

## **EMPLOYEE:**

Share this document with all medical personnel whom you utilize for Workers Compensation treