The Pennsylvania Workers’ Compensation Act was enacted in 1915 to protect workers and employers from the potentially devastating consequences of work injuries. Today, nearly 100 years later, the Department of Labor & Industry’s Bureau of Workers’ Compensation and Office of Adjudication carry out the provisions of the act with superior service, innovation and excellence. This report expands on our 2013 accomplishments, as well as our goals for further improvement.

A primary aim of the workers’ compensation system is to reduce workplace injuries. In this effort, as of 2013, more than 10,500 employers have developed state-certified workplace safety committees that represent 1.4 million employees in Pennsylvania, nearly a quarter of all Pennsylvania employees. These employers are entitled to workers’ compensation insurance premium discounts, which have totaled more than $500 million to date. We look forward to helping Pennsylvania companies become safer workplaces by establishing many more workplace safety committees in the coming years.

The Uninsured Employers Guaranty Fund (UEGF) has increased its efforts to secure critical funding by providing statistical and financial analysis in support of future UEGF reforms. The UEGF has also improved its accounting to maintain proper control of criminal and civil recoveries. The fund manages more than 400 active claims in litigation and provides information to the BWC’s Compliance and Legal Divisions to support criminal prosecutions and liens.

In 2013, the Pennsylvania Training for Health & Safety resource (PATHS) conducted 262 training sessions for more than 13,100 Pennsylvania employees and has more than 106 safety training topics available for employers. These trainings are aimed at reducing business costs in Pennsylvania. Defensive driving classroom training was provided to more than 1,900 attendees who regularly operate vehicles throughout their workday.

These efforts illustrate the Bureau of Workers’ Compensation’s commitment to improving workplace safety and keeping costs low for employers. Our achievements mean that more money can be reinvested in Pennsylvania’s workforce. As our economy grows, our future depends on how well we protect workers’ health, safety and ability to earn.

Sincerely,

[Signature]

Julia K. Hearthway
In 2013, the Pennsylvania Bureau of Workers’ Compensation, the Workers’ Compensation Office of Adjudication and the Workers’ Compensation Appeal Board worked to provide superior customer service and to upgrade and improve the workers’ compensation system. The 2013 annual report outlines achievements workers’ compensation accomplished throughout the year.

WCAIS, The Workers’ Compensation Automation and Integration System, was fully implemented in 2013, creating a single online information system that provides 24/7 self-service online claims filing, tracking, management and communication. With WCAIS, Pennsylvania is leading the way in customer service as the first jurisdiction in the country to introduce a workers’ compensation system that provides web-based integration across the three workers’ compensation program areas, coupled with quick, accurate and efficient electronic filing of claims transactions through Electronic Data Interchange (EDI).

The old computer systems were antiquated, costly to maintain and primarily paper-based, resulting in copying and mailing costs, time lost in sharing information between the three program areas, slower claims processing and a heavy drain on personnel time in responding to claim inquiries.

As training and outreach efforts to the external workers’ compensation community continue, the community is discovering WCAIS to be a powerful and valuable tool: users can file and track claims, petitions, appeals, forms and correspondence online, with a common case file shared between public users and staff. The result is greater transparency and communication, faster claims processing and adjudication, fewer staff hours and less paperwork.

WCAIS is an innovation in customer service: it saves time and money and is estimated to have replaced more than 205,500 paper forms, a 32 percent reduction.

I congratulate and thank everyone who has helped the Bureau of Workers’ Compensation, Workers’ Compensation Office of Adjudication and the Workers’ Compensation Appeal Board provide excellent customer service. We all remain committed to improving safety for all Pennsylvania employees and employers, reducing costs and ensuring an efficient and fair workers’ compensation system in the years to come.

Sincerely,

Eugene C. Connell
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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) and the 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 lost wages 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 lost wages 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 and the Office of Adjudication are 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 act’s requirements, the bureau and Office of Adjudication have several primary roles:

- Obtain, review and maintain records on certain lost time work injuries and benefit documents.
- Certify individual self-insured employers and self-insured employer pools, and determine their monetary security requirements.
- Resolve areas of contention among the participants in the workers’ compensation system.
- Enforce the act’s provisions.
- Promote the health and safety of employees in accordance with the 1993 and 1996 amendments to the act.
- Enforce the act’s occupational disease provisions.

Basic Benefits

Replacement of Lost Wages

A portion of the worker’s 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.

1
Overview of the PA Workers’ Compensation Program (cont.)

days. These payments are tax free. The maximum allowable weekly benefit for calendar year 2013 was $917. 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.

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.

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.

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

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.

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. The commonwealth makes payments for the duration of the workers’ total disability.
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 the 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 via EDI transaction in the IAIABC Claims Release 3 format 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.

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 Denial and appropriate EDI transaction must also be filed with the Bureau of Workers' Compensation. 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 4 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 paper form and EDI transaction must be filed with the bureau along 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 must then issue either a Notice of Workers' Compensation Denial, Notification of Compensation Payable or Agreement for Compensation to the injured worker as well as the appropriate EDI transaction with the bureau within the 90-day temporary window.

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) to the injured worker. The Notice of Compensation Payable, the appropriate EDI transaction and Statement of Wages must be filed with the bureau.

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 to the bureau.

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 along with the appropriate EDI transaction. Additional LIBC-751s for further modifications may be filed as necessary within seven days of the modification date.

The insurer must provide the injured worker with the LIBC-392A, Final Statement of Account of Compensation Paid and submit the appropriate EDI transaction to the bureau after the final payment of compensation.

The insurer must provide the injured worker with a Supplemental Agreement (LIBC-337) to alter the worker's benefits and submit the appropriate EDI transaction and paper form to the bureau.

The insurer must provide the injured worker with the LIBC-392A, Final Statement of Account of Compensation Paid and submit the appropriate EDI transaction to the bureau after the final payment of compensation.

The Final Receipt (LIBC-340) is filed when an injured worker's benefits terminate. The insurer must provide the injured worker with the Final Receipt and submit the appropriate EDI transaction to the bureau. 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 the 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 accepts liability for the injury and issues a Notice of Workers’ Compensation Payable, a Notice of Temporary Compensation Payable or an Agreement for Compensation to the employee. These paper forms and EDI transactions must also be filed with the Bureau of Workers’ Compensation. See the Flow of a Pennsylvania Workers’ Compensation Claim on page 3 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; the Denial and appropriate EDI transaction must also be filed with the bureau.

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 according to the county in which the employee lives. A Notice of Assignment is issued to the parties advising them as to which judge is assigned to the matter.

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

A workers’ compensation judge hears and receives 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:

**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 2012-13, the amount assessed totaled $79,977,952 and represented 2.81 percent of compensation paid in calendar year 2011.

**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 2012-13, the amount assessed was $121,961,056 and represented 0.76 percent of compensation paid in calendar year 2011.

**The Subsequent Injury Fund**

**Purpose:** To compensate 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 2012-13 fiscal year, the amount assessed totaled $197,748 and represented 0.007 percent of compensation paid in calendar year 2011.

**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. 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. The financing of the Prefund Account is 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 2012-13, the amount assessed was $57,812 and represented 0.5 percent of the annual modified premium of employers starting self-insurance.

