



I, \_\_\_\_\_, acknowledge that I have received Community College of Philadelphia's Workers' Compensation Benefits Policy and Procedure and I understand the following:

- All work-related injuries must be reported to the Public Safety and to the Human Resources Department.
- Community College of Philadelphia will pay through PMA Insurance (the College's workers' compensation administrator) for reasonable hospital treatment, medicines, medical services and supplies, and orthopedic appliances and prostheses.
- If I sustain a work related injury I understand that I must seek medical treatment with a Panel Physician at least for the first 90 days of treatment.
- I must provide a note from the PMA network physician/medical facilities to substantiate any work-related injury absences.
- I will be paid my full salary or rate of pay by the College for the first week (5 days – Can be used intermittently). I will contact the benefits office when using Worker's Comp time off so that my Kronos timesheet can be updated.
- Workers' Compensation benefits will be initiated and paid by PMA if I am out of work for two or more weeks due to a substantiated work-related injury. This benefit will be effective and paid from the first day that I am out of work (see attachment).
- I agree that, if I am out of work for two or more weeks due to a work-related injury, I will sign over to Community College of Philadelphia the first-week check received from PMA Insurance because of the double payment. I will endorse the back of the check and interoffice or mail it to the Benefits Department.
- I understand that PMA Insurance workers' compensation benefits are based on a formula and percentage of pay which is approximately 66% up to the state maximum cap limit.
- If I am referred to physical therapy by my workers' compensation doctor I understand that I must schedule my appointments before or after work hours. PMA Insurance has an agreement with their network physical therapy centers to assure CCP employees get the early or late appointments. Otherwise, I may work out a schedule with my supervisor to make up time off for physical therapy visits.
- I understand that physical therapy appointments are not paid by the College and that I cannot use "Injured on Duty" to receive paid time for these appointments.

Agreed and signed by:

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Print

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Signature

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Date