workers’ compensation judge can deny the request or grant a temporary order of partial or total suspension of benefits. If the request is denied, but the final decision of the judge is that compensation was not payable, the employer/insurer may apply to be reimbursed from the Supersedeas Fund for “overpayments” made following the initial denial.
   - **Assessment Amount:** For fiscal year 2008/09, the amount assessed was $18,054,158 and represented 0.66 percent of compensation paid in calendar year 2007.

3. **The Subsequent Injury Fund**
   - **Purpose:** To compensation workers who experience certain losses (for example: arm, hand, leg, foot, eye) subsequent to a prior loss.
   - **Assessment Amount:** The total amount of the fund equals the amount expended from the fund in the preceding year. Law requires the fund to have a minimum funding of $100,000. For the 2008/09 fiscal year, the amount assessed totaled $239,112 and represented 0.009 percent of compensation paid in calendar year 2007.

4. **The Self-Insurance Guaranty Fund**
   - **Purpose:** To make payments to any eligible claimant or dependent upon the default of the self-insurer liable to pay compensation or associated costs due under the Pennsylvania Workers’ Compensation Act and the Pennsylvania Occupational Disease Act as amended in 1993. This fund is used when the securities posted by defaulting companies are exhausted, but can only be used for injuries occurring after the 1993 amendments. With the passage of Act 53 of 2000, the General Assembly created a restricted account within the Guaranty Fund called the Prefund Account. The purpose of the Prefund Account is to provide for the continuation of benefits to workers who were injured prior to 1993 and whose self-insured employers have gone bankrupt. Originally, the Prefund Account was financed through the transfer of interest earned in the Administration Fund. However, in June 2001 the General Assembly enacted Act 49, which made the financing of the Prefund Account a budget item of the Administration Fund.
   - **Assessment Determination/Amount:** For new self-insurers starting self-insurance after Oct. 30, 1993, the assessment is 0.5 percent of their modified premium for the 12 months immediately preceding the start of self-insurance. Existing and former self-insurers with runoff claims may be assessed on an as-needed basis at the rate of up to 1 percent of compensation paid annually. For fiscal year 2008/09, the amount assessed was $28,507 and represented 0.5 percent of the annual modified premium of employers starting self-insurance.

5. **Uninsured Employers Guaranty Fund**
   - **Purpose:** To extend workers’ compensation benefits to injured workers whose employers fail to insure, or be approved to self-insure, their liability for work-related injuries. Initial money for the fund was transferred from the Administration Fund, with subsequent funding made from assessments to insurers and self-insured employers.
   - **Assessment Amount:** Assessments have been made annually since 2007. This fund assessed $2,734,367 during 2008/09.
Funding for Pennsylvania’s Workers’ Compensation System

Workers’ Compensation Administration Fund
Budget Fiscal Year 2008/09

Source: Bureau of Workers’ Compensation, Pennsylvania Department of Labor & Industry
The Workers’ Compensation Rules Committee

The Workers’ Compensation Rules Committee’s purpose is to improve the administration of workers’ compensation proceedings.

The committee is comprised of 19 members, including the chairman of the Senate Labor & Industry Committee, the chairman of the House Labor Relations Committee, the director of the Office of Adjudication, the bureau’s deputy chief counsel, the deputy secretary for compensation & insurance, two Workers’ Compensation Appeal Board representatives, four workers’ compensation judges, and eight attorneys representing both employers and employees.

In November 2006, the committee, under the leadership of Chairman Stanley H. Siegel, Esq., convened for the purpose of considering potential revisions to the existing Board Rules and Judges’ Rules. The work of the committee culminated in the publication in the Pennsylvania Bulletin of amendments to chapters 111 and 131 (relating to the Special Rules of Administrative Practice and Procedure before the Workers’ Compensation Appeal Board and Special Rules of Administrative Practice and Procedure before Workers’ Compensation Judges) on Oct. 17, 2009. The changes to the rules were necessary, in part, as a result of amendments to the Workers’ Compensation Act enacted in 2006 through Act 147. These changes included an amendment to the Act that provided for mandatory mediation, changes in the law governing child support payments and advances in technology that allow the Bureau of Workers’ Compensation to accept filings electronically.

Effective Jan. 1, 2010, Siegel resigned as Chairman of the Workers’ Compensation Rules Committee. Siegel had been the Chairman of the Rules Committee (and its predecessor, the Committee for Workers’ Compensation Referees’ Rules and Procedure) since May 13, 1980. The committee, as well as all of those involved in the workers’ compensation system, owes a debt of gratitude to Siegel for his years of service. Under his stewardship the committee was constantly reminded to take into consideration the viewpoint of all stakeholders in its effort to meet its stated purpose: “to improve the administration of workers’ compensation proceedings.” Pittsburgh attorney John W. McTiernan has assumed the position of chair of the committee. In recognition of Siegel’s more than 30 years of service as chair of the committee, McTiernan presented Siegel with a restored locomotive bell, which dovetails with his hobby as a train enthusiast.

The Workers’ Compensation Advisory Council

The Workers’ Compensation Advisory Council was created under Section 447 of the Workers’ Compensation Act. The council is composed of eight members, and the secretary of Labor & Industry is the ex officio member. Members are appointed as follows: one employee and employer representative by the president pro tempore of the Senate, one employee and employer representative by the speaker of the House of Representatives, one employee and employer representative by the minority leader of the Senate and one employee and employer representative by the minority leader of the House of Representatives. Members serve a term of two years or until their successors have been appointed.

The council reviews requests for workers’ compensation funding by the department and any assessments against employers or insurers related thereto, makes recommendations regarding certification of utilization review organizations and preferred provider organizations, reviews proposed legislation and regulations and reviews the annual medical accessibility study. The findings are reported to the governor, the department secretary and the legislature.

Two co-chairs, representing labor and management, and the rest of the council hold public meetings to discuss various issues of the department, bureau and legislature.

Kids’ Chance of Pennsylvania Inc.

Kids’ Chance of Pennsylvania Inc. is a nonprofit organization providing college and vocational school scholarships to children of Pennsylvania workers who have been seriously or fatally injured in a work-related accident or illness that has resulted in financial need. Each year, Kids’ Chance makes a significant difference in the lives of affected Pennsylvania families by providing scholarship support to help eligible students pursue and achieve their higher education goals.
Developed and sustained by concerned groups and individuals involved in workers’ compensation-related matters since its founding in 1997, Kids’ Chance of Pennsylvania has awarded more than 334 scholarship grants to eligible applicants totaling more than $532,750. Support for Kids’ Chance of Pennsylvania’s operations and scholarships comes directly from tax-deductible charitable contributions made by companies, professional firms and membership organizations, as well as individuals and community groups. The total amount disbursed to eligible students each year is dependent upon charitable donations received and the qualifications of students who apply. Grants are for one academic year and generally range from $1,000 to $2,000. Through grants from ACE Charitable Foundation, Alliance Impairment Management Inc., Eastern Alliance Insurance Group, Georgelis Law Firm P.C., Hoover Rehabilitation Services, PA Bar Association – WC Section, The Chartwell Law Offices LLP and Universal SmartComp, Kids’ Chance of Pennsylvania has been able to provide special grants, generally $5,000, for eligible applicants demonstrating a high level of both academic promise and financial need.

For more information, to apply for a scholarship or to make a donation, please visit www.kidschanceofpa.org, e-mail info@kidschanceofpa.org or phone 610.970.9143.

21-Day Compliance

The Pennsylvania Workers’ Compensation Act requires insurers and self-insured employers to either accept or deny a claim within 21 days of notice or knowledge of an employee’s disability. The bureau continues to monitor the 21-day compliance rate of insurers and self-insured employers.

Individual 21-day reports were issued for the reporting period of Jan. 1, 2007, through Dec. 31, 2007, to all insurers and self-insured employers with a 60-day reconsideration period to allow the opportunity for challenges prior to publication of the results on the department’s website. The statewide industry average for that period was 70 percent.

For 2008, the bureau provided individual reports for the reporting period of Oct. 1, 2008, through Dec. 31, 2008, with a 45-day reconsideration period to allow the opportunity for challenges prior to publication of the results on the department’s website. The statewide industry average for that period was 71 percent. The details for the published report are being compiled and will be published on the website in the near future.

Both 2007 and 2008 reports identified each insurer and self-insured employer by name and bureau code, the total number of claims filed in the reporting period, total number of passed and failed claims, the length of the reporting period and the failed percentage.

Total Disability Weekly Workers’ Compensation Rates

The following table illustrates the weekly workers’ compensation rates used to calculate benefits payable to an injured employee.

<table>
<thead>
<tr>
<th>Statewide Average Weekly Wage/Maximum Compensation Rate Payable</th>
<th>50 Percent of Statewide Average Weekly Wage/50 Percent of Maximum Compensation Rate Payable</th>
</tr>
</thead>
<tbody>
<tr>
<td>2000 $611.00</td>
<td>2000 $305.50</td>
</tr>
<tr>
<td>2001 $644.00</td>
<td>2001 $322.00</td>
</tr>
<tr>
<td>2002 $662.00</td>
<td>2002 $331.00</td>
</tr>
<tr>
<td>2003 $675.00</td>
<td>2003 $337.50</td>
</tr>
<tr>
<td>2004 $690.00</td>
<td>2004 $345.00</td>
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<tr>
<td>2005 $716.00</td>
<td>2005 $358.00</td>
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<tr>
<td>2006 $745.00</td>
<td>2006 $372.50</td>
</tr>
<tr>
<td>2007 $779.00</td>
<td>2007 $389.50</td>
</tr>
<tr>
<td>2008 $807.00</td>
<td>2008 $403.50</td>
</tr>
<tr>
<td>2009* $836.00</td>
<td>2009* $418.00</td>
</tr>
</tbody>
</table>

The compensation rate is 66 2/3 percent of the employee’s average weekly wage. If 66 2/3 percent of the employee’s average weekly wage is greater than the maximum, the rate of compensation payable is equal to the maximum. If the benefit calculated is less than 50 percent of the statewide average weekly wage, then the compensation rate shall be the lower of 50 percent of the statewide average weekly wage or 90 percent of the employee’s average weekly wage. There is no absolute minimum.

The maximum compensation rate payable is calculated annually and is effective Jan. 1 of each year. The calculation of the average weekly wage is defined by the Act. Corresponding figures for years prior to 2000 are maintained by the bureau. For partial disability, other calculations and definitions apply.