**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 $2,848,924 during 2012-13.
Workers’ Compensation Administration Fund Budget

Workers' Compensation Administration Fund Budget, Fiscal Year 2012-13

Total = $81,896,000

- Fixed Assets: $149,740
- Other Expenses: $1,650,000
- Operating Expenses: $37,910,260
- Personnel Services: $42,186,000

Source: Bureau of Workers’ Compensation, Pennsylvania Department of Labor & Industry
Workers’ Compensation Automation and Integration System

The Pennsylvania Department of Labor & Industry began development of a new computer system in January 2011. Replacement of the existing system was warranted, due to aging technology and the need to move away from a paper-based system. The new system provides 24-hour online access to claim information.

Staff from three program areas worked with our vendor to develop the Workers’ Compensation Automation and Integration System, or WCAIS. The new computer system integrates the three program areas of workers’ compensation: the Bureau of Workers’ Compensation, the Workers’ Compensation Office of Adjudication and the Workers’ Compensation Appeal Board.

In September 2012, the Workers’ Compensation Appeal Board and part of the Bureau of Workers’ Compensation (the Helpline) were moved to the new system during the Release 1 phase of the project. Release 2 went live on Sept. 9, 2013, and incorporated the Worker’s Compensation Office of Adjudication and the Bureau of Workers’ Compensation. Release 2 completed the process to bring about a seamless link between the three workers’ compensation program areas and our stakeholders.

The workers’ compensation community, including third party administrators, attorneys, insurance carriers, self-insurers and medical providers, have real-time access to claim-related information. Electronic Data Interchange (EDI) Release 3 was mandated as of Sept. 9, 2013. EDI will provide faster claims processing and electronic record keeping, resulting in a large decrease in the use of paper forms as well as a reduction of manual processing and hard copy mailings, improving productivity for internal and external stakeholders.

For more information and training resources, visit the WCAIS Project at www.dli.state.pa.us/wcais. To register for WCAIS and utilize the system, visit the main WCAIS site at http://www.wcais.pa.gov.

The Workers’ Compensation Rules Committee

The Special Rules of Administrative Practice and Procedure Before the Workers’ Compensation Appeal Board and Before Workers’ Compensation Judges were last amended in October 2009. In 2011, the Workers’ Compensation Rules Committee reconvened to discuss revisions to the rules pertaining to such subjects as service, subpoenas, attorney fees, the UEGF (Uninsured Employers Guaranty Fund) and the interplay between the rules and electronic filing. Between 2011 and 2013, the committee met on multiple occasions to consider suggested revisions and to discuss proposed rule changes with various stakeholders.

The committee last met on May 2, 2013, and approved a number of suggested changes to the rules. The suggested rule changes were then submitted for regulatory review. After review, the revised rules were published in proposed form in The Pennsylvania Bulletin on Feb. 22, 2014. Interested parties were given 30 days within which to submit written comments. All comments are to be reviewed and considered for possible revision prior to final form submission. The committee anticipates that the revisions will be ready for final form submission in 2014.

Any interested party who wishes may submit suggestions or recommendations for consideration by the committee in the future. These suggestions or recommendations should be submitted to John W. McTiernan, Esquire, Chair of the Committee.

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.**  
*Hope, opportunity and scholarships for kids of injured workers*

What happens when a child loses a parent to a work-related fatality? What happens when a family’s income drops drastically because mom or dad can’t return to a well paying job, or when the family income is affected by a long period of disability? For more than 15 years, Kids’ Chance of Pennsylvania, Inc. (Kids’ Chance of PA) has proudly made a significant difference in the lives of affected Pennsylvania families by providing scholarship grants for college and vocational education to children of Pennsylvania workers who have been killed or seriously injured in a work-related accident resulting in financial need.

With total scholarship awards surpassing the $1 million mark since its inception in 1997, Kids’ Chance of PA continues to increase its scholarship giving every year in order to provide financial support to deserving young people who are pursuing their educational dreams. For the 2013-2014 academic year, 56 scholarships were awarded to students totaling $170,250. These scholarships were made possible due to the generous contributions made by Scholar Sponsors, Corporate and Community Partners, Kids’ advisors and individual and organization donors. We are extremely grateful to those who help us help students.

Through the scholarship program, Kids’ Chance of Pennsylvania is making a significant difference in the lives of all children affected by a workplace injury or death by helping them pursue and achieve their educational goals. Jessica, one of our current student scholarship recipients currently attending West Chester University, shares:

My dad was the main financial provider, and so the loss of his work income has greatly impacted my family. This is especially so when it comes to our college education because that was my father’s main goal in life... to get his two daughters through college. We could not have done this without Kids’ Chance.

For more information about becoming a Corporate and Community Partner, please contact Kids’ Chance of Pennsylvania at 610-970-9143 or info@kidschanceofpa.org.

**21-Day Compliance**

The Pennsylvania Workers’ Compensation Act, Section 406.1(a)(c), requires insurers and self-insured employers to either make first payment or deny a claim no later than 21 days after the employer has notice or knowledge of the claimant’s disability. Additionally, the rules and regulations require a form to accept or deny a claim be sent to the claimant, or the claimant’s dependent, and the bureau no later than 21 days after the employer has notice or knowledge of the claimant’s disability.

Since 1999, the Bureau of Workers’ Compensation has been monitoring the 21-day compliance rate of insurers and self-insured employers. The bureau’s formula for calculating 21-day compliance is to compare the file date of the Notice of Compensation Payable, Agreement for Compensation, Denial or Temporary Notice of Compensation Payable against the Employer Notified Date or the Date Disability Began from the First Report of Injury, using the later of the two (to account for delayed disability situations). The bureau then selects one random quarter per year, as a sampling, to complete this comparison and determine an insurer/self-insurer’s compliance rating.

The 2013 report was drawn from the reporting period of April 1, 2013 – June 30, 2013. It identifies each insurer and self-insured employer by name, bureau code, number of claims filed in the reporting period and the percentage of compliance. The statewide industry average was 72 percent.

**Total Disability Weekly Workers’ Compensation Rates**

The following table illustrates the weekly workers’ compensation rates used to calculate benefits payable to an injured employee.
Workers’ Compensation Updates (cont.)

The compensation rate is 66.66 percent of the employee’s average weekly wage. If 66.66 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 2002 are maintained by the bureau. For partial disability, other calculations and definitions apply.

<table>
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<tr>
<th>Year</th>
<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>
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<tbody>
<tr>
<td>2002</td>
<td>$662.00</td>
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<td>$458.50</td>
</tr>
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*For purposes of calculating the update to payments for medical treatment rendered on and after Jan. 1, 2013, the percentage increase in the statewide average weekly wage was 3.3 percent.
Bureau Personnel

Organization Chart
As of Dec. 31, 2013

Department of Labor & Industry Secretary
Julia K. Hearthway

Compensation & Insurance Deputy Secretary
Eugene C. Connell

Bureau Director
Stephen J. Fireoved 717-783-5421

Labor & Industry Chief Counsel
Arthur F. McNulty

Deputy Chief Counsel
Thomas J. Kuzma 717-783-4467

Health Care Services Review Division Chief
Debra A. Novakovich 717-772-1712

Claims Management Division Chief
Kathleen M. Dupin 717-772-0621

Claims Information Services
800-482-2383
717-772-4447

Employer Information Services
717-772-3702
Manager
Mistie S. Snyder

Self-Insurance Division Chief
George W. Knehr 717-783-5421

Health and Safety Division Chief
Scott G. Weiant 717-772-1917

Administrative Support Division Chief
Deborah A. Ingram 717-783-5421

Compliance Section Manager
Anne Carmody 717-787-3567

Uninsured Employers Guaranty Fund Section Manager
Edith M. Reichert 717-886-9184

Manager
Bureau Divisions

Director’s Office
Compliance Section
Anne Carmody

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:

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

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

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.

