

# MEDICAL CARE PLAN

All members insured through the Workers' Compensation Trust (Trust) must participate in a Medical Care Plan sponsored by the Trust and approved by the Workers' Compensation Commission.

## **What is a Medical Care Plan?**

A Medical Care Plan is a network of providers available to treat employees with work-related injuries or occupational illnesses. The Trust has contracted with over 700 medical providers statewide who are experienced in treating workers' compensation injuries and illnesses. The network, originally established in 1995, offers high quality and prompt medical treatment to those injured workers in need of medical care. Moreover, providers in the Trust medical care plan understand the importance and value of getting injured workers back to work as soon as possible.

## ***The Plan consists of the following specialties:***

Chiropractors	Orthopedists
First Treatment Centers	Pain Management
Physical Medicine & Rehabilitation	Physical Therapists
Neurologists	Surgeons, Hand
Neurosurgeons	

## **What impact does this have on the Trust member?**

Trust members have the responsibility to educate your employees that they must seek treatment from a provider within the Medical Care Plan or risk losing entitlement to workers' compensation benefits.

In addition, you need to choose a First Treatment Center from the Medical Care Plan for your employees to receive initial care. A list of participating First Treatment Centers is enclosed.

## **How does a new member enroll in the Trust's Medical Care Plan?**

Please complete the attached application forms and return to:

**Workers' Compensation Trust**  
**Attention: Nathan L. Shippee, Vice President, Sales & Marketing**  
**P.O. Box 5042**  
**Wallingford, Connecticut 06492**

If you have any specific questions concerning the Trust's Medical Care Plan, please contact: Brian S. Downs, Vice President, Quality & Provider Relations, at (203) 678-0103.

WCT/MCP  
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# MEDICAL CARE PLAN APPLICATION

Name of Employer: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

***If there are other locations, please complete section on page 2***

Employer Representative: \_\_\_\_\_

Nature of Business: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Total Number of Employees: \_\_\_\_\_

Are any employees covered by Collective Bargaining? Yes No If yes, how many? \_\_\_\_\_

**I verify that the Medical Care Plan developed by the Workers' Compensation Trust for our organization is consistent with any and all collective bargaining agreements that cover our unionized employees.**

\_\_\_\_\_  
Signature Name (please print)

\_\_\_\_\_  
Title Date

- Employer acknowledges a Modified Duty Program is available on a case-by-case basis.
- Employer has formal Modified Duty Program which is provided to all injured workers.

**We agree to participate and adhere to the Workers' Compensation Trust's Medical Care Plan.**

\_\_\_\_\_  
Signature Name (please print)

\_\_\_\_\_  
Title Date

***Please complete and return to:  
Managed Care Services***

**OTHER LOCATIONS  
AND  
FIRST TREATMENT CENTER SELECTIONS**

Name of Location	Address	# of Employees	First Treatment Center	Town of First Treatment Center

# VERIFICATION OF COMPLIANCE WITH SAFETY & HEALTH COMMITTEE REGULATIONS

According to State of Connecticut Workers' Compensation Regulation 31-40v, all employers must have a Safety & Health Committee for each and every location that has 25 or more employees. Your organization may need to have more than one Committee.

Please check the applicable box:

- Our organization **has less than 25 employees**. If you check this box, you do not need to complete this verification, just sign below.
- Our organization **has 25 or more employees all at one location**.
- Our organization **has 25 or more employees at multiple locations**.

I verify that \_\_\_\_\_ has a Safety Committee(s)  
Employer Name (please print)

which is / are in compliance with Section 31-40v1 to 31-V0v-11 of the Connecticut Administrative Regulations.

Meetings are held \_\_\_\_\_ times per year and last an average of \_\_\_\_\_ hours.

The date of the last Committee Meeting(s) was: \_\_\_\_\_.