*For purposes of calculating the update to payments for medical treatment rendered on and after Jan. 1, 2009, the percentage increase in the statewide average weekly wage was 3.6 percent.
Director’s Office – Compliance Section

John Strawser

Primary Functions

Ensure compliance with the Workers’ Compensation Act, regulations enacted pursuant to the Act and orders issued by workers’ compensation judges. These functions are accomplished through:

1. Educating employers regarding the requirement to insure their workers’ compensation liability.

2. Investigating reports of alleged employers’ failure to insure their liability and prosecuting cases of noncompliance in accordance with the criminal provisions provided by the Act.

3. Referring allegations of employee fraud to the appropriate insurance carrier and prosecuting authority and allegations of employer, insurer or medical provider fraud to the proper prosecuting authority.

4. Reviewing all work-related injuries suffered by minors to determine if potential child labor law violations existed, referring said violations to the Bureau of Labor Law Compliance for determination and collection of any additional compensation due to injured minors.

5. Notifying dependents of their survivor rights under the Act when work-related fatalities occur.

6. Reviewing and investigation allegations of insurer, self-insurer or third-party administrator violations of the Act to determine if further action is warranted.

7. Processing statutorily permissible exceptions, exemptions and elections for inclusion under the Act.

2009 Accomplishments

1. Mailed the Employer Information pamphlet to 23,314 new or modified businesses to better educate employers about their workers’ compensation responsibilities, along with certificates of insurance to secure information assuring their compliance; 11,408 businesses failed to respond, resulting in a second mailing.

2. Instituted 3,751 new investigations of potential employer failure to insure workers’ compensation liability and referred 41 cases to the bureau’s legal division for prosecution.

3. Referred 10 complaints of employee fraud to the proper insurance carrier for investigation.

4. Processed 1,906 corporate executive officer exceptions and 1,321 religious exemptions for exclusion under the Act as well as 2,555 domestic elections for inclusion under the Act.

5. Investigated 377 potential labor law violations that could result in the collection of a 50 percent additional compensation penalty.

Goals

1. Continue to increase the effectiveness of the compliance section’s employer-education program by identifying innovative ways of notifying new, modified and existing businesses of the employer’s responsibilities.

2. Reduce the time it takes to investigate and prosecute employers found to have committed violations of Section 305 of the Act.

3. Improve communications with prosecuting counties on the status and outcome of cases being tried and settled.

4. Increase the number of delinquent employers investigated. “Delinquent” employers in this case are those who have not acquired a valid Certificate of Workers’ Compensation Insurance after two attempts to notify them via letter.
Director’s Office – Information Services Section

Kathleen Dupin

Primary Functions

1. Provide employees, employers, the public, workers’ compensation professionals, health care providers, government agencies, etc. with accurate and comprehensive workers’ compensation information.

2. With department press office approval, provide the media with accurate and timely workers’ compensation information.

3. Support the department secretary, the bureau director, the director of adjudication and the bureau staff in their missions.

4. Coordinate the annual workers’ compensation conference and the annual Governor’s Occupational Safety and Health conference.

2009 Accomplishments

1. Developed, planned and coordinated the May 2009 bureau conference. Approximately 1,200 employers, insurers, health care providers, attorneys and others from the workers’ compensation community attended the two-day event, which offered sessions on subjects including labor-management cooperation, aging workers, scaffolds and aerial lifts, lock out/tag out and managing employee stress.

3. Mailed 91,152 Workers’ Compensation and the Injured Worker pamphlets to workers for whom the bureau received a First Report of Injury indicating loss of more than a day, shift or turn of work as a result of an alleged work-related injury.

4. Responded to more than 63,000 workers’ compensation inquiries. These included 59,167 telephone calls and 4,047 e-mail questions from employers, employees, providers, lawyers and others involved in the Pennsylvania workers’ compensation system.

5. Assisted 281 non-English-speaking callers and visitors with Language Line Services, a language interpretation service.

6. Researched and responded to 503 inquiries regarding the workers’ compensation insurance coverage of employers through the Pennsylvania Compensation Rating Bureau database.

7. Assisted 53 walk-in visitors with their workers’ compensation questions and issues.

8. Responded to more than 2,194 written workers’ compensation inquiries received from the workers’ compensation community.

9. Published the bureau’s quarterly newsletter, News & Notes. This publication provides an overview of workers’ compensation policies, programs and updates. It is distributed to approximately 12,000 employers, insurers, third-party administrators, union representatives, attorneys, health care professionals and the public.

10. Published a monthly electronic employee newsletter.

11. Submitted articles for inclusion in the Pennsylvania Self-Insurer’s Association and County Commissioners Association of Pennsylvania newsletters.

12. Updated the bureau’s website to keep the workers’ compensation community apprised of issues pertaining to professional employer organizations, lists of authorized workers’ compensation insurance companies, updates to the medical fee schedule and Section 305 prosecutions.

14. Promoted the nonprofit program "Kids’ Chance of Pennsylvania Inc." through newsletter articles and the department’s website.

15. Researched workers’ compensation coverage status of employers who cancelled or failed to renew their policy with the State Workers’ Insurance Fund to ensure compliance under the Act. Forwarded information on employers found to not have the required coverage to the Compliance Section for further investigation and action.

16. Prepared and submitted press releases to the Labor & Industry Press Office to report on successful Section 305 prosecutions, to announce bureau initiatives and to advertise conferences.

17. Updated the Workers’ Compensation Act to include regulatory revisions made since its last publication in 2004.

**Goals**

1. Develop, plan and coordinate the bureau’s annual conference.

2. Coordinate the annual Governor’s Occupational Safety and Health Conference.

3. Continue to provide injured workers, employers, the public, workers’ compensation professionals and government agencies with accurate and timely information regarding the Act.

4. Continue to coordinate and supply insurance information from the Pennsylvania Compensation Rating Bureau, as well as petition forms, to the workers’ compensation community.

5. Continue to promote and assist the workers’ compensation community with electronic filing procedures.

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**Director’s Office – Medical Fee Hearing Office**

*Anne Fitzpatrick*

**Primary Functions**

1. Management and administration of the bureau’s medical fee dispute hearing program, which includes the following:

   a. Review and process all medical fee review hearing requests filed by insurance carriers, self-insured employers and/or health care providers pursuant to workers’ compensation medical cost containment regulatory authority at 34 Pa. Code §127.257 in contest of an administrative decision by the bureau (health care services review division) on an application for fee review. An application for fee review may be filed by a health care provider pursuant to Section 306(f.1)(5) of the Act in dispute of an insurer/employer’s payment for medical treatment/services furnished to an injured worker.

   b. Issuance of written notice of bureau acceptance or rejection of submitted hearing requests.

   c. Assignment to a hearing officer and scheduling of hearing dates with issuance of written notice of assignment and scheduled hearing to all parties and counsel.

   d. Responding to routine pre-hearing and post-hearing inquiries/correspondence from parties and counsel as appropriate.

   e. Maintenance/tracking of hearing case files and hearing office case activity.

   f. Tracking final case disposition including appellate review.

2. Case-specific review and adjudication by the assigned hearing officer inclusive of the following: consideration and ruling on pre-hearing requests and/or motions concerning legal issues in pending hearing matters, conduct of de novo administrative hearings, consideration and ruling on documentary and/or testimonial evidence presented by the parties/counsel and written adjudication subsequent to close of the record.

**2009 Accomplishments**

1. Effectively maintained critical hearing office functions during extended periods of limited clerical staffing.
2. Received 584 medical fee review hearing requests and resolved 162 of those cases. Only one fee review decision was appealed to the Commonwealth Court.

3. **Pittsburgh Mercy Health System v. Bureau of Workers’ Compensation Fee Review Hearing Office (U.S. Steel Corporation), 980 A.2d 181 (Pa. Cmwlth. Ct. 2009).** In an opinion and order dated May 29, 2009, Commonwealth Court affirmed the decision of the fee review hearing officer that the provider’s application for fee review was untimely where the employer notified the provider that any dispute of employer’s payment in response to provider’s medical billing should be made through the department/bureau’s application for fee review process and provider instead elected to pursue further payment through a reconsideration process outside of the fee review process. The period for filing the application for fee review was not extended by the provider’s subsequent submission of documents to the employer.

**Goals**

1. Train and maintain adequate clerical staff.

2. Reduce the processing time associated with newly filed hearing requests.

3. Provide administrative support to all divisions and field offices within the bureau.

4. Provide personnel advice and services to bureau employees and managers.

5. Provide mailroom and optical character recognition, or OCR, services to the bureau.

6. Coordinate bureau training.

**2009 Accomplishments**

1. Budgeted, monitored and adjusted the Administration Fund as necessary.

2. Assisted the Claims Management Division in processing petition assignments within five days (mailroom and OCR). The mailroom processed 431,912 forms and additional miscellaneous mail.

3. Improved the processing of all paper documents into the electronic system to within five days. The OCR unit processed 352,461 forms.

4. Provided timely status information on collection of assessments and bureau conference deposits. The amounts assessed for the 2008/09 fiscal year are as follows:

   - **Administration Fund**
     - $60,010,984
   - **Supersedeas Fund**
     - $18,054,158
   - **Subsequent Injury Fund**
     - $239,112
   - **Self-Insurance Guaranty Fund**
     - $28,507
   - **Uninsured Employers Guaranty Fund**
     - $2,734,367

5. Processed personnel actions within seven working days of request.
Goals

1. Assist the Claims Management Division in processing petitions within five working days.
2. Continue working with vendors, insurance carriers, employers and attorneys to comply with form submission.
3. Develop and implement an online new employee orientation package.

Claims Management Division

Primary Functions

1. Serve as a repository for workers’ compensation records.
2. Process, record and review documents received for claims.
3. Assign petitions to workers’ compensation judges.
4. Provide records to claimants, attorneys, workers’ compensation judges and others.
6. Evaluate carrier and employer compliance with the reporting requirements of the Act.
7. Serve as conservator of the Supersedeas Reimbursement and Second Injury funds.
8. Pay claims where the bureau has liability under 305.1(WCOD), 306(h), Occupational Disease and the Subsequent Injury Fund.
9. Communicate with the insurer community to monitor compliance with the Act and to expeditiously and accurately process claims.
10. Continue commitment to improving filing efforts by the insurer community to aid claim development, provide continued educational efforts to alleviate processing deficiencies and improve our ability to communicate and support the rights and entitlements of all injured workers.