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.

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

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

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

2013 Accomplishments

Mailed the Employer Information pamphlet to 17,350 new or modified businesses to better educate employers about their workers’ compensation responsibilities, along with certificates of insurance to secure information assuring their compliance; 5946 businesses failed to respond, resulting in a second mailing.

Instituted 993 new investigations of potential employer failure to insure workers’ compensation liability and referred 22 cases to the bureau’s Legal Division for prosecution.

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

Processed 1,474 corporate executive officer exceptions and 1,340 religious exemptions for exclusion under the act as well as 138 domestic elections for inclusion under the act.

Investigated 1,512 potential child labor law violations that could result in the collection of a 50 percent additional compensation penalty.

Notified 1,911 insurers of their requirement to pay a fee review determination that has not been appealed.

Director’s Office
Information Writer

Primary Functions

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

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

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

2013 Accomplishments

Mailed 62,962 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.

Published the bureau’s quarterly newsletter, News & Notes. This publication provides an overview of workers’ compensation policies, programs and updates.
The Workers’ Compensation Act was amended on Nov. 9, 2006, to include Act 147, which established the Uninsured Employers Guaranty Fund (UEGF) to extend benefits to injured workers whose employer failed to insure their liability for work-related injuries. The UEGF became effective Jan. 7, 2007. Initially, the Bureau of Workers’ Compensation shared the processing of UEGF claims between its divisions and the Third Party Administrator (TPA), with the bureau director responsible for managing the overall administration of the fund.

In December 2011, the UEGF Section was created, composed of three staff: Michelle Carricato, Clerk Typist II, who processes all Notices of Claims Against the Uninsured Employer and assembles the claim files; Jody Weaver, Management Technician, who receives the claim files, researches the uninsured employers, sends the files to counsel, creates and maintains accounting and financial records to monitor criminal and civil restitutions for the UEGF and provides collection information to the Compliance Section and the Legal Division; and Edith Reichert, Administrative Officer I and manager of the UEGF.

The UEGF Section is responsible for reviewing UEGF Notices of Claims to ensure that they are compliant with the act. UEGF determines through the Compliance Section if the employer has coverage, notifies the uninsured employer of its potential obligation to the injured worker and assigns a Notice of Claims to the TPA to complete an initial investigation within 21 days, or prior to the receipt of a UEGF Claim Petition. Receipts of UEGF Claim Petitions and Notices of Assignment to workers’ compensation judges are followed so that the UEGF may assign the claims to counsel after research concerning the uninsured employer and injured worker is performed and upon the advice of the Legal Division. The UEGF also collects statistical and financial information on the management of the UEGF Notices of Claims and Claim Petitions in order to prepare reports to the Workers’ Compensation Advisory Committee, the secretary of the Department of Labor & Industry, the Compliance Section and the Legal Division.

Since inception, the UEGF has received 2,172 Notices of Claims Against the Uninsured Employer and 1,718 UEGF Claim Petitions. Currently, the UEGF pays ongoing benefits to 44 injured workers and directs the handling of those claims through the TPA.

2013 Accomplishments

- Provided guidance to the TPA and counsel on over 400 active UEGF claims. Provided negotiating authority on settlements concerning claim petitions, criminal prosecution restitution and civil recoveries.
- Researched and gathered all recoveries from assessments, County Clerks of Courts, direct defendant restitutions, liens and subrogation claims since 2007. Created tracking mechanisms to update monthly.
- Provided financial reports and created lien tracking data on uninsured employers involved with UEGF claims to support the Legal Division with filing civil liens.
- Assisted with UEGF legislative reform by providing statistical and financial information to the Secretary of the Department of Labor & Industry and the legislature.
- Provided statistical and financial reports to the Workers’ Compensation Advisory Committee.
- Reviewed all requests for payments against UEGF claims by the TPA, approved payments and forwarded Interface Reports to the Department of Treasury for the issuance of checks.
- Tested and retested the Workers’ Compensation Automation & Integration System (WCAIS). Entered enhancements and defects.

Bureau Divisions (cont.)

Submitted articles for inclusion in the Pennsylvania Self-Insurer’s Association newsletter.

Coordinated the posting of new material and updates to department websites on behalf of the bureau.

Primary Functions

Prepare yearly budget request for the Administration Fund. Project, analyze and report on the Administration Fund expenditures (which include the bureau, the Office of Adjudication, the Workers’ Compensation Appeal Board, the Office of Chief Counsel, the Office of Information Technology and Labor & Industry bureaus that charge the fund for services).

Issue, collect and record assessments to replenish the Administration Fund, Supersedeas Fund, Subsequent Injury Fund, Self-Insurance Guaranty Fund and the Small Business Advocate Fund.

Process supply, equipment and furniture requests and procure items for bureau offices, the Office of Adjudication and the Workers’ Compensation Appeal Board.

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

Provide personnel advice and services to bureau employees and managers.

2013 Accomplishments

Budgeted, monitored and adjusted the Administration Fund as necessary.

Assisted the Claims Management Division in processing petition assignments within five days (mailroom and OCR).

Improved the processing of all paper documents into the electronic system to within five days.

Provided timely status information on collection of assessments and bureau conference deposits. The amounts assessed for the 2012-2013 fiscal year are as follows:

<table>
<thead>
<tr>
<th>Fund</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Administration Fund</td>
<td>$79,977,952</td>
</tr>
<tr>
<td>Supersedeas Fund</td>
<td>$21,961,056</td>
</tr>
<tr>
<td>Subsequent Injury Fund</td>
<td>$197,748</td>
</tr>
<tr>
<td>Self-Insurance Guaranty Fund</td>
<td>$57,812</td>
</tr>
<tr>
<td>Uninsured Employers Guaranty Fund</td>
<td>$2,848,924</td>
</tr>
</tbody>
</table>

Processed personnel actions within seven working days of request.
Bureau Divisions (cont.)

Provide continued educational efforts to alleviate processing deficiencies and improve our ability to communicate and support the rights and entitlements of all injured workers.

Coordinate the annual workers’ compensation conference.

Provide insurance information researched through the Pennsylvania Compensation Rating Bureau to the workers’ compensation community.

2013 Accomplishments

Processed 35,407 requests for records in 2013.

Responded to more than 61,000 workers’ compensation inquiries (compared to 50,000 in 2012): 58,639 (48,653) telephone calls and 2,771 (1,659) email questions from employers, employees, health care providers, lawyers and others involved in the Pennsylvania workers’ compensation system.

Assisted 366 non-English-speaking callers and visitors with workers’ compensation concerns using Language Services, a language interpretation service, down from 471 in 2012.

Researched and responded to 415 (538 in 2012) inquiries regarding the workers’ compensation insurance coverage of employers through the Pennsylvania Compensation Rating Bureau database.

Assisted 35 (39 in 2012) walk-in visitors with their workers’ compensation questions and issues.

Responded to more than 2,700 (1,700 in 2012) written workers’ compensation inquiries received from the workers’ compensation community.

Developed, planned and coordinated the June 2013 bureau conference. A total of 1,427 representatives from the workers’ compensation community attended the two-day event, including employers, insurers, health care providers and attorneys. This educational conference offered the popular “As the Claim Turns” role-play presentation, as well as sessions addressing the basics of workers’ compensation, the interplay between workers’ compensation and other programs, litigation issues, etc.