**Please attach a copy of the minutes of the more recent meeting held.**

I further verify the following:

1. Minutes of the meeting are maintained for three (3) years and list the attendees.
2. A notice of the members who participate in the Safety Committee are posted.
3. Members are paid for time spent on Committee activities.
4. Safety Committee meetings include accident investigations safety inspections, safety training programs, hazard identification and/or workplace exposure programs, follow-up procedures for open safety items, a written agenda, and a record of all suggestions and recommendations.
5. Responsibilities are assigned to correct safety issues.
6. All Safety Committee members have been trained in their rights and responsibilities as committee members. Indicate how (verbal and/or written).

\_\_\_\_\_  
Employer Name (please print)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Name (please print)

# SAFETY & HEALTH COMMITTEE MEMBERSHIP

Safety & Health Committees must be composed of at least as many employee members as management members. Please provide the following information for members of your Safety & Health Committee. If you attach a roster, please identify the employee and the management member.

**Please Note: The Chairperson must be included in the count of either Employee or Management.**

EMPLOYEE MEMBERS			
NAME	TITLE	DEPARTMENT	WORK SITE
<b>TOTAL:</b>			

MANAGEMENT MEMBERS			
NAME	TITLE	DEPARTMENT	WORK SITE
<b>TOTAL:</b>			

SAFETY COMMITTEE CHAIRPERSON	
Name:	Date Elected:

\_\_\_\_\_  
Employer Name (please print)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Name (please print)

# Medical Care Plan 1ST Treatment Centers

<b>CITY</b>	<b>1ST TREATMENT CENTER</b>	<b>ADDRESS</b>	<b>PHONE</b>
<b>AVON</b>	HARTFORD MEDICAL GROUP	339 WEST MAIN STREET	(860) 696-2150
<b>BRANFORD</b>	STONY CREEK URGENT CARE CENTER	6 BUSINESS PARK DRIVE STE 302	(203) 483-4580
	YALE NEW HAVEN HOSPITAL WORKER HEALTH SOLUTIONS	84 NORTH MAIN STREET	(203) 789-5195
<b>BRIDGEPORT</b>	INDUSTRIAL MEDICAL CENTER	226 MILL HILL AVENUE	(203) 384-3613
	ST. VINCENT S IMMEDIATE HEALTH	4600 MAIN STREET	(203) 371-4445
<b>BRISTOL</b>	MED HELP MEDICAL CENTER	539 FARMINGTON AVENUE	(860) 584-8900
	MEDWORKS	975 FARMINGTON AVENUE	(860) 589-0114
<b>BROOKFIELD</b>	PHYSICIAN ONE URGENT CARE	31 OLD ROUTE 7	(203) 885-0808
<b>COLCHESTER</b>	COLCHESTER BACKUS HEALTH CENTER	163 BROADWAY	(860) 537-4601
	PHYSICIAN ONE URGENT CARE	179 LINWOOD AVENUE	(860) 603-2619
<b>DANBURY</b>	CORPORATE HEALTH CARE	79 SAND PIT ROAD, SUITE 302	(203) 749-5720
<b>DERBY</b>	PHYSICIAN ONE URGENT CARE	78 PERSHING DRIVE	(203) 516-5307
<b>EAST HARTFORD</b>	CONCENTRA MEDICAL CENTER	701 MAIN STREET	(860) 289-5561
<b>EAST HAVEN</b>	YALE NEW HAVEN HOSPITAL WORKER HEALTH SOLUTIONS	317 FOXON ROAD	(203) 466-5600
<b>EAST LYME</b>	CHARTER OAK MEDICAL CENTER	324 FLANDERS ROAD	(860) 739-6953
<b>ENFIELD</b>	JOHNSON OCCUPATIONAL MEDICINE CENTER	140 HAZARD AVENUE	(860) 763-7668
	NEW ENGLAND URGENT CARE	55 HAZARD AVENUE	(860) 745-9911
<b>ESSEX</b>	MIDDLESEX HOSPITAL SHORELINE MEDICAL CTR	192 WESTBROOK ROAD	(860) 358-3840
<b>FAIRFIELD</b>	ST. VINCENTS IMMEDIATE HEALTH	1055 POST ROAD	(203) 259-3440
<b>GLASTONBURY</b>	PHYSICIAN ONE URGENT CARE	2928 MAIN STREET	(860) 657-8289
<b>GREENWICH</b>	GREENWICH HOSPITAL OCCUPATIONAL HEALTH SRV	75 HOLLY HILL LANE	(203) 863-3494
<b>GROTON</b>	L&M OCCUPATIONAL HLT CTR AT PEQUOT HLT CTR	52 HAZELNUT HILL ROAD	(860) 446-8265
	PHYSICIAN ONE URGENT CARE	220 ROUTE 2	(860) 446-6137
<b>HAMDEN</b>	PHYSICIAN ONE URGENT CARE	2165 DIXWELL AVENUE	(203) 248-2727
	YALE NEW HAVEN HOSPITAL WORKER HEALTH SOLUTIONS	2080 WHITNEY AVENUE	(203) 789-6240
<b>HARTFORD</b>	ST. FRANCIS CTR FOR OCCUPATIONAL HEALTH	114 WOODLAND STREET	(860) 714-4270
<b>LEDYARD</b>	LEDYARD BACKUS HEALTH CENTER	743 COLONEL LEDYARD HIGHWAY	(860) 464-3104
<b>MANCHESTER</b>	HARTFORD MEDICAL GROUP	256 NORTH MAIN STREET	(860) 696-2300
<b>MIDDLETOWN</b>	MIDDLESEX HOSPITAL OCCUP MEDICAL DEPT	534 SAYBROOK ROAD	(860) 358-2750
<b>MONROE</b>	ST. VINCENTS IMMEDIATE HEALTH	401 MONROE TURNPIKE	(203) 268-2501