2009 Accomplishments

1. Received and processed 435,686 documents.
2. Of the documents received, 47,395 were petitions, which were assigned to workers’ compensation judges within three days of receipt. Because the “Petition To:” (LIBC-378) form can be used to file multiple petitions on the same document, there were actually 49,916 separate petitions assigned.
3. Processed 30,195 requests for records while maintaining an average processing time of 10 days or less from receipt.
4. Prepared and sent 2,653 records for appeals to workers’ compensation judges’ decisions to the Workers’ Compensation Appeal Board.
5. Promoted and increased electronic submission of the three Web-based petition forms through the department’s website from 52 percent in 2008 to 58 percent in 2009.
6. Instituted online filing of the following forms:
   - Notice of Compensation Denial (LIBC-496)
   - Notice Stopping Temporary Compensation (LIBC-502)
   - Notice of Temporary Compensation Payable (LIBC-501)
   - Notice of Compensation Payable (LIBC-495)
7. Monitored individual insurers’/self-insurers’ 21-day compliance rates and offered review assistance and counseling to all who had claims reported during the period Jan. 1, 2007, through Dec. 31, 2007. Industry-wide compliance for the period was 70 percent. Training was made available on the bureau’s calculation to insurers, self-insured employers, claims organizations and third-party administrators to assist in raising their compliance rates. The 21-day compliance report card was published alphabetically on the department’s website.
8. Processed 516 claims and distributed payments of more than $12.5 million from the Supersedeas Reimbursement Fund during the 2008/09 fiscal year.
9. Continued external training on forms submission and processing to insurers and third-party administrators.
10. Updated the following forms to meet the needs of the industry and to deliver improved service and support to workers’ compensation stakeholders:
    - Occupational Disease Claim Petition (LIBC-387)
    - Notice of Workers’ Compensation Denial (LIBC-496)
11. Provided injury statistics categorized by type of
injury, part of body injured and cause of injury within major industry divisions for the 2008 edition of the Pennsylvania Work Injuries and Illnesses Report.

12. Issued the second Annual Claims Status Report to insurers and self-insured employers and received feedback on 16,743 claims. This feedback resulted in status verification or correction of claim records for (a) claims initiated in calendar years 2004 and 2005 and (b) no filing activity to the bureau for calendar year 2008.

**Goals**

1. Make the submission of additional claim forms available electronically.

2. Continue monitoring and reporting insurer performance with 21-day compliance and bureau outreach efforts to bring the industry into full compliance.

3. Continue to assign petitions within five business days.

4. Promote the usage of electronic form submissions.

5. Continue to monitor and maintain bureau code discrepancy reports. Accurate bureau codes are critical in determining the appropriate insurer or related party responsible for handling a claim, assigning petitions to workers’ compensation judges, the ability to register and file forms electronically and in improving timeliness in 21-day reporting.

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**Health Care Services Review Division**

**Primary Functions**

1. Administer the fee review process for health care providers who are disputing the timeliness or amount of payment received for medical services provided to injured Pennsylvania workers.

2. Manage and monitor chargemaster fee schedule data. Under amendments to the Act in 1993, medical reimbursement was capped based on 1994 Medicare rates that are adjusted annually.

3. Authorize utilization review organizations, or UROs, to review the reasonableness and necessity of medical treatment when requested by the employer/insurer or injured worker. The division also trains, audits and monitors UROs for compliance with regulatory requirements.

4. Promulgate a list of physicians qualified to perform impairment rating examinations, or IREs, and designate initial IRE physician when requested by employers/self-insured employers.

5. Provide certification of coordinated care organizations.

6. Act as a liaison to independent consultants performing medical access studies.

7. Provide education and training to employers, insurers and health care providers as requested.

8. Act as a resource for all involved parties.

**2009 Accomplishments**

1. Issued 45,938 fee review decisions and determinations.

2. Continued to update the courtesy copy of the fee schedule quarterly on the department’s website.


4. Continued to provide specialized training for 146 health care providers to assist in their understanding of the workers’ compensation billing and payment processes, as well as the fee review process.

5. Continued to provide specialized training on the appropriate and optimal application of the workers’ compensation fee schedule to 81 repricers and insurers.

6. Processed and approved 22 annual reports for
utilization review organizations/peer review organizations. A total of 22 URO/PROs are currently authorized.

7. Reviewed 5,394 utilization review/peer review determinations and reviewer reports.

8. Received, reviewed and approved six URO/PRO reauthorization applications.

9. Received and reviewed six new URO/PRO authorization applications.

10. Maintained a reviewer database to monitor URO/PRO reviewer qualifications and updated this information regularly.

11. Processed 6,905 utilization review requests.

12. Conducted biannual URO/PRO meetings as necessary.

13. Maintained a list of 88 IRE physicians in 172 geographic locations who may be designated to perform impairment rating evaluations under the new 6th Edition of the AMA Guides to the Evaluation of Permanent Impairment. This list is also available on the department’s website and includes the physicians’ specialties.

14. Received and processed 3,128 IRE requests for designation.

15. Received and reviewed the 2008 medical access study. The study continues to indicate that high levels of injured workers are satisfied with their medical treatment. It also indicates that injured workers with provider panel lists have a high satisfaction level, return to work more than 30 percent sooner and continue to treat with the panel providers after the initial 90 days. The education of employers and injured workers is still needed. The study also continues to report PPO discounts and late payments as the health care providers’ main concerns.

16. Provided more than 300 fee review information packets to effected and interested parties.

17. Reduced the fee review backlog of files pending more than 30 days from 23,000 to approximately 6,500.

18. Created a resource account for easier e-mail access to the bureau for questions regarding fee review or utilization review.

19. Created a bridge between fee review and compliance for providers who have received a positive response to a fee review and have not received reimbursement after 30 days.

**Goals**

**Medical Fee Review Section**

1. Continue to provide quarterly fee schedule updates and website updates.

2. Provide education and support to health care providers, employers and insurers as needed and requested. This will continue to include yearly educational training for repricers, insurers and health care providers at bureau headquarters.

3. Continue to explore methods of reducing the size and complexity of the chargemaster database and simplifying the update process.

4. Continue to examine and enhance the bureau processes in order to meet the standard of 30-day completion for fee reviews.

**Medical Treatment Review Section**

1. Authorize and reauthorize URO/PROs as requested and required.

2. Monitor URO/PRO determination face sheet packages for compliance with the medical cost containment regulations.

3. Conduct random, on-site audits of URO/PRO operations in accordance with medical cost containment regulations.

4. Continue education of insurers, employers, attorneys and injured workers concerning the utilization review process when requested.

5. Conduct biannual URO/PRO meetings

**IRE Program**

1. Update the IRE physician list on the department’s website on a monthly basis.

2. Process requests for designation in a timely manner.

3. Conduct IRE meetings with physicians as necessary.

**General**

1. Continue to explore ways to provide positive customer service from filing forms to navigating the department website to understanding the Act and regulations as they relate to fee review, utilization review and impairment rating evaluation.

2. Conduct regular meetings with the insurer/
provider medical cost containment committee, as needed.

3. Upon passage of revised medical cost containment regulations, implement new processes/procedures and provide educational sessions for stakeholder groups.

4. Continue to provide education and training through seminars and insurer/provider in-service on medical cost containment issues and processes. Where appropriate, extend these efforts for workers.

5. Monitor contractor’s performance and preparation of the 2009 medical access study report in accordance with the Act and distribute upon completion.

6. Participate in the bureau’s annual conference.

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**Health and Safety Division**

**Len Negley**

**Primary Functions**

1. Evaluate employer applications for certification of employer workplace safety committees for eligibility for workers’ compensation insurance premium discounts as allowed under Article X of the Act. Provide assistance and guidance to employers in establishing safety committees, interpreting requirements for certification and correcting application deficiencies prior to submission.

2. Provide safety committee certification renewal forms for certified employers and evaluate submitted forms for eligibility for continuing premium discounts.

3. Review annual reports of accident and illness prevention services and programs from Pennsylvania licensed workers’ compensation carriers, self-insured employers and group self-insurance funds. Formulate recommendations of program or service adequacy for consideration in whether to recommend continuance of licensure or self-insurance status.

4. Determine the necessity for, and conduct, on-site audits of accident- and illness- prevention services and programs and certified safety committees. Configure and monitor deficiency-correction programs as necessary to resolve program or service inadequacies.

5. Develop and disseminate health and safety-related information to members of the regulated community and the general public concerning: workplace safety committee certification/recertification procedures and requirements; mandatory accident and illness prevention program and service elements; safety-related training; and annual reporting requirements.

6. Administer the process to review credentials in the health and safety field for recognition by the department as acceptable qualifications for accident and illness prevention service providers. Review individual qualifications for acceptability as recognized safety committee instructors.

7. Support and participate in the WorkSAFE PA initiative, which provides direction and coordination for activities and programs aimed at increasing workplace safety throughout the commonwealth. Manage the process to nominate, select and recommend employers for the Governor’s Award for Safety Excellence.

**2009 Accomplishments**

1. Granted initial certification to a cumulative total of 8,535 workplace safety committees covering more than 1,143,821 employees as of December 2009. The cumulative number of approved workplace safety committee certification renewals totaled 41,046.

2. Received and processed a total of 604 workplace safety committee initial applications and 4,739 workplace safety committee renewal applications.

3. Continued to update e-mail databases for the various client groups to provide an electronic
means of communicating with the workers’ compensation safety clients.

4. Released all necessary self-insured, group fund and insurer-required filing reports within required time frames.

5. Evaluated the acceptability of accident and illness prevention programs and services of 2,284 insurers and self-insured employers through annual required reports.

6. Conducted 245 on-site audits of licensed workers’ compensation insurer and self-insured employer accident and illness prevention programs and services and certified workplace safety committees.

7. Participated in the process to select and award the Governor’s Award for Safety Excellence to 10 Pennsylvania companies, which included conducting on-site visits.

8. Refined the framework and design for the Pennsylvania Safety and Health Training Institute, a Web-based compilation and schedule of health and safety-related training and information available from both state agencies and other sources. The institute will offer instruction to employers and members of the general public regarding workplace and general safety and health topics including training and informational sessions delivered by numerous commonwealth agencies.

9. Reached the milestone of having conducted a cumulative total of 2,000 on-site audits of accident and illness prevention programs and services of self-insured employers and licensed workers’ compensation insurers and employers with state-certified workplace safety committees.

10. Division personnel participated in health and safety training and information sessions for more than 1,236 representatives of employers, insurers and self-insured employers.

Goals

1. Increase outreach efforts to employers and members of the general public through information seminars, conferences, education events, written publications and website information concerning the certification process, training and accident and illness prevention programs and services requirements.

2. Promote the WorkSAFE PA initiative through participation in seminars, association meetings and written publications.

3. Expand promotional and outreach activities to increase applicants for the Governor’s Award for Safety Excellence and for the workplace safety committee certification program.

4. Decrease, through educational, communication and procedural improvement efforts, the percentage of employers who fail to achieve certification status.

5. Conduct a total of 245 audits of the accident and illness prevention programs and services of workers’ compensation insurers, self-insured employers, group self-insurance fund and employers with certified workplace safety committees.

6. Complete the development and release of an insurers’ annual data profile report comparing individual insurers to overall averages developed from cumulative annual report data. Complete development of a similar data profile for self-insured employers.

7. Complete initial staffing of the Pennsylvania Safety and Health Training Institute to allow finalization of the institute’s Web-based operational structure and to enable launch to identified stakeholder groups and the general public.

8. Reconfigure health and safety-related information on the department’s website to be more customer-friendly through topical reorganization, revised description and improved data linkage.
Self-Insurance Division

George Knehr

Primary Functions

1. Process and decide applications of individual employers for self-insurance status under Section 305 of the Workers’ Compensation Act and Section 305 of the Pennsylvania Occupational Disease Act; set conditions for self-insurance and monitor self-insured employers’ compliance with these conditions. As of Dec. 31, 2009, there were 768 employers authorized to self-insure their liability.

2. Process and decide applications of groups of employers to operate as group self-insurance funds under Article VIII of the Act; regulate and monitor the financial conditions of the group funds, including the setting of rate, the maintenance of surplus and the distribution of dividends to members. As of Dec. 31, 2009, 18 group self-insurance funds were operating covering 841 employers in the commonwealth.

3. Collect and tabulate information needed to issue assessments against insurers and self-insured employers to maintain special funds established under the Act.

4. Monitor the claims payments and outstanding liabilities of former self-insurers to ensure that they maintain adequate security or assets to cover their self-insurance claims. As of Dec. 31, 2009, there were 346 individual employers and one group fund in runoff status.

5. Administer the Self-Insurance Guaranty Fund and the use of financial security to remedy defaults of self-insured employers. The guaranty fund and its special prefund account, which applies to claimants injured before 1993, provide benefits to approximately 230 claimants, with total reserves of $13 million. The division also monitors the payments, balances and administration of 18 default situations being satisfied by private securing entities, such sureties, corporate trustees or guarantors, involving 356 claims and $36 million in liabilities.

2009 Accomplishments

1. Processed 770 renewal applications and 22 new applications for individual self-insurance status, 309 claims status reports of runoff self-insured employers, 37 group annual reports and rate requests and 58 semiannual reports monitoring the status of self-insurance defaults.

2. Calculated and issued five assessments to finance the operation of special funds under the Act.

3. Published proposed amendments to the regulations governing the processing of applications for and the administration of self-insurance for individual employers to update and clarify standards and procedures.

4. Completed implementing the use of Internet-based financial analysis services to assist in evaluating applicants’ financial ability to self-insure.

Goals

1. Publish final-form amendments to the individual self-insurance regulations and implement changes to computerized operations, documentation and procedures required by the amendments.

2. Assist the Office of Information Technology in the design and implementation of enhancements to the bureau’s comprehensive information management system to manage data and to produce documents and information relating to group self-insurance.

3. Complete the updating of the division’s record retention schedules and implement compliance with the revised schedules.

4. Update spreadsheet templates distributed for the provision of self-insurance loss data.
Legal Division

Thomas Kuzma

Primary Functions

1. All legal services provided to the bureau are coordinated through the department Office of Chief Counsel and the Governor’s Office of General Counsel. Attorneys representing the bureau and its support staff are responsible for defending any legal challenges to the bureau’s implementation of the workers’ compensation system.

2. Responsible for preparing and coordinating criminal prosecutions of employers who fail to maintain workers’ compensation coverage for workers.

3. Responsible for defending claims brought against certain statutorily created funds. For example, bureau attorneys represent the commonwealth in claims against the Supersedeas Fund, as well as the Subsequent Injury Fund and claims under the Occupational Disease Act.

4. Responsible for defending and monitoring defense of claims filed against the Uninsured Employer Guaranty Fund.

5. Review statutes and regulations (federal and state) potentially impacting the workers’ compensation community. In addition, draft bills, regulations, and statements of policy at the behest of the client to either correct deficiencies or make enhancements to the system.

6. Routinely answer inquiries from the public, both directly and on behalf of clients within the department.

2009 Accomplishments

1. Final Form Rulemaking, Department of Labor & Industry, Special Rules of Administrative Practice and Procedure Before the Workers’ Compensation Appeal Board (Board); Special Rules of Administrative Practice and Procedure Before Workers’ Compensation Judges (Judges), No. 12-84 – The department published this final-form rulemaking document, which amended 34 Pa. Code chapters 111 and 131, at 39 Pa. Bull. 6038 (Oct. 17, 2009). The rulemaking document provides additional guidance for the litigation of matters before the Board, the Office of Adjudication (Office) and Judges, and refines existing rules governing practices and procedures before the Board, the Office and Judges. The Rules were last updated in 2002.


3. Memorandum of Understanding between Federal Office of Child Support Enforcement (OCSE) and PA Bureau of Workers’ Compensation – The workers’ compensation division reviewed, revised and worked with representatives of the federal OCSE to execute this agreement, by which the department will assist the federal OCSE with data collection that supports the interception of past-due child support owed to children of Pennsylvania workers’ compensation recipients.

4. Uninsured Employers Guaranty Fund – In 2009, the workers’ compensation division continued to defend the Uninsured Employer Guaranty Fund (UEGF) in matters litigated before the Office of Adjudication and Workers’ Compensation Appeal Board. In addition, the division monitored hundreds of UEGF matters handled by outside counsel. Finally, the division instituted a number of actions to collect reimbursement from employers whose failure to maintain insurance resulted in claims against the UEGF.

5. Meyers v. Carrara Steel Erectors Inc. & Eagle Fabricating & Erectors; Zuendel v. Carrara Steel Erectors Inc. & Eagle Fabricating & Erectors, (Nos. 14409 & 14410 of 2008; Erie C.C.P.) – In an order filed on Dec. 1, 2009, the Erie Court
of Common Pleas agreed with the department's *amicus* argument and found that the exclusivity clause of the Pennsylvania Workers' Compensation Act did not prevent injured employees from suing their uninsured employers for their injuries. The court reasoned that uninsured employers should not be permitted to benefit from their failure to maintain the required insurance coverage, and avoid responsibility for their allegedly negligent conduct.

6. **Henkels & McCoy Inc. & Liberty Mut. Ins. Co. v. WCAB (Barner), 972 A.2d 82 (Pa. Cmwlth. Ct. 2009)** – On April 15, 2009, the Commonwealth Court agreed with the workers' compensation division's position and denied Supersedeas Fund reimbursement under Section 443 of the Act, 77 P.S. § 999. In this case, the insurer argued that it was entitled to reimbursement of payments that it inappropriately withheld from the injured worker. The court noted that the insurer did not make payments as a result of the denial of supersedeas, but instead paid the claimant when it realized that it had wrongly withheld payment.

7. The following is a history of the workers' compensation division's successful Section 305 prosecutions for failure to insure/self-insure workers' compensation liability for 2009:

   a. **Benner, Kenneth E./Benner's Amusements Inc./Susquehanna Valley Amusements Inc.** – On March 10, 2009, defendant Benner entered the Accelerated Rehabilitative Disposition (ARD) program for a term of two years. The defendant must also pay all applicable court costs, as well as restitution in the amount of $25,559.67 and must continuously maintain workers' compensation insurance coverage for all employees. The defendant may not seek expungement of his criminal record for a period of 10 years. (Snyder County)

   b. **Camerlengo, Perry Jr./Luxury Limousine Service Inc.** – On Feb. 2, 2009, defendant Luxury Limousine entered into ARD for one year. The defendant was also ordered to pay a $5,000 fine and the costs of ARD. (Delaware County)

   c. **Cerrata, James d/b/a Jaime's Landscape** – On July 14, 2009, the defendant entered the ARD program for six months, was ordered to pay assessments at the rate of $50 per month, serve 15 hours of community service and pay restitution in the amount of $1,533.48. (Luzerne County)

   d. **Condosta, William/Corban Corp. d/b/a Encore Coatings Inc.** – On May 18, 2009, the defendants entered into a plea agreement whereby defendant Corban Corp. pleaded guilty to one felony count of violating Section 305 of the Act. The defendant was ordered to pay a fine in the amount of $15,000 and restitution in the amount of $100,000. (Northampton County)

   e. **Dare, Port t/a Petz Unlimited Inc.** – On June 11, 2009, defendant Port Dare pleaded guilty to 15 misdemeanor counts of violating Section 305 of the Act. The defendant was ordered to pay a fine of $15,000 and $174 in costs to the bureau. (Cumberland County)

   f. **Deimler, Dwayne & Gregory/Perry County Metals Inc.** – On Jan. 15, 2009, defendant Gregory Deimler entered ARD for a 12-month period, and agreed to pay a fine of $7,500 and $122 to the commonwealth for its costs. (Perry County)

   g. **Demento, Edward/Ed Demento Construction Inc.** – On March 17, 2009, the defendants pleaded guilty to four misdemeanor counts and were sentenced to four years of probation and ordered to pay restitution in the amount of $89,518.72. (Allegheny County)

   h. **Dodge, Douglas & Dent Manufacturing Inc.** – On Feb. 2, 2009, the defendant entered the ARD program, and was assessed fines and costs to be imposed in three equal payments of $485. (Northampton County)

   i. **Falvo, Christine/Christopher M. Warman/Big Daddy Chocolate Shops Inc. d/b/a Fudgie Wudgie Fudge Co.** – On Sept. 29, 2009, defendants paid an additional $2,226.02 in interest on indemnity benefits to the injured worker, plus a $500 fine. The defendants paid approximately $30,000 in restitution. (Allegheny County)