Researched workers’ compensation coverage status of employers who cancelled or failed to renew their insurance policy with the State Workers’ Insurance Fund to ensure compliance under the act. Information on employers found lacking coverage is forwarded to the bureau’s Compliance Section for further investigation and possible action.

Provided webinars, conference calls and one-on-one calls with the external community in preparation for, and implementation of, the Workers’ Compensation Automation and Integration System (WCAIS) as well as Electronic Data Interchange (EDI) Claims Release 3.

Created the EDI Section to support the additional functions of electronic claim submission.

Participated in development and extensive user acceptance testing of division’s WCAIS processes and applications.

Worked with the WCAIS Project Team on data cleansing efforts in anticipation of WCAIS implementation and continued that effort post its Sept. 9, 2013, implementation.

Processed 824 claims and distributed payments of more than $19.5 million from the Supersedeas Reimbursement Fund during the 2012-13 fiscal year.

Issued the sixth annual Claims Status Report to insurers and self-insured employers and received feedback on 66.9 percent of claims on the report. The feedback resulted in status verification or correction of claim records for (a) claims initiated in calendar years 2004 and 2009 and (b) no filing activity to the bureau for calendar year 2012. Last year’s annual report noted feedback from 99.2 percent of insurers and self-insured employers for the claims initiated in calendar years 2004 and 2008 with no filing activity to the bureau for calendar year 2011. Follow-up efforts on this year’s report were limited, as the division focused on WCAIS efforts, resulting in the comparative percentage reduction.

Monitored individual insurers’/self-insured employers’ 21-day compliance rates for 2013. The 21-Day Compliance Report, which was drawn from the period of April 1, 2013, through June 30, 2013, was published on our website for comparison.
Bureau Divisions (cont.)

purposes. Training was, and continues to be, offered to assist in raising compliance rates.

Continued to offer external training on form submission and processing to insurers and third party administrators.

Worked with the Centers for Workforce Information and Analysis to help implement their statistical and data support for various bureau responsibilities.

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.

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 accident and illness prevention service providers and recognized safety committee instructors.

Manage the process to nominate, select and recommend employers for the Governor’s Award for Safety Excellence.

Provide Pennsylvania employers with coordinated safety and health training resources through easy access and affordability. Services provided by the PATHS resource enable participants in the workers’ compensation system to achieve greater efficiencies in the implementation of their workers’ compensation cost-containment efforts by creating a safe, accident-free workplace.

2013 Accomplishments

Granted initial certification to a cumulative total of 10,429 workplace safety committees covering more than 1,387,728 employees as of December 2013. The cumulative number of approved workplace safety committee certification renewals totaled 62,337.

Received and processed a total of 581 workplace safety committee initial applications and 5,839 workplace safety committee renewal applications.

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

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

Primary Functions

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

Provide safety-related information and training to Pennsylvania employers aimed at reducing workplace injury/illness occurrences and workers’ compensation costs associated with workplace incidents through the Pennsylvania Training for Health & Safety (PATHS) resource.

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

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 continuance of licensure or self-insurance status.

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.

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.
Evaluated the acceptability of accident and illness prevention programs and services of 1,438 insurers and self-insured employers through annual required reports.

Conducted 293 on-site audits of licensed workers’ compensation insurer and self-insured employer accident and illness prevention programs and services and certified workplace safety committees.

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 and reviewing 56 award applications.

Updated and added additional resources and web documents to the PATHS resource. PATHS is a training resource consisting of on-site safety and health training and web-based safety training applications, including webinars, PowerPoint presentations, sample safety programs, safety talk materials, posters and more. The PATHS website includes a schedule of health and safety-related training and information available to all Pennsylvania stakeholders. Knowledgeable and experienced trainers are available to provide training and information sessions upon request to employers, employees and stakeholder groups.

Conducted a cumulative total of 2,969 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.

Division personnel conducted 117 safety training sessions on 26 different topics for more than 4,397 representatives of employers, insurers and self-insured employers.

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

Act as a resource for all involved parties.

2013 Accomplishments

Issued 16,550 fee review decisions and determinations.

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

Ensured timely and correct quarterly updates for insurers and self-insured employers.

Processed and approved 20 annual reports for utilization review organizations/peer review organizations (URO/PRO). A total of 20 URO/PROs are currently authorized.

Received, reviewed and approved nine URO/PRO reauthorization applications.

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

5,381 Utilization Review Requests were processed with 4,224 full determination reports rendered.

Primary Function

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

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.

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.

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

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

Act as a resource for all involved parties.

Health Care Services Review Division

Debra A. Novakovich

Bureau Divisions (cont.)
Bureau Divisions (cont.)

Maintained a list of 89 IRE physicians in 222 geographic locations who may be designated to perform impairment rating evaluations under the Sixth Edition of the AMA Guides to the Evaluation of Permanent Impairment. This list is also maintained on the department’s website and includes the physician’s specialty.

Received and processed 2,306 IRE requests for designation.

Received and reviewed the 2012 Medical Access Study. The study continues to indicate injured workers are overall satisfied/very satisfied with their medical treatment. It also indicates that injured workers with access to provider panel lists return to work two weeks sooner and continue to treat with the panel providers after the initial 90 days. Education of employers and injured workers is still needed. The study also continues to report PPO discounts and untimely payment as the health care providers’ frequently cited issues.

Fee Review section continues to provide information packets as requested to interested parties.

Post the September 2013 “go-live,” provided stakeholders with the ability to file online their Fee Reviews, Utilization Review Requests and IRE Requests for designation through the Workers’ Compensation Automation and Integration System (WCAIS), a web-based claims filing and information system.

Self-Insurance Division

George W. Knehr

Primary Function

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, 2013, there were 734 employers authorized to self-insure their liability.

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 rates, the maintenance of surplus and the distribution of dividends to members. As of Dec. 31, 2013, 18 group self-insurance funds were operating, covering 825 employers in the commonwealth.

Collect and tabulate information needed to issue assessments against insurers and self-insurers to maintain special funds established under the act.

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, 2013, there were 316 individual employers and one group fund in runoff status.

Administer the Self-Insurance Guaranty Fund and the use of financial security to remedy defaults of self-insurers. The guaranty fund and its special prefund account, which applies to claimants injured before 1993, provide benefits to approximately 284 claimants, with total reserves of $26 million. The division also monitors the payments, balances and administration of 21 default situations being satisfied by private securing entities, such as sureties, corporate trustees or guarantors, involving 292 claims and $30 million in liabilities.

2013 Accomplishments

Processed almost 700 renewal applications and 122 new applications for individual self-insurance status, 286 claims status reports of runoff self-insurers, 37 group annual reports and rate requests and 74 semi-annual reports monitoring the status of self-insurance defaults.

Calculated and issued five assessments to finance the operation of special funds under the act. Renewed contract (second of three years) for
Primary Functions

The Governor’s Office of General Counsel through the Department of Labor & Industry’s Office of Chief Counsel coordinates all legal services provided to the bureau. Attorneys representing the bureau and Office of Adjudication, through the Legal Division and its support staff, are responsible for providing legal advice to bureau and adjudication personnel and defending legal challenges to the implementation of the workers’ compensation system.

The division is responsible for advising, defending and monitoring the defense of claims filed against the Uninsured Employers Guaranty Fund (UEGF). Created in 2007, the UEGF provides workers’ compensation benefits to injured workers whose employers failed to insure or self-insure their workers’ compensation liability at the time of the injury. Last year, 255 claims for benefits were filed by workers who alleged injuries suffered in the course and scope of employment with uninsured employers.

The division guides the bureau in administering claims brought against other statutorily created funds and provides legal counsel in the defense of such claims. For example, division attorneys represent the commonwealth in claims against the Supersedeas, Subsequent Injury and Self-Insurance Guaranty Funds as well as claims brought under the Occupational Disease Act.

The division is responsible for preparing and coordinating criminal prosecutions of employers who fail to maintain workers’ compensation coverage for workers.

2013 Accomplishments

Seitzinger v. Commonwealth of Pa. (Pa Supreme Ct.): In a per curiam order, the Supreme Court affirmed the July 28, 2011, Decision of the Commonwealth Court in this matter. The Commonwealth Court had sustained the Department of Labor & Industry’s (department’s) preliminary objections and dismissed the plaintiff’s challenge to the constitutionality of Sections 442 and 449 of the Workers’ Compensation Act (act), 77 P.S. §§ 998 and 1000.5. Of particular significance, Section 442 places a cap on the percentage of fees claimants’ attorneys can receive when a workers’ compensation case settles.

Amwest Surety Insurance Co. (In Liquidation): The department secured Amwest’s Liquidator’s agreement to recognize the department’s claim in the amount of $250,000 against a bond issued to cover the workers’ compensation liabilities of Lukens Steel Corporation. Lukens previously defaulted on workers’ compensation payments, and Amwest was declared insolvent. The liquidator’s payment, approximately $137,500, will be used to pay the claims of Lukens’ injured former employees who are currently receiving payments from the department.

UEGF Recoveries: During 2013, the division represented the bureau’s UEGF in recovering monies owed by uninsured employers. As the result of such representation, the UEGF recovered $298,132.72 in criminal restitution and $795,619.57 from civil collection efforts, for a total of $1,093,752.29.

Criminal Prosecutions (Failure to Insure): During 2013, the division assisted in the following
Commonwealth v. Cassidy, Daniel B./RRDC, Inc. d/b/a The Pizza Company – On Dec. 17, 2013, the defendant pled guilty to 47 misdemeanor counts of failure to carry workers’ compensation insurance with a year of probation to be served for each count and was ordered to pay restitution in the amount of $55,611.70.

Commonwealth v. Cokley-Washington, Charlene/Allegheny Caregivers, Inc. – The defendant entered the ARD program and was ordered to pay restitution in the approximate amount of $8,300.

Commonwealth v. Cottage, Terry d/b/a Terry’s Lawn – Prior to trial on Dec. 12, 2013, the parties reached a no contest plea agreement to 20 misdemeanor counts of failure to carry workers’ compensation insurance. The defendant was ordered to pay restitution in the amount of $79,256.69.

Commonwealth v. Doncheski, Lee d/b/a David Distributing – The employer was admitted into the ARD program for a period of two years and was ordered to pay restitution to the UEGF in the amount of $20,579.64.

Commonwealth v. Gottwald, Adam d/b/a the Firehouse/Adam Ethan, Inc./Ethan Adam, Inc. – The defendant pled guilty to a single count of failure to carry workers’ compensation insurance, was sentenced to a year of probation, and was ordered to pay restitution in the amount of $4,540.98

Commonwealth v. Leroux, Paul – On Jan. 4, 2013, the defendant entered into an ARD program and was ordered to pay the associated court costs as well as restitution in the amount of $203,663.66.

Commonwealth v. Manza, James C./American Roller Skating & Sports Center – In August 2013, the parties agreed to resolve this criminal matter and the related civil matter for a lump sum payment of $16,000. Upon payment of $16,000, the commonwealth agreed to nolle pros the charges.

Commonwealth v. Martin, Dale L./Wright, Douglas P./Conrad Enterprises, Inc. – The defendants jointly paid restitution in the amount of $26,772.30. Upon the department’s receipt of $26,772.30, the Lebanon County Office of the District Attorney agreed to nolle pros the charges.

Commonwealth v. Petrakis, Michael/Solebury Home & Solebury Corp./Qwest International, Inc./Qwest International Holdings Corp. – The defendant entered the ARD program, was required to perform 24 hours of community service, and was ordered to pay restitution in the amount of $24,413.81.

Commonwealth v. Troiani, Joseph/Troiani Construction Services, Inc. – The defendant pled guilty to 25 misdemeanor counts of failure to carry workers’ compensation insurance, was sentenced to 10 years of probation, and was ordered to pay $240,059.51 in restitution. The defendant has appealed the sentence.

Commonwealth v. Whited, Nancy J. & Roger D. d/b/a Bruin Service Center/Bruin Service, Inc. – Defendant Roger Whited pled guilty to two misdemeanor counts of failure to carry workers’ compensation insurance and was ordered to pay restitution in the amount of $29,757.28.
Overview of the Office of Adjudication

Primary Function

The Workers’ Compensation Office of Adjudication (WCOA) is responsible for the resolution of disputed workers’ compensation matters. There are 84 workers’ compensation judges, four judge managers, five administrative officers and 22 field offices that comprise the Office of Adjudication. 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.

2013 Accomplishments

Kept the statewide average time to hear and decide workers’ compensation cases below seven months for the fifth consecutive year. At 6.5 months for a third year, it is down from 6.9 months in 2010.

Continued to expand the availability of alternative dispute resolution services to the parties by increasing the number of judges providing mediation services, increasing the number of judges trained in alternative dispute resolution and improving the delivery of the services through the hearing offices.

Continued to provide new and expanded opportunities for the judges to meet the training requirements of the act, including specially designed courses in ethics and mediation as well as through the 2013 Workers’ Compensation Judges’ Conference.

Continued to work with the judges and district safety committees to identify and address safety concerns. Implemented a security screening program to screen all individuals attending hearings and mediations in our 22 field offices and all remote hearing sites.

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

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

Continued to update and refine training materials for new judges to ensure that newly-hired judges received the most comprehensive training possible.

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

Continued to provide enhanced online services for Pennsylvania workers’ compensation system users. WCOA and BWC staff jointly developed new web forms for the submission of information and implemented the WCAIS system in partnership with the Workers’ Compensation Appeal Board.

Mission Statement

The Workers’ Compensation Office of Adjudication provides an efficient and effective dispute resolution system that is a model for other resolution systems, by promptly, impartially, and with integrity, adjudicating and mediating workers’ compensation disputes.

Through a continuous improvement process, WCOA is committed to provide quality services in a timely, cost effective manner by leveraging technology, instituting procedural changes and promoting quality results that advance and streamline the dispute resolution process.

Workers’ Compensation Judges are held to the highest of standards and issue reasoned decisions in a timely manner. As final finders of fact, they adhere to a strict code of professionalism and ethics.

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 five administrative officers.

Susan Caravaggio
David Cicola
Joseph Hagan
Karen Wertheimer
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 five 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 support to field offices that helps judges render timely decisions.

The Administrative Officers are:
- Saundra Parker – Southeastern District
- Gloria Gallagher – Eastern District
- Rhonda Joy – Central District
- Kenneth Kuklar – Western District
- Stevi Leech - Western District
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.