# Medical Care Plan 1ST Treatment Centers

<b>CITY</b>	<b>1ST TREATMENT CENTER</b>	<b>ADDRESS</b>	<b>PHONE</b>
<b>NAUGATUCK</b>	ST. MARYS MEDICAL WALK-IN	799 NEW HAVEN ROAD	(203) 723-5636
<b>NEW BRITAIN</b>	CONCENTRA MEDICAL CENTER	976 WEST MAIN STREET	(860) 827-0745.
<b>NEW HAVEN</b>	CONCENTRA MEDICAL CENTER	370 JAMES STREET	(203) 503-0482
	YALE NEW HAVEN HOSPITAL WORKER HEALTH SOLUTIONS	175 SHERMAN AVENUE	(203) 789-3721
<b>NEW MILFORD</b>	NEW MILFORD HOSPITAL	21 ELM STREET	(860) 355-2611
<b>NEWINGTON</b>	MEDWORKS LLC	375 EAST CEDAR STREET	(860) 667-4418
<b>NEWTOWN</b>	PHYSICIAN ONE URGENT CARE	266 SOUTH MAIN STREET	(203) 270-9000
<b>NORWALK</b>	OCCUPATIONAL HEALTH OF NORWALK HOSPITAL	520 WEST AVENUE	(203) 852-2417
	OCCUPATIONAL HEALTH @ PMCC	346 MAIN AVENUE	(203) 846-8440
	PHYSICIAN ONE URGENT CARE	346 MAIN AVENUE	(203) 846-0005
<b>NORWICH</b>	CONCENTRA MEDICAL CENTER	10 CONNECTICUT AVENUE	(860) 859-5100
	PHYSICIAN ONE URGENT CARE	607 WEST MAIN STREET	(860) 892-9000
<b>ORANGE</b>	STONY CREEK URGENT CARE CENTER	236 BOSTON POST ROAD	(203) 815-1054
<b>PLAINVILLE</b>	THE HOSPITAL OF CENTRAL CT OCCUPATIONAL HEALTH	440 NEW BRITAIN AVENUE	(860) 747-9441
<b>PUTNAM</b>	DAY KIMBALL HOSPITAL	320 POMFRET STREET	(860) 928-6541
<b>RIDGEFIELD</b>	PHYSICIAN ONE URGENT CARE	10 SOUTH STREET, SUITE 101	(203) 431-4600
<b>SHELTON</b>	GRIFFIN HOSPITAL OCCUPATIONAL MEDICINE CENTER SHELTON	100 COMMERCE DRIVE	(203) 944-3718
	HUNTINGTON MEDICAL PRACTICE	887 BRIDGEPORT AVENUE	(203) 225-6020
	ST. VINCENTS IMMEDIATE HEALTH	2 TRAP FALLS ROAD, STE 105	(203) 929-1109
<b>SIMSBURY</b>	NEW ENGLAND URGENT CARE	30 DORSETT CROSSING	(860) 714-9020
<b>SOUTH WINDSOR</b>	CORPCARE OCCUPATIONAL HEALTH CENTER	2800 TAMARACK AVENUE, SUITE 001	(860) 647-4796