   j. **Hendricks, Joseph W. & Wendy S./Warehouses by Design Inc.** – On Dec. 4, 2009, Joseph Hendricks entered the ARD program for one year and paid a fine of $500. (Allegheny County)

   k. **Hewitt, Joseph d/b/a JAH Construction** – On Jan. 8, 2009, the defendant pleaded guilty to one misdemeanor
count and received one year of probation during which he must pay $10,729.79 in restitution, costs and court fees. (Washington County)

l. Hong, Jang H./Hong Distributor Inc. d/b/a Mack Beverage – On Sept. 18, 2009, defendant Jang Hong entered the ARD program for a period of two years. (Philadelphia County)

m. Keister, Mark D./Mudhens Manufacturing Inc. – On March 18, 2009, the individual defendant entered the Union County ARD program and was ordered to pay $6,416.20 in restitution to Union County and $141.00 in costs to the bureau. (Union County)

n. Kennedy, Michael & McGraw, Bryan/ProGuard Security Inc. – On June 29, 2009, defendant Kennedy completed an ARD program and the matter against him was closed. On June 30, 2009, defendant Bryan McGraw was found guilty of 1,086 misdemeanor counts of failure to have workers’ compensation insurance, one misdemeanor count of unsworn falsification to authorities and one misdemeanor count of insurance fraud. Defendant ProGuard Security Inc. was found guilty of 1,086 felony counts and 1,086 misdemeanor counts of failure to have workers’ compensation insurance. Defendant McGraw was sentenced to three to six months of house arrest followed by two years of probation. Defendants ProGuard Security Inc. and McGraw jointly were ordered to pay $25,000 in restitution to the injured workers. (Philadelphia County)

o. Myers, Andrew/ARS Enterprises Inc. – On June 9, 2009 defendant Myers pleaded guilty to a misdemeanor violation of Section 305 of the Act. On Oct. 19, 2009, Myers was sentenced to 60 months’ probation and ordered to pay fines, costs and restitution of $32,090.75. (Northampton County)

p. Neubert, Robert/Neubert’s Electric Inc. – On June 15, 2009, defendant Robert Neubert and defendant Neubert’s Electric Inc. each pleaded guilty to one misdemeanor count of violating Section 305 of the Act. Defendant Robert Neubert was sentenced to four days to one year of incarceration and ordered to pay $6,662 restitution and a $1,000 fine. (Bucks County)

q. Patosky, Brian d/b/a Patosky’s Express & Live Wire Pizza – On Jan. 6, 2009, the defendant pleaded guilty to one misdemeanor count of violating Section 305 of the Act. Defendant is currently serving probation on separate charges. Defendant was also fined $500. In a related case, defendant paid $8,424.20 in restitution to an injured worker in lieu of further prosecution. (Allegheny and Beaver counties)

r. Reveron Jr., William/Three Brother’s Delivery Inc./Three Brother’s Delivery Moving & Services Inc. – On Oct. 2, 2009, defendant Three Brother’s Delivery Moving & Services Inc. pleaded guilty to four misdemeanor counts of violating Section 305 of the Act. The corporation was placed on probation for one year and ordered to pay a $10,000 fine. Defendant William Reveron agreed to enter the ARD program for one year. (Philadelphia County)

s. Speake Segady, Meri d/b/a Boston Plumbing – On Feb. 2, 2009, the defendant pleaded guilty to 180 misdemeanor counts of violating Section 305 of the Act. On March 18, 2009, the defendant was sentenced to 10 years of probation and ordered to pay restitution in the amount of $20,216. (Allegheny County).

t. Tucciarone, Vincenzo & Blue Moon Equestrian Enterprises Ltd. – On Nov. 19, 2009, Tucciarone agreed to enter the ARD program under close supervision for a term of 24 months and to reimburse the UEGF for all expenditures totaling $23,674.75. (Lehigh County)

u. Woods, Reynolds M. d/b/a Jack’s Mountain Transport – On Nov. 24, 2009, the defendant pleaded guilty to a felony violation of the Act. The defendant was sentenced to two years of probation and ordered to pay a $27,503 fine plus the costs of prosecution. (Mifflin County)

Goals

1. Continue to implement the mission of the Office of Chief Counsel, providing our clients with superior professional legal services by assisting them in achieving their objectives within the bounds of the law.
MaryKay Rauenzahn  
*Director, Workers’ Compensation Office of Adjudication*

The Workers’ Compensation Office of Adjudication takes very seriously its mission to “address workers’ compensation disputes by affording timely and impartial adjudication of workers’ compensation matters, and to encourage cooperation among parties to workers’ compensation claims by providing alternative dispute resolution services.”

In 2009, the Office of Adjudication demonstrated this commitment by continuing to reduce both the number of petitions pending before workers’ compensation judges and the average time to process litigated claims. In addition, the number of cases closed and awaiting decision for more than 90 days decreased by over 82 percent.

In the area of alternate dispute resolution, the Office of Adjudication continued to actively encourage disputants to increase their awareness of the value of self-determination in resolving workers’ compensation disputes and to utilize both the mandatory and voluntary mediation services offered. The Office of Adjudication made it a priority to increase the number of judges providing mediation services and redesign mediation programs in many of the hearing offices to more fully meet the needs of the parties.

Customer service plays a very large part in delivering on our mission. The successes noted above would not have been possible without the hard work and dedication of our clerical employees, judges and management team. I want to recognize and thank each of them for their superior efforts in allowing the Office of Adjudication to provide top-notch services to the Pennsylvania workers’ compensation community.

Sincerely,

MaryKay Rauenzahn
Overview of the Office of Adjudication

Primary Function

The Office of Adjudication is responsible for the resolution of disputed workers’ compensation matters. The director of adjudication oversees 94 workers’ compensation judges, four judge managers, four administrative officers and 24 field offices. The workers’ compensation judges conduct hearings in disputed matters and render reasoned decisions in a timely manner. Judges also provide alternative dispute resolution services in contested matters.

2009 Accomplishments

1. Reduced the statewide average time to hear and decide workers’ compensation cases to 6.8 months, down from 7.1 months in 2008, 7.3 months in 2007, 7.8 months in 2006, 8.3 months in 2005, 8.4 months in 2004, 8.7 months in 2003, 9.3 months in 2002, 9.8 months in 1999 and 11.5 months in 1998.

2. Reduced the number of pending petitions from 28,480 in 2008 to 27,599 at the end of 2009.

3. Reduced the number of cases pending for more than 18 months to 1,118, or 6.5 percent of all cases pending, down from 1,233 in 2008 and 1,465 in 2007.

4. Ended the year with less than 1.5 percent of closed petitions having been closed for more than 90 days prior to decision.

5. Continued to expand the availability of alternate dispute resolution services to the parties by increasing the number of judges providing mediation services and improving the delivery of the services through the hearing offices.

6. Provided expanded opportunities for the judges to meet the training requirements of the Act through the 2009 workers’ compensation judges’ conference as well as regularly scheduled online legal research training sessions.

7. Continued to work with the judges and district safety committees to identify and address safety concerns in the field offices and remote hearing sites.

8. Continued to support employee training and certification in CPR, AED and first aid as well as monitor and update AED equipment as necessary.

9. Encouraged participation by the judges as speakers at educational events, such as the bureau conference, bar association presentations and other industry gatherings.

10. Developed updated training material for new judges, including a new case management DVD and an expanded library of multimedia educational tools.

11. Continued to educate parties on the department’s limited-English-proficiency policy and the procedure for requesting language interpretation services at hearings and mediations.

12. Made prompt adjustments to the Office of Adjudication’s procedures to meet the requirements of the amendments to the Special Rules of Administrative Practice and Procedure before Workers’ Compensation Judges that went into effect in October 2009.

13. Continued to work with the Bureau of Workers’ Compensation to provide additional convenience to our customers by introducing additional forms for submission via the Web.

Goals

1. Continue to decide cases within 90 days of the date they are concluded and ready for decision.

2. Continue the positive trend to reduce the average length of time necessary to adjudicate a case as well as the number of petitions in litigation for more than 18 months.

3. Provide additional mediation training opportunities to all judges.

4. Increase the number of judges available to offer mediation services and reduce the wait time for voluntary mediation sessions.

5. Continue to enhance the professional caliber of the judge corps through the development and presentation of continuing legal education courses dealing with issues of special interest and importance to the workers’ compensation judges.

6. Continue to provide ongoing training to new and established clerical staff in all computer applications utilized by the Office of Adjudication.

7. Work to identify possible safety issues in all of the adjudication offices and remote hearing sites and take preventative action.

8. Continue to provide accurate and up-to-date online information regarding judges’ procedural requirements at hearings and mediations, and other pertinent WCOA information, via the department’s website.
Overview of the Office of Adjudication

Mission Statement

To address workers’ compensation disputes by affording timely and impartial adjudication of workers’ compensation matters, and to encourage cooperation among parties to workers’ compensation claims by providing alternative dispute resolution services.

Judge Managers

In addition to managing their own caseloads, the judge managers supervise the judges in the Office of Adjudication field offices in their respective regions and the four administrative officers. Among other duties, judge managers are responsible for balancing workloads among judges, reassigning petitions among judges, assigning judges to handle informal conferences, performing or assigning other judges to perform hearing duties for judges who are absent, training and evaluating new judges, interfacing with stakeholders and evaluating the impact of proposed policy and legislative changes.

Administrative Officers

The four administrative officers manage the Office of Adjudication field office facilities and clerical staff, supporting the judges in their respective districts. They develop enhancements of the adjudication processes in the field and provide innovative technology, necessary equipment and appropriate training for field office staff. The administrative officers are the Office of Adjudication’s liaisons with the various divisions of the bureau and the department. They provide necessities to the field offices to facilitate judges’ hearing and decisions on a timely basis.

The Administrative Officers are:
Saundra Parker – Southeastern District
Linda Bivens – Eastern District
Sharon Hooks – Central District
Diane Dayton-Crawford – Western District

Susan Caravaggio
David Cicola
Karen Wertheimer

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Compromise and Release Agreements

The parties may settle matters in dispute under the Act by entering into a Compromise and Release Agreement. The agreement must contain detailed information about the settlement and be presented to the judge on form LIBC-755, Compromise and Release Agreement.