Alternative Dispute Resolution Services

The Office of Adjudication is pleased to offer mandatory mediation services, voluntary mediation services 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

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 2013, the Office of Adjudication conducted mediations in 9,436 cases, resulting in resolution of 4,219 claims.
See telephone directory on page 38 for names, telephone numbers and office locations of workers' compensation judges.
Office of Adjudication Statistical Review

Petitions Assigned to Judges (Not Remands)
Calendar Year 2008 through Calendar Year 2013

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<thead>
<tr>
<th>TYPE OF PETITION</th>
<th>2008</th>
<th>2009</th>
<th>2010</th>
<th>2011</th>
<th>2012</th>
<th>2013</th>
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<tr>
<td>Claim Petition</td>
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<td>9,060</td>
<td>8,936</td>
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<td>Fatal Basic OD Petition</td>
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<td>Fatal Claim Petition</td>
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<td>Interview Petition</td>
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<td>301</td>
<td>259</td>
<td>243</td>
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<td>Joinder Petition</td>
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<td>326</td>
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<td>OD 301(1) Petition</td>
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<td>Penalty Petition</td>
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<td>6,040</td>
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<td>Petition to Reinstatement Compensation Benefits</td>
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<td>Petition to Set Aside Final Receipt</td>
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Petitions and Remands Assigned vs. Judges’ Decisions
Fiscal Year 2003-04 Through Calendar Year 2013
Reportable Injuries* vs. Total Petitions and Remands vs. Total Claim Petitions**
Fiscal Year 2003-04 Through Calendar Year 2013

- **Reportable Injuries***: Missed more than one day, shift or turn of work due to injury.
- **Total Petitions and Remands**: Claim petitions include: claim, reinstatement, fatal, set aside final receipt, 301(i) and OD fatal.
- **Total Claim Petitions**: Estimated number. Final total of reportable injuries to be updated.

Source: Workers’ Compensation Office of Adjudication, Pennsylvania Department of Labor & Industry
**Office of Adjudication District Offices**

**Petitions Assigned by County**

2012 Calendar Year* vs. 2013 Calendar Year

*2012 numbers appear in (), followed by increase or decrease.

Source: Workers' Compensation Office of Adjudication, Pennsylvania Department of Labor & Industry
Overview of the Workers’ Compensation Appeal Board

Primary Functions

The Workers’ Compensation Appeal Board (WCAB) is granted statutory authority under the Workers’ Compensation Act to adjudicate all appeals from decisions rendered by the approximately 90 workers’ compensation judges (WCJ) throughout Pennsylvania.

Any aggrieved party may appeal the decision of a workers’ compensation judge by filing a Notice of Appeal with WCAB within 20 days of the issuance of the WCJ’s Decision & Order. WCAB reviews the WCJs’ decisions to assure that they are supported by substantial, competent evidence and are legally in accordance with the Workers’ Compensation Act.

In addition to adjudicating appeals of the orders of workers’ compensation judges, the Appeal Board retains original jurisdiction over the Appointment of Fiduciary Guardianships under Section 307 of the act, Commutation Petitions under Section 316, Trustees Payments under Section 317, Attorney Fee Petitions under Sections 442 and 501, total disability conversion determinations under instances of dual specific loss claims under Section 306, and Rehearing Petitions under Sections 425 and 426 of the act.

WCAB hears appellate arguments regularly, according to caseload, in Philadelphia, Pittsburgh, Harrisburg, Scranton, Johnstown and Erie.

WCAB commissioners possess statewide jurisdiction. The commissioners customarily sit in panels of two. Decisions and Orders of WCAB are required by statute to be concurred on by a majority of all commissioners.

2013 Accomplishments

In 2013 WCAB received 2,361 appeals and cross-appeals, filed in approximately 1630 cases. WCAB issued Opinions and Disposition Orders in 2,174 cases and also issued approximately 1,000 supersedeas determinations. WCAB was the first to “go-live” with the Release 1 phase of the new Workers’ Compensation Automation & Integration System (WCAIS) in September 2012, following over a year and a half of designing, testing and implementing the new system. Now in the Release 2 phase, WCAB, in concert with the Office of Adjudication and the Bureau of Workers’ Compensation, continues to work toward a faster and more efficient means of facilitating all facets of its work through automation in its ultimate goal of improving public service while maintaining the integrity of the legal system and the administrative appellate process.

Mission Statement

The mission of The Pennsylvania Workers’ Compensation Appeal Board is to provide every injured worker and aggrieved party the opportunity to seek redress from an adverse Decision & Order of a workers’ compensation judge by assuring that each decision issued was reasoned, supported by substantial, competent evidence and comported with applicable law.

WCAB shall continually strive to provide adequate opportunity for oral and written appellate argument; to issue objective, learned and responsive decisions in a timely manner; and to allocate sufficient resources to commissioners and staff to provide a positive, efficient and productive work environment in service to the public.

Commissioners

Currently there are eight commissioners:

Commissioner Alfonso Frioni, Jr., Esq., Chairman
Commissioner Sandra D. Crawford, Esq.
Commissioner Thomas P. Cummings, Jr., Esq.
Commissioner William I. Gabig, Esq.
Commissioner Robert A. Krebs, Esq.
Commissioner Susan M. McDermott, Esq.
Commissioner David A. Wilderman, Esq.
Commissioner James A. Zurick, Esq.
Mr. William L. Trusky, Jr., Secretary
Overview of the Workers’ Compensation Appeal Board

The Pennsylvania Workers’ Compensation Appeal Board

Front Row: Commissioner Sandra D. Crawford, Chairman Alfonso Frioni, Jr., Commissioner Susan M. McDermott
Workplace Safety

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. This safety initiative provides Pennsylvania employers and employees with the information and technical assistance needed to develop comprehensive safety practices in the workplace. It also recognizes 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 review committee for the determination of finalists. Recommendations are then forwarded to the secretary of Labor & Industry, who makes the final determination.

Awards are presented by representatives of the Department of Labor & Industry at the organization’s workplace. Winners receive a “Governor’s Award for Safety Excellence” plaque to memorialize the achievement.

For a copy of the award application, visit www.dli.state.pa.us; click on Workers’ Compensation,” and “Health & Safety Division,” then “Governor’s Award for Safety Excellence.”
Voith Turbo Inc.
York County

Voith Turbo Inc. had zero lost-time work injuries in 2012 and has gone 811 days, or more than 818,000 hours, without a lost time injury. They have also reduced their OSHA recordable rate from 2.31 in 2011 to 2.07 in 2012. The company has undertaken ergonomic considerations of tools and methods, has replaced irritant-containing cleaning solutions with ultrasonic, non-offensive solutions that resulted in less physical labor, and has constructed special carts for holding and transporting large work pieces.

AMBECH, Inc.
Allegheny County

ABMECH, Inc. is a Silver Contractor Award recipient of the 2011 Theodore H. Brodie Distinguished Safety Award. They are an active participant in the state-certified workplace safety initiative and have an extensive new employee training program. ABMECH also has a safety discipline program, a substance abuse program and daily worksite inspections and self-safety evaluations. Their mission statement is “To provide a workplace culture that is conducive to achieving maximum productivity in dangerous working environments by addressing potential safety deficiencies first and foremost.”

Dynamic Manufacturing
Armstrong County

As of Sept. 13, 2013, Dynamic Manufacturing had worked 1,058,773 hours since their last work-related accident. The company keeps a safety log in the production area that has resulted in a high level of associate awareness and participation. Monthly town talk meetings discuss safety issues that are addressed with all associates. Dynamic Manufacturing also has integrated safety policies and procedures with all employees to stress the philosophy that safety is everyone’s top priority.