	HARTFORD MEDICAL GROUP	1559 SULLIVAN AVENUE	(860) 696-2350
<b>SOUTHBURY</b>	PHYSICIAN ONE URGENT CARE	900 MAIN STREET, BDLG 2, STE 100	(203) 262-1911
<b>STAMFORD</b>	CONCENTRA MEDICAL CENTER	15 COMMERCE ROAD	(203) 324-9100
<b>STRATFORD</b>	CONCENTRA MEDICAL CENTER	60 WATSON BOULEVARD	(203) 380-5945
	ST. VINCENT S IMMEDIATE HEALTH	3272 MAIN STREET	(203) 380-3920
<b>TOLLAND</b>	MED EAST MEDICAL WALK IN CENTER	200 MERROW ROAD	(860) 871-5452
<b>TORRINGTON</b>	CONCENTRA MEDICAL CENTER	333 KENNEDY DRIVE	(860) 482-4552
	ST. FRANCIS CTR FOR OCCUPATIONAL HEALTH	1598 EAST MAIN STREET	(860) 482-3467
<b>UNCASVILLE</b>	MONTVILLE BACKUS HEALTH CENTER	80 NORWICH-NEW LONDON TURNPIKE	(860) 848-1297
<b>WALLINGFORD</b>	CONCENTRA MEDICAL CENTER	900 NORTHRUP ROAD	(203) 949-1534

# Medical Care Plan 1ST Treatment Centers

<b>CITY</b>	<b>1ST TREATMENT CENTER</b>	<b>ADDRESS</b>	<b>PHONE</b>
<b>WATERBURY</b>	CONCENTRA MEDICAL CENTER	8 SOUTH COMMONS ROAD	(203) 759-1229
	ST. MARYS OCCUPATIONAL HEALTH CENTER	312 WEST MAIN STREET	(203) 709-3740
<b>WEST HARTFORD</b>	HARTFORD MEDICAL GROUP (BISHOP S CORNER)	336 NORTH MAIN STREET	(860) 232-4891
	HARTFORD MEDICAL GROUP (SOUTH MAIN)	445 SOUTH MAIN SREET	(860) 696-2200
	NEW ENGLAND URGENT CARE	21 NORTH MAIN STREET	(860) 236-3911
<b>WETHERSFIELD</b>	HARTFORD MEDICAL GROUP	1025 SILAS DEANE HIGHWAY	(860) 696-2400
<b>WILLIMANTIC</b>	MED EAST MEDICAL WALK IN CENTER	1703 WEST MAIN STREET	(860) 456-1252
<b>WINDSOR</b>	CONCENTRA MEDICAL CENTER	1080 DAY HILL ROAD	(860) 298-8442
	HARTFORD MEDICAL GROUP	1060 DAY HILL ROAD	(860) 688-8383
	ST. FRANCIS CTR FOR OCCUPATIONAL HEALTH	100 DEERFIELD ROAD	(860) 714-9444