A workers’ compensation judge must conduct a hearing and circulate a written decision before the agreement can be effective. The judge may not approve the agreement unless the injured worker understands its full legal significance. During calendar year 2009, workers’ compensation judges approved 14,978 Compromise and Release Agreements resulting in payments to injured workers totaling $870,257,703.73. Eighty-six percent of the approved Compromise and Release Agreements were “full” settlements resolving both the indemnity and medical aspects of the claim.

Alternative Dispute Resolution Services

The Office of Adjudication is pleased to offer mediation services, settlement conferences and informal conferences under the Act. Under this system, the decision is placed in the hands of the parties through a process of self-determination to reach an amicable agreement. The judge’s role is to facilitate the parties’ discussion, provide guidance through the process in identifying each party’s interests and to assist the parties in determining creative solutions for possible settlements.

Parties retain control over the outcome. There is no cost when a workers’ compensation judge serves as the neutral party. Other potential benefits of this system include:

- Informal sessions
- Open communication between the parties
- Expedition of the claims process
- Limited attorney involvement

The Office of Adjudication schedules mandatory mediation sessions as required by the Act, as well as voluntary mediation sessions upon request of the parties. In 2009, the Office of Adjudication conducted mediations in 6,192 cases resulting in resolution of 3,035 claims.
Organization Chart
As of December 31, 2009

Department of Labor & Industry Secretary
Sandi Vito

Compensation & Insurance Deputy Secretary
Elizabeth Crum

Office of Adjudication Director
MaryKay Rauenzahn
717.783.4151

Deputy Chief Counsel
Thomas J. Kuzma
717.783.4467

Labor & Industry Chief Counsel
Jane Pomerantz

Central District Judge Manager
Susan Caravaggio
570.327.3735

Eastern District Judge Manager
Karen Wertheimer
215.560.2125

Southeastern District Judge Manager
Vacant
215.560.2488

Western District Judge Manager
David Cicola
814.533.2494

Department of Labor & Industry
Secretary
Sandi Vito

Deputy Chief Counsel
Thomas J. Kuzma
717.783.4467

Compensation & Insurance Deputy Secretary
Elizabeth Crum

Office of Adjudication Director
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Central District Judge Manager
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Eastern District Judge Manager
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215.560.2125

Southeastern District Judge Manager
Vacant
215.560.2488

Western District Judge Manager
David Cicola
814.533.2494

Labor & Industry Chief Counsel
Jane Pomerantz
Office of Adjudication District Offices

STATE OF PENNSYLVANIA
WAGE & HOUR DIVISION

WESTERN DISTRICT

Altoona
615 Howard Ave., Suite 202
Altoona, PA 16601-4813
814.946.7355

Brookville
18 Western Ave., Suite F
Brookville, PA 15825-1540
814.849.5382

Clearfield
241 E. Market St.
Clearfield, PA 16830-2424
814.765.6398

Erie
3400 Lovell Place
13th & Holland streets
Erie, PA 16503-2621
814.871.4632

Greensburg
144 N. Main St., Suite 1A
Greensburg, PA 15601-2404
724.832.5310

Johnstown
607 Main St., Suite 100
Johnstown, PA 15901-2119
814.533.2494

New Castle
Cascade Galleria
100 S. Jefferson St., Suite 146
New Castle, PA 16101-3900
724.656.3084

Pittsburgh
411 7th Ave., Room 310
Pittsburgh, PA 15219-1944
412.565.5277

Uniontown
108 N. Beeson Blvd., Suite 200
Uniontown, PA 15401-7401
724.439.7420

Washington
Millcraft Center, Suite 120 LL
90 W. Chestnut St.
Washington, PA 15301-4528
724.223.4595

CENTRAL DISTRICT

Director’s Office
East Gate Center
1010 N. 7th St., Room 318
Harrisburg, PA 17102-1400
717.783.4151

Harrisburg
East Gate Center
1010 N. 7th St., Room 319
Harrisburg, PA 17102-1400
717.783.4419

Hazleton
1201 A. Church St., Suite 203
Hazle Township, PA 18202-1455
570.459.3840

Pottsville
112 S. Claude A. Lord Blvd.
Pottsville, PA 17901-3602
570.621.3146

Scranton
400 Spruce St., Suite 500
Scranton, PA 18503-1814
570.963.4580

Wilkes-Barre
101-105 N. Main St.
2nd Floor Rear
Wilkes-Barre, PA 18701-2097
570.826.2577

Williamsport
208 W. Third St., Rear
Suite 202
Williamsport, PA 17701-6450
570.327.3735

EASTERN DISTRICT

Allentown
160 Hamilton St., Suite 200
Allentown, PA 18101-1918
610.821.6554

Bristol
1242 Veterans Highway
Bristol, PA 19007-2512
215.781.3274

Lancaster
315 W. James St., Suite 206
Lancaster, PA 17603-2979
717.299.7931

Malvern
72 Lancaster Ave., 2nd Floor
Malvern, PA 19355-2142
610.251.2878

Reading
Reading State Office Bldg.
625 Cherry St.
Reading, PA 19602-1151
610.621.2370

Southeastern District

Northeast Philadelphia
Grant Plaza Business Park
2901 Grant Ave., Suite 900
Philadelphia, PA 19114-1000
215.560.2125

Philadelphia
110 N. 8th St., Suite 401
Philadelphia, PA 19107-2413
215.560.2488

Upper Darby
Barclay Square Center, 2nd Floor
1500 Garrett Road
Upper Darby, PA 19082-4519
610.284.6913

See telephone directory on page 50 for names, telephone numbers and office locations of workers’ compensation judges.
### Office of Adjudication Statistical Review

**Petitions Assigned to Judges (not remands)**  
**Fiscal Year 2004/05 through Calendar Year 2009**

<table>
<thead>
<tr>
<th>TYPE OF PETITION</th>
<th>2004/05</th>
<th>2005/06</th>
<th>2006</th>
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<td>Fatal Basic OD Petition</td>
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<td>Interview Petition</td>
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<td>Joinder Petition</td>
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<td>Petition to Modify Compensation</td>
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<td>Petition to Suspend Compensation</td>
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<td>94</td>
<td>227</td>
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<td>1,833</td>
<td>1,811</td>
<td>1,751</td>
<td>1,741</td>
<td>1,920</td>
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<td><strong>Total</strong></td>
<td>51,504</td>
<td>50,471</td>
<td>49,967</td>
<td>50,401</td>
<td>51,184</td>
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Source: Bureau of Workers’ Compensation, Pennsylvania Department of Labor & Industry
Office of Adjudication Statistical Review

Petitions and Remands Assigned vs. Judges Decisions
Fiscal Year 1999/00 through Calendar Year 2009

Reportable Injuries* vs. Total Petitions and Remands vs. Total Claim Petitions**
Fiscal Year 1999/00 through Calendar Year 2009

* Missed more than one day, shift or turn of work due to injury
** Claim petitions include: claim, reinstatement, fatal, set aside final receipt, 301 (i) and OD fatal.

Source: Bureau of Workers’ Compensation, Pennsylvania Department of Labor & Industry
Petitions Assigned by County
2008 Calendar Year* vs. 2009 Calendar Year

*2008 numbers appear in (), followed by increase or decrease.

Source: Bureau of Workers’ Compensation, Pennsylvania Department of Labor & Industry
WorkSAFE PA® Initiative: Promoting Pennsylvania Workplace Safety

Workplace safety is a priority of the Rendell Administration and of the Department of Labor & Industry. Governor Rendell is committed to the goal of reducing workplace injuries and illnesses in Pennsylvania. Good safety makes good sense for the worker, businesses and the commonwealth of Pennsylvania.

Providing a safe work environment for Pennsylvania’s workers requires complete commitment by employers and employees. For this reason, Governor Rendell instituted the workplace safety initiative called WorkSAFE PA® Promoting Pennsylvania Workplace Safety.

The mission and function of the WorkSAFE PA® initiative is to provide Pennsylvania employers and employees with the information and technical assistance needed to develop comprehensive safety practices in the workplace. It also recognizes successful employer-employee joint safety programs, which result in the achievement of safety excellence.

At the Department of Labor & Industry, resources from the Governor’s Office of Labor-Management Cooperation; the bureaus of Workers’ Compensation, Labor Law Compliance, PENNSAFE and Occupational & Industrial Safety; and the Safety, Health, Accident Prevention and Education Division (SHAPE) provide a coordinated effort to ensure workplace safety throughout the commonwealth.

There are four main components to the WorkSAFE PA® initiative which include:

1. **The WorkSAFE PA® Advisory Board** – Comprised of business and labor representatives and health and safety professionals from across the commonwealth, the board serves as a community forum to provide the secretary of Labor & Industry with counsel and direction in the review or formulation of safety-related policies, programs and legislation for the governor’s initiative to make Pennsylvania a safer place to live and work. The board members are as follows:

   - **Elizabeth Crum**  
     Deputy Secretary for Compensation and Insurance – PA Department of Labor & Industry

   - **Rocco DiPietro**  
     Health, Safety & Environmental Professional – Cocciardi and Associates Inc.

   - **Donald W. Dunlevy**  
     Director/Chairman – United Transportation Union

   - **Dennis Eicker**  
     Vice President – International Brotherhood of Electrical Workers, Local 5

   - **Sean George**  
     Director, Safety Training – Steamfitters Local 449

   - **Bernadette L. Heckman**  
     Vice President, Safety and Control Loss – A.V. International Inc.

   - **Steve D. High**  
     President – High Safety Consulting

   - **Robert L. Holman**  
     Principal Engineer – Merck & Co. Inc.

   - **John Kupchinsky**  
     Director, Bureau of Workers’ Compensation – PA Department of Labor & Industry

   - **Jay Lantzy**  
     Director – Governor’s Office of Labor Management Cooperation

   - **Patrick V. Larkin, Esquire**  
     President – Brokerage Professionals Inc.

   - **Betsy L. Lovensheimer, CIH**  
     Executive Team Leader – Compliance Management International

   - **Robert McCall**  
     Director of Safety – Master Builder’s Association of Western PA

   - **Barb Moody**  
     Marketing Specialist – First Choice Rehabilitation Specialists

   - **Len Negley**  
     Executive Director – WorkSAFE PA®

   - **Robert O’Brien**  
     Executive Deputy Secretary for Labor & Industry – PA Department of Labor & Industry

   - **Judith A. Resenic, RN**  
     Program Manager – NoviCare Rehabilitation

   - **Scott Schneider**  
     Director, Occupational Safety & Health – Laborer’s Health & Safety Fund of North America

2. **WorkSAFE PA® School** – The Department of Labor & Industry offers a comprehensive school addressing safety issues, including implementation of the Johnstown Model, workplace health and safety, and other safety programs that contribute to the WorkSAFE PA® initiative.

3. **WorkSAFE PA® Recognition Program** – This program recognizes companies and organizations that have developed successful workplace safety programs.

4. **WorkSAFE PA® Resource Library** – This online resource library provides employers and employees with a variety of resources to develop workplace safety programs.
Governor’s Occupational Safety and Health Conference

This two-day conference brings together individuals with special interest in the field of workplace health and safety to share ideas and to meet innovators in safety program design and technology.

Using labor-management cooperation, the conference goal is to create a safer workplace and a healthier workforce, and to increase awareness of safety issues in the workplace, the home and throughout local communities.

Featuring nationally-known speakers, the conference highlights one-on-one interaction during two days of workshops. Many of the workshops are created based on needs expressed by attendees at the previous year’s conference. In addition, workshops with the most interest from attendees are repeated in the second session of the day to ensure that all participants have the opportunity to participate in the workshops of their interest.

Governor’s Award for Safety Excellence

Providing a safe work environment for Pennsylvania’s workers requires complete commitment by employers and employees. For this reason, Governor Rendell’s safety initiative will provide Pennsylvania employers and employees with the information and technical assistance needed to develop comprehensive safety practices in the workplace. It will also recognize the successful employer-employee joint safety programs, which result in the achievement of safety excellence.

The Governor’s Award for Safety Excellence is a competitive award, as evidenced by the high number of nominations received annually. The information gained from these nominations provides valuable best practices that are shared across the state.

Any Pennsylvania employer is eligible for the Governor’s Award for Safety Excellence; nominations for the award are voluntary. Information and criteria used to determine finalists include any established joint safety committee; level of labor and management cooperation in prevention efforts; a comprehensive safety plan with a commitment of resources and training; trends experienced in workplace injuries/illnesses over the past five years; number, frequency and severity of workplace injuries/illnesses vs. industry standards; and innovation and strategic development of safety policy and approaches.

Initial review of all nominations is conducted by the Governor’s Award for Safety Excellence Review Committee. Semi-finalists are then contacted for an on-site visit conducted by a member(s) of the department’s safety team to review the nominee’s comprehensive safety program. Site visit reports are written and distributed to the Governor’s Award for Safety Excellence Review Committee for the determination of finalists. Recommendations are then forwarded to the secretary of Labor & Industry, who makes the final determination.

A special luncheon at the annual Governor’s Occupational Safety and Health Conference, in Hershey, Pa., is the stage for winner recognition and award presentations.

For a copy of the award application, visit www.dli.state.pa.us.
AmQuip Crane Rental
AmQuip Crane Rental (Trevose, Bucks County) works with machines that range from small six-ton cranes to 500-ton, all-terrain crawler cranes. AmQuip’s safety philosophy places each of its 360 employees in charge of safety programs. The company’s strong safety culture has enabled AmQuip to go more than three years without a lost-time injury. Over the same time period, workers’ compensation costs have been reduced by more than 83 percent.

C/G Electrodes
C/G Electrodes (St. Marys, Elk County) started in 1899 as the Speer Carbon Co., a manufacturer of carbon brushes used in electric motors. Today, working at its original site, C/G is the only American-owned and operated manufacturer of large-diameter electrodes used to melt scrap in electric arc furnace steelmaking.
Cabot Supermetals

Cabot Supermetals (Boyertown, Berks County) operates manufacturing facilities in the U.S. and 19 other countries. The primary product line of the Boyertown facility, which opened in 1950, is tantalum, a high-performance metal used in all electronic products. With almost 1.75 million hours worked without a lost-time injury, the facility was recognized by the Cabot Corp. as the top safety performer of the company’s 63 sites.

Concurrent Technologies Corp.

Concurrent Technologies Corp. (Johnstown, Cambria County) operates manufacturing facilities in the United States, Europe and Asia. Concurrent Technologies Corp. is an applied research and development company with a staff of more than 850 professionals, technicians and administrators. CTC is involved in such businesses as national defense, energy, environmental sustainability, homeland security and technology protection.
County of Franklin

Franklin County’s 935 employees work in 23 locations including service agencies, row offices, a nursing home, senior centers and a county prison. The county places a strong emphasis on workplace wellness and communication. The new prison is nationally recognized for safety and security design elements. Safety-related standing committees include workplace health and safety, workplace wellness, emergency and pandemic preparedness, employee recognition and team building. The county achieved a reduction of more than 25 percent in workers’ compensation costs in one year and reductions in both loss ratio and incurred losses of 52 percent and 45 percent, respectively, in the last two fiscal years.

Covanta Energy

Covanta Energy (Lancaster, Lancaster County) processes 1,200 tons of waste and produces 26 megawatts of electricity per day. Covanta’s safety programs emphasize continuous housekeeping, fume and odor control, prevention of water contamination and constant facility inspection.
Keystone Wood Specialties

Keystone Wood Specialties (Lancaster, Lancaster County) was founded in 1972 as the S.D. Stoltzfus Cabinet Shop. The maker of cabinet doors, drawers, moldings and custom applications, has made significant investment in new technology to increase workplace safety and productivity.

Southern Chester County EMS

Safety measures implemented by Southern Chester County EMS (West Grove, Chester County) include “Drive to Survive” training, increased chevron markings and lighting on all vehicles, ground-focused vehicle sirens for increased hearing/feeling of emergency vehicle approach, battery-powered stretchers that eliminate lifting and use of the Opticon system that enables the wireless changing of intersection lights to reduce collision risks.
The RiteScreen Company

Founded in 1947, The RiteScreen Company (Elizabethville, Dauphin County) is the largest manufacturer of window and patio door screens in the United States and produces more than 30,000 units per day at its six facilities across the country. Production processes include extrusion, sizing, cutting, assembly, packaging and shipping. Its safety record includes no lost workday injuries in more than two years.

Zippo Manufacturing Co.

Founded in 1932, Zippo Manufacturing Co. (Bradford, McKean County) manufactures pocket lighters, butane lighters, hand warmers, outdoor utility lighters, candle lighters and related products. Zippo has produced more than 400 million lighters with the now famous “It works or we fix it for free” guarantee. In 1993, Zippo acquired Bradford-based W. R. Case and Sons Cutlery Co., and also owns Zippo Fashion Italia, a maker of leather goods and accessories, based in Vicenza, Italy.
On the Web

Check us out on the Web at www.dli.state.pa.us, click on Workers’ Compensation. Use the left navigation bar to find more exciting and innovative workers’ compensation features, including:

Health and Safety

Find descriptions about a variety of safety-related programs including: safety committee certification, return-to-work, the Governor’s Award for Safety Excellence and drug-free workplaces. You’ll also be able to learn about HandS, the health and safety online filing system. Self-insured employers and insurers can file annual reports online. Employers who want to certify their safety committees or renew existing certification can do so on the Web. The Health and Safety pages will provide instructions on how to use the HandS system and how to establish a user account.

Medical Treatment Information

The Health Care Services Review Division is pleased to offer online tutorials to assist providers with the completion of the Application for Fee Review, LIBC-507, and Medical Report Form, LIBC-9. The division also provides an online courtesy copy of the workers’ compensation fee schedule.

Claims Information

The bureau has been working to make electronic filing of official bureau forms and petitions available to the workers’ compensation community. On the website, you’ll find links to assist in obtaining a User ID and password and for instructions on how to file the forms and petitions via the Internet. Also provided is a tutorial to explain when the forms and petitions are used and how to complete them.

Other Useful Information

Use the Web to access other information such as the Workers’ Compensation Act, bureau publications, information on obtaining workers’ compensation hearing transcripts, alternative dispute resolution, Kids’ Chance of Pennsylvania Inc. and more.

Publications Available from the Bureau of Workers’ Compensation

Workers’ Compensation Act

The bureau makes the Pennsylvania Workers’ Compensation Act available online at www.dli.state.pa.us, click on Workers’ Compensation, then Publications, then WC Act. Copies of the Act are available for purchase from:

State Bookstore of PA
Commonwealth Keystone Building
400 North St.
Harrisburg, PA 17120
717.787.5109

Employer Information

- Employer Information (LIBC-200) – Includes key aspects of the Act that relate specifically to employers.

Injured Workers’ Information

- Workers’ Compensation & the Injured Workers (LIBC-100) – General information on the rights and responsibilities of injured workers under the law. This publication is also available in Spanish.

Medical Cost Containment Information

- Medical Cost Containment Regulations Reference – Workers’ compensation medical cost containment regulation highlights.

Health and Safety Materials

- State-Certified Workplace Safety Committee Program (LIBC-733)
- Application for Certification of Workplace Safety Committee Completion Guide (LIBC-372)
- Renewal Application for Safety Committee Certification Completion Guide (LIBC-372R)
- Commonwealth of Pennsylvania Insurer’s Initial Report of Accident & Illness Prevention Services (LIBC-211I)
- Insurer’s Annual Report of Accident & Illness Prevention Services (LIBC-210I)
- Commonwealth of Pennsylvania Self-Insured Employer’s Initial Report of Accident & Illness Prevention Program (LIBC-221E)
- Accident & Illness Prevention Program Status by Individual Self-Insured Employers (LIBC-220E)

Miscellaneous

- News & Notes – Bureau newsletter on policies, procedures and updates on the law.
- Section 305 Prosecutions – A guide to aid Pennsylvania’s district attorneys in prosecuting
employers who fail to carry the required workers’ compensation insurance coverage as outlined in Section 305 of the Act.

To obtain copies of the publications listed above or for information regarding workers’ compensation in Pennsylvania, contact the bureau:

- By E-mail
  ra-li-bwc-helpline@state.pa.us

- By Phone
  Claims Information Services
  Local calls and calls outside PA: 717.772.4447
  Toll-free inside PA: 800.482.2383
  TTY (only people with hearing loss)
  Toll-free inside PA: 800.362.4228
  TTY local and calls outside PA: 717.772.4991
  Employer Information Services: 717.772.3702

- By Mail
  Bureau of Workers’ Compensation Information Services Section
  1171 S. Cameron St., Room 324
  Harrisburg, PA 17104-2501

Certified Employer Network
For referrals to employers who have volunteered to provide assistance in establishing workplace safety committees, call 717.772.1917.