Avery Dennison
Bucks County

Avery Dennison’s location in Quakertown has achieved 627 days without an injury. Its workplace safety committee’s dedication to safety is reflected by the company as a whole, whose motto is “Zero is achievable.” They have implemented an “Ideas for Action” program, allowing employees to make suggestions to improve processes and procedures. The company also regularly posts and distributes safety “single point lessons,” single laminated sheets explaining when a process or procedure is changed. Color-coded mats and walkways identify danger zones throughout the facility, and the company recently implemented a wellness program and a nurse’s station staffed by a certified nurse.
**2013 Governor’s Award for Safety Excellence Winners**

**AFS Energy Systems**  
**Cumberland County**

Advanced Fabrications Systems, Inc., or AFS, has been a SHARP organization, OSHA's Safety and Health Achievement Recognition Program, since 2009 and has been an innovator in safety programs, including an inspection process that has been advanced by SHARP. Inspections include monthly assessments on equipment as well as preventative maintenance policies. They participate in a regular “Safety by Walkthrough” program that has staff walking through the premises, including the site’s three buildings, campus and grounds, to find and rectify safety issues. The company also shares their safety program on the Internet to aid other organizations in achieving their safety goals.

**MI Metals, Inc.**  
**Dauphin County**

MI Metals achieved certification under the OSHA Safety and Health Achievement and Recognition Program (SHARP) in 2008 and continues to be a SHARP facility today. They were also awarded the Governor’s Award for Safety Excellence in 2008. MI Metals reduced their injuries from eight in 2004 to zero in 2012, and their workers’ compensation costs have dropped from over $12,000 in 2003 to $322 in 2012. The company maintains an Injury and Illness Prevention Program based on the American National Standards Institute Z-10 system.
MI Windows and Doors
Dauphin County

MI Windows and Doors, LLC has been certified under OSHA’s Safety and Health Achievement and Recognition Program (SHARP) for five years and is currently moving toward obtaining VPP status from OSHA. MI has instituted a stretching program for all employees, wherein all employees are given instruction in appropriate stretching exercises prior to starting work or when completing certain tasks. They require all contractors to be trained using MI’s Safety & Health Program, and “Safety Alerts” are sent out corporate-wide anytime a serious safety incident or near-miss occurs, so other facilities can be proactive in preventing these issues.

Equipower
Delaware County

Liberty Electric Power is one of 11 plants that make up the Equipower fleet. The plant achieved recognition as a Star site under the OSHA Voluntary Protection Program in May 2011 and continues to be a Star facility. The company makes use of a new employee training and shadowing program and requires contractor orientation with safety videos. They also use a user group email for dissemination of safety issue information as well as an anonymous “call box” for communicating in-house safety issues.

Lockheed Martin Missiles and Fire Control
Lackawanna County

Lockheed Martin Missiles and Fire Control is an OSHA VPP Star site, receiving its five-year certification in March 2013. The company operates a “Close Call” system, an intranet reporting system that allows for proactive and post-accident reporting. A Global Recall system oversees the regular calibration of all equipment in use, and their “Generating Ideas for Tomorrow,” or GIFT, program rewards employees for safety suggestions from suggestion boxes located throughout the facility.

Tobyhanna Army Depot
Monroe County

Tobyhanna Army Depot has been an OSHA VPP Star worksite since 2010. Its safety red card program allows employees to show a red card notifying a supervisor to stop and correct unsafe acts. In order to reduce fossil fuel vehicle emissions, the depot initiated an indoor electrical vehicle program. A “Fire Safety House,” a contained unit designed to train families about emergency response in the event of a fire or other emergency, can be transported through the community as well as the base itself.
More Information

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 learn about HandS, the health and safety online filing system, and the Pennsylvania Training for Health and Safety, or PATHS, free safety training and educational resource. 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. Health and Safety web pages provide instructions on how to use the HandS system and how to establish a user account.

Claims Information

WCAIS gives the external community access to their claims in the system. See www.wcais.pa.gov for registration information and more.

Log on to the EDI web page for information regarding Claims EDI Release 3 and access to the Implementation Guide, supporting documents and more: www.dli.state.pa.us, “Workers’ Compensation,” “WCAIS,” “Electronic Data Interchange.”

Forms Update

Paper copies of the forms listed below are no longer required to be sent to the bureau, as the Electronic Data Interchange (EDI) transaction satisfies the filing requirement. However, written notice to the employee has not changed due to EDI. Paper forms must be sent to the claimant for ALL transactions, as required by the Workers’ Compensation Act and Regulations, whether they are forms currently generated by insurer systems or LIBC forms downloaded from the department’s website.

1. LIBC-498.......... Commutation of Compensation
2. LIBC-392.......... A Final Statement of Account
3. LIBC-761.......... Benefit Offset
4. LIBC-762.......... Notice of Suspension for Failure to Return 760
5. LIBC-763.......... Reinstatement of WC

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.

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


Employer Information

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

Injured Worker Information

- Workers’ Compensation & the Injured Worker (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.
More Information (cont.)

Health and Safety Materials

- PA Training for Health and Safety (PATHS) Training Resources and Calendar
- 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)
- Governor’s Award for Safety Excellence application

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, email your name, the county in which you work or reside and your affiliation (claimant attorney, defense attorney, employer, government, health care industry, insurance industry, labor, third-party administrator or other) to RA-LI-BWC-Helpline@pa.gov and RA-LIBWC-NEWS@pa.gov, and ask to be added to our mailing lists.

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:

EMAIL
ra-li-bwc-helpline@pa.gov

PHONE
Claims Information Services:
- Inside PA toll-free 800-482-2383
- Local and 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 and outside PA 717-772-4991

MAIL
Bureau of Workers’ Compensation Information Services
1171 S. Cameron St., Room 324
Harrisburg, PA 17104-2501
## Workers’ Compensation Offices of Adjudication Directory

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<thead>
<tr>
<th>Location</th>
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<td>7248 Tilghman St., Suite 150</td>
<td>610-366-6060</td>
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<td>Allentown, PA 18106-9355</td>
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<td><strong>ALTOONA</strong></td>
<td>615 Howard Ave., Suite 202</td>
<td>814-946-7355</td>
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<td>Altoona, PA 16601-4813</td>
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<td><strong>BRISTOL</strong></td>
<td>1242 Veterans Highway</td>
<td>215-781-3274</td>
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<td>Bristol, PA 19007-2512</td>
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<td><strong>BROOKVILLE</strong></td>
<td>18 Western Ave., Suite F</td>
<td>814-849-5382</td>
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<td></td>
<td>Brookville, PA 15825-1540</td>
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<td><strong>CLEARFIELD</strong></td>
<td>241 E. Market St.</td>
<td>814-765-6398</td>
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<td>Clearfield, PA 16830-2424</td>
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<td><strong>DIRECTOR’S OFFICE</strong></td>
<td>East Gate Center</td>
<td>717-783-4151</td>
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<tr>
<td></td>
<td>1010 N. 7th St., Room 318</td>
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<td>Harrisburg, PA 17102-1400</td>
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<td><strong>ERIE</strong></td>
<td>3400 Lovell Place</td>
<td>814-871-4632</td>
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<td>13th &amp; Holland Streets</td>
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<td>Erie, PA 16503-2621</td>
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<td><strong>GREENSBURG</strong></td>
<td>144 N. Main St., Suite 1A</td>
<td>724-832-5310</td>
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<td>Greensburg, PA 15601-2404</td>
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<td><strong>HARRISBURG</strong></td>
<td>East Gate Center</td>
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<td>1010 N. 7th St., Room 319</td>
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<td>Harrisburg, PA 17102-1400</td>
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<td><strong>JOHNSTOWN</strong></td>
<td>607 Main St., Suite 100</td>
<td>814-533-2494</td>
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<td>Johnstown, PA 15901-2119</td>
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<tr>
<td><strong>LANCASTER</strong></td>
<td>315 W. James St., Suite 206</td>
<td>717-299-7591</td>
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<td></td>
<td>Lancaster, PA 17603-2979</td>
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<tr>
<td><strong>MALVERN</strong></td>
<td>72 Lancaster Ave., 2nd Floor</td>
<td>610-251-2878</td>
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<td></td>
<td>Malvern, PA 19355-2142</td>
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<td><strong>NEW CASTLE</strong></td>
<td>Cascade Galleria</td>
<td>724-656-3084</td>
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<td></td>
<td>100 S. Jefferson St., Suite 146</td>
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<td></td>
<td>New Castle, PA 16101-3900</td>
<td></td>
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<tr>
<td><strong>PHILADELPHIA</strong></td>
<td>110 N. 8th St., Suite 401</td>
<td>215-560-2488</td>
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<td></td>
<td>Philadelphia, PA 19107-2413</td>
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<tr>
<td><strong>PITTSBURGH</strong></td>
<td>411 7th Ave., Room 310</td>
<td>412-565-5277</td>
</tr>
<tr>
<td></td>
<td>Pittsburgh, PA 15219-1944</td>
<td></td>
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<tr>
<td><strong>POTTSTOWN</strong></td>
<td>112 S. Claude A. Lord Blvd.</td>
<td>570-621-3146</td>
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<td></td>
<td>Pottsville, PA 17901-3602</td>
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<tr>
<td><strong>READING</strong></td>
<td>Reading State Office Bldg.</td>
<td>610-621-2370</td>
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<td></td>
<td>625 Cherry St.</td>
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<td>Reading, PA 19602-1151</td>
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<td><strong>SCRANTON</strong></td>
<td>400 Spruce St., Suite 500</td>
<td>570-963-4580</td>
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<td>Scranton, PA 18503-1814</td>
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<tr>
<td><strong>UNIONTOWN</strong></td>
<td>108 N. Beeson Blvd., Suite 200</td>
<td>724-439-7420</td>
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<td></td>
<td>Uniontown, PA 15401-7401</td>
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<tr>
<td><strong>UPPER DARBY</strong></td>
<td>Barclay Square Center, 2nd Floor</td>
<td>610-284-6913</td>
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<tr>
<td></td>
<td>1500 Garrett Rd.</td>
<td></td>
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<tr>
<td></td>
<td>Upper Darby, PA 19082-4519</td>
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<tr>
<td><strong>WASHINGTON</strong></td>
<td>Millcraft Center, Suite 120 LL</td>
<td>724-223-4595</td>
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<td></td>
<td>90 W. Chestnut St.</td>
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<td></td>
<td>Washington, PA 15301-4528</td>
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<tr>
<td><strong>WILKES-BARRE</strong></td>
<td>101-105 N. Main St.</td>
<td>570-826-2577</td>
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<tr>
<td></td>
<td>2nd Floor Rear</td>
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<td></td>
<td>Wilkes-Barre, PA 18701-2097</td>
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<tr>
<td><strong>WILLIAMSPORT</strong></td>
<td>208 W. Third St., Rear</td>
<td>570-327-3735</td>
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Bureau of Workers’ Compensation Directory

Administrative Support Division ................................. 717-783-5421

Claims Management Division ................................. 717-772-0621
Email: ra-CMDClaimsOps@pa.gov (Claims Operations)
       ra-CMDEDI@pa.gov (EDI)
Records Section ......................................................... 717-787-3361

Information Services Helpline ................................. 717-783-5421
Email: ra-li-bwc-helpline@pa.gov
       Claims Information Services
       Inside PA toll-free .................................................. 800-482-2383
       Local and 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 and outside PA ............................................ 717-772-4991

Regulatory Adherence & Educational Outreach
Email: ra-cmdRegAd&EdOutrch@pa.gov
       (For Training, 21-Day Compliance and General Questions)
       SFR/Medical Payments ........................................ 717-787-3457

Director’s Office .......................................................... 717-783-5421
       Compliance Section ............................................. 717-783-3567
       Uninsured Employers Guaranty Fund (UEGF) ........ 717-886-9184

Health and Safety Division ................................. 717-772-1917
Email: ra-li-bwc-safety@pa.gov (General Questions)
       ra-li-bwc-paths@pa.gov (PATHS Questions)
       Audit/Report Processing ........................................ 717-772-1636
       Certification/Education ........................................ 717-772-1635

Health Care Services Review Division .......................... 717-787-3486
Email: ra-li-bwc-hcsrd@pa.gov
       Fee Review .......................................................... 717-772-1900
       Utilization Review ................................................ 717-772-1914

Legal Division ........................................................... 717-783-4467
Email: gc-li-cameronstoffice@pa.gov

Self-Insurance Division ............................................. 717-783-4476
### Bureau of Workers’ Compensation and Office of Adjudication
#### Contact Information

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| Laughman, Tammy | Harrisburg HQ | Manager, Calc. Rev. & Comp. Doc. – Claims                | 717-772-0618  |
| Lawton, Charles | Washington FO | Workers’ Compensation Judge                            | 724-223-4595  |
| Leech, Stevi    | Johnstown FO  | Administrative Officer, WCOA                           | 814-533-2494  |
| Longson, Lac    | Harrisburg HQ | Property & Casualty Insurance Actuary                   | 717-783-4476  |
| Lincicome, Francine | Philadelphia FO | Workers’ Compensation Judge                           | 215-560-2488  |
| Lorine, Carl    | Upper Darby FO | Workers’ Compensation Judge                            | 610-284-6913  |
| Lowman, William | Uniontown FO  | Workers’ Compensation Judge                            | 724-439-7420  |
| Lugo, Carmen    | Erie FO       | Workers’ Compensation Judge                            | 814-871-4632  |

| Mack, Gloria    | Harrisburg HQ | Supervisor, Petitions                                  | 717-787-3274  |
| Makin, Sarah    | Upper Darby FO| Workers’ Compensation Judge                            | 610-284-6913  |
| Marderness, Denise | Harrisburg HQ | Supervisor, OCR Staff – Admin.                        | 717-783-5421  |
| McCormick, Andrea | Philadelphia FO | Workers’ Compensation Judge                          | 215-560-2488  |
| McManus, Joseph | Bristol FO    | Workers’ Compensation Judge                            | 215-781-3274  |
| Melcher, Kelly  | Malvern FO    | Workers’ Compensation Judge                            | 610-251-2878  |
| Minckler, Pam   | Harrisburg HQ | Manager, Fee Review – HCSR                             | 717-772-1900  |
| Minnich, Steven | Johnstown FO  | Workers’ Compensation Judge                            | 814-533-2494  |
| Mulligan, Angela | Harrisburg HQ | Supervisor, Clerical Staff – Admin.                    | 717-783-5421  |

| Novakovich, Debra | Harrisburg HQ | Chief, Health Care Services Review                    | 717-772-1900  |
### Bureau of Workers’ Compensation and Office of Adjudication

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