Platte Canyon Water & Sanitation District **Designated Provider List Notification Letter** For An Injured Worker

To complete this letter, fill in the gray fields and print on your organization's letterhead. Then hand-deliver or mail the letter to your employee when you are notified of the injury.

To: Platte Canyon Water & Sanitation District Staff From: Scott Morse Date: 01/01/2015 Subject: Designated Provider List Notification Letter for an Injured Worker I am sorry to learn that you have been injured. To make sure you receive the care you need, we are filing a claim with our workers' compensation insurance carrier. Pinnacol Assurance. Pinnacol will contact you with your claim number and additional information. In the meantime, you should see one of the medical providers we have selected to treat our injured employees. These medical providers specialize in on-the-job injuries, and I want you to have the best possible care. 1. Name: SCL PHYSICIANS-SOUTHWEST (EXEMPLA) 2. Name: CCOM SOUTH DENVER Address: 13402 W COAL MINE AVENUE STE 110 Address: 20 WEST DRY CREEK CIRCLE #300STE 300 City, State & Zip: LITTLETON, CO 80127 City, State & Zip: LITTLETON, CO 80120 Phone: 303-403-6520 Phone: 303-269-2900 3. Name: CONCENTRA MEDICAL CENTERS-LITTLETON 4. Name: ON THE MEND OCCUPATIONAL MEDICINE Address: 20 WEST DRY CREEK CIRCLE #300STE 300 Address: 3900 S WADSWORTH BLVD STE 325 City, State & Zip: LITTLETON, CO 80120 City, State & Zip: LAKEWOOD, CO 80235 Phone: 303-798-1009 Phone: 303-634-2970 Please contact one of these medical providers to be seen as soon as possible. After your first appointment, please follow up with me so we can review your medical status and work capabilities. The respondent's representative is our workers' compensation insurance company, Pinnacol Assurance. Please see the contact information below. Pinnacol Assurance 7501 E. Lowry Blvd. Denver, CO 80230-7006 303.361.4000 or 800.873.7242 If you have questions, please contact me. My goal is to ensure that you get the care you need to recover quickly and return to work as soon as possible. Organization Name and Phone: Platte Canyon Water & Sanitation District - 303-979-2333 Address: 8739 W. Coal Mine Ave. City, State & Zip: Littleton, CO 80123 **Employer's Representative for Workers' Compensation:** Name: Scott Morse / Scott Hand Phone: 303-979-2333 ☐ Hand-delivered on: __ ☐ Mailed to injured worker on: _____ Employer's signature

Date

Employee's signature