Join our Mailing List
To be added to our electronic mailing list, complete the form below, cut on the dotted line and mail to:

Bureau of Workers’ Compensation Information Services Section
1171 S. Cameron St., Room 324
Harrisburg, PA 17104-2501

Please add me to your electronic mailing list for regular notification of the online availability of future publications.

________________________________________
(name)

________________________________________
(county)

________________________________________
(e-mail address)

Please check the box which best represents your affiliation:

☐ Claimant Attorney ☐ Defense Attorney
☐ Employer ☐ Government ☐ Health Care Industry
☐ Insurance Industry ☐ Labor
☐ Third-Party Administrator
☐ Other ____________________________
Allentown
610.821.6554
160 Hamilton St., Suite 200
Allentown, PA 18101-1918

Altoona
814.946.7355
615 Howard Ave., Suite 202
Altoona, PA 16601-4813

Bristol
215.781.3274
1242 Veterans Highway
Bristol, PA 19007-2512

Brookville
814.849.5382
18 Western Ave., Suite F
Brookville, PA 15825-1540

Clearfield
814.765.6398
241 E. Market St.
Clearfield, PA 16830-2424

Director’s Office
717.783.4151
East Gate Center
1010 N. 7th St., Room 318
Harrisburg, PA 17102-1400

Erie
814.871.4632
3400 Lovell Place
13th & Holland streets
Erie, PA 16503-2621

Greensburg
724.832.5310
144 N. Main St., Suite 1A
Greensburg, PA 15601-2404

Harrisburg Judges’ Office
717.783.4419
East Gate Center
1010 N. 7th St., Room 319
Harrisburg, PA 17102-1400

Hazleton
570.459.3840
1201A N. Church St., Suite 203
Hazle Township, PA 18202-1455

Johnstown
814.533.2494
607 Main St., Suite 100
Johnstown, PA 15901-2119

Lancaster
717.299.7591
315 W. James St., Suite 206
Lancaster, PA 17603-2979

Malvern
610.251.2878
72 Lancaster Ave., 2nd Floor
Malvern, PA 19355-2142

New Castle
724.656.3084
Cascade Galleria
100 S. Jefferson St., Suite 146
New Castle, PA 16101-3900

Northeast Philadelphia
215.560.2125
Grant Plaza Business Park
2901 Grant Ave., Suite 900
Philadelphia, PA 19114-1000

Philadelphia
215.560.2488
110 N. 8th St., Suite 401
Philadelphia, PA 19107-2413

Pittsburgh
412.565.5277
411 7th Ave., Room 310
Pittsburgh, PA 15219-1944

Pottsville
570.621.3146
112 S. Claude A. Lord Blvd.
Pottsville, PA 17901-3602

Reading
610.621.2370
Reading State Office Bldg.
625 Cherry St.
Reading, PA 19602-1151

Scranton
570.963.4580
400 Spruce St., Suite 500
Scranton, PA 18503-1814

Uniontown
724.439.7420
108 N. Beeson Blvd., Suite 200
Uniontown, PA 15401-7401

Upper Darby
610.284.6913
Barclay Square Center, 2nd Floor
1500 Garrett Rd.
Upper Darby, PA 19082-4519

Washington
724.223.4595
Millcraft Center, Suite 120 LL
90 W. Chestnut St.
Washington, PA 15301-4528

Wilkes-Barre
570.826.2577
101-105 N. Main St.
2nd Floor Rear
Wilkes-Barre, PA 18701-2097

Williamsport
570.327.3735
208 W. Third St., Rear
Suite 202
Williamsport, PA 17701-6450
Bureau of Workers’ Compensation Directory

Administrative Support Division 717.783.5421

Claims Management Division 717.772.0621
E-mail: ra-cmdClaimsOps@state.pa.us
  Compensable Documents Unit 717.772.0619
  Subsequent Documents 717.772.1905
  Calculation Review Unit 717.772.0618
  Petitions Unit 717.787.3274
  Records Unit 717.787.3361

Statistical Information Section 717.783.5421
E-mail: ra-cmdStatistical@state.pa.us (for first reports of injury, annual claims status reports and electronic data interchange)

Regulatory Adherence & Educational Outreach
E-mail: ra-cmdRegAd&EdOutrch@state.pa.us (for training, 21-day compliance and general questions)
  SFR/Medical Payments 717.787.3457

Director’s Office 717.783.5421
  Compliance Section 717.783.5421
  Fee Review Hearing Office 717.783.5421
  Information Services Section 717.783.5421
  E-mail: ra-li-bwc-helpline@state.pa.us
    Claims Information Services
      Inside PA (toll-free) 800.482.2383
      Local & outside PA 717.772.4447
    Employer Information Services 717.772.3702
    TTY (for hearing and speech impaired)
      Inside PA (toll-free) 800.362.4228
      Local & outside PA 717.772.4991

Health and Safety Division 717.772.1917
E-mail: ra-li-bwc-safety@state.pa.us
  Audit/Report Processing 717.772.1636
  Certification/Education 717.772.1635

Health Care Services Review Division 717.787.3486
E-mail: ra-li-bwc-hcsrd@state.pa.us
  Fee Review 717.772.1900
  Utilization Review 717.772.1914

Legal Division 717.783.4467
E-mail: gc-li-cameronstoffice@state.pa.us

Self-Insurance Division 717.783.4476
## Bureau of Workers’ Compensation and Office of Adjudication Contact Information

<table>
<thead>
<tr>
<th>PERSONNEL</th>
<th>LOCATION</th>
<th>TITLE</th>
<th>TELEPHONE NO.</th>
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<tbody>
<tr>
<td>Adams, Stacey</td>
<td>Harrisburg HQ</td>
<td>Applications Manager, Self-Insurance</td>
<td>717.783.4476</td>
</tr>
<tr>
<td>Bachman, Patrickian</td>
<td>NE Philadelphia DO</td>
<td>Workers’ Compensation Judge</td>
<td>215.560.2125</td>
</tr>
<tr>
<td>Baker, Paul</td>
<td>Pottsville DO</td>
<td>Workers’ Compensation Judge</td>
<td>570.621.3146</td>
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<tr>
<td>Baldys, Karl</td>
<td>Williamsport DO</td>
<td>Workers’ Compensation Judge</td>
<td>570.327.3735</td>
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<td>Barbieri-Young, Christina</td>
<td>Philadelphia DO</td>
<td>Workers’ Compensation Judge</td>
<td>215.560.2488</td>
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<tr>
<td>Beach, Audrey</td>
<td>Allentown DO</td>
<td>Workers’ Compensation Judge</td>
<td>610.821.6554</td>
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<td>Benedict, Alfred</td>
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<td>Benischke, Robert</td>
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<td>215.781.3274</td>
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<td>Bivens, Linda</td>
<td>Harrisburg DO</td>
<td>Administrative Officer</td>
<td>717.783.4419</td>
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<tr>
<td>Blevins, Donna</td>
<td>Harrisburg HQ</td>
<td>Secretary, Claims Management</td>
<td>717.772.0621</td>
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<tr>
<td>Bloom, Irving</td>
<td>Greensburg DO</td>
<td>Workers’ Compensation Judge</td>
<td>724.832.5310</td>
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<td>Bowers, Debra</td>
<td>Philadelphia DO</td>
<td>Workers’ Compensation Judge</td>
<td>215.560.2488</td>
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<tr>
<td>Boyer, Andy</td>
<td>Harrisburg HQ</td>
<td>Supervisor, Subsequent Docs. – Claims Mgmt.</td>
<td>717.772.0619</td>
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<tr>
<td>Briston, Pamela</td>
<td>Pittsburgh DO</td>
<td>Workers’ Compensation Judge</td>
<td>412.565.5277</td>
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<td>Bulman, Timothy</td>
<td>Philadelphia DO</td>
<td>Workers’ Compensation Judge</td>
<td>215.560.2488</td>
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<tr>
<td>Burman, Martin</td>
<td>Malvern DO</td>
<td>Workers’ Compensation Judge</td>
<td>610.251.2878</td>
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<td>Callahan, Bonnie</td>
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<td>Caravaggio, Susan</td>
<td>Williamsport DO</td>
<td>Workers’ Compensation Judge Manager</td>
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<td>Cicola, David</td>
<td>Johnstown DO</td>
<td>Workers’ Compensation Judge Manager</td>
<td>814.533.2494</td>
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<td>Clark, Charles</td>
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<td>Costelnock, Paul</td>
<td>Greensburg DO</td>
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<td>Craig, Sandra</td>
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<td>Cummings, Patrick</td>
<td>Scranton DO</td>
<td>Workers’ Compensation Judge</td>
<td>570.963.4580</td>
</tr>
<tr>
<td>Crum, Elizabeth</td>
<td>Harrisburg</td>
<td>Deputy Secretary for Comp. &amp; Insurance</td>
<td>717.787.5082</td>
</tr>
<tr>
<td>Dayton-Crawford, Diane</td>
<td>Uniontown DO</td>
<td>Administrative Officer</td>
<td>724.439.7420</td>
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<tr>
<td>Deeley, James</td>
<td>Harrisburg DO</td>
<td>Workers’ Compensation Judge</td>
<td>717.783.4419</td>
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<td>Dietrich, Wayne</td>
<td>Harrisburg DO</td>
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<tr>
<td>DiLorenzo, Kathleen</td>
<td>Upper Darby DO</td>
<td>Workers’ Compensation Judge</td>
<td>610.284.6913</td>
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<td>Dlin, Geoffrey</td>
<td>Allentown DO</td>
<td>Workers’ Compensation Judge</td>
<td>610.821.6554</td>
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<td>Doman, Bruce</td>
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<td>Allentown DO</td>
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<td>Dupin, Kathleen</td>
<td>Harrisburg HQ</td>
<td>Chief, Claims Management</td>
<td>717.772.0621</td>
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<td>Eader, Brian</td>
<td>Harrisburg DO</td>
<td>Workers’ Compensation Judge</td>
<td>717.783.4419</td>
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<tr>
<td>Evans, Darrel</td>
<td>Harrisburg HQ</td>
<td>Supervisor, Mailroom – Admin.</td>
<td>717.783.5421</td>
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<td>PERSONNEL</td>
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</tr>
<tr>
<td>Fitzpatrick, Anne</td>
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### Bureau of Workers’ Compensation and Office of Adjudication Contact Information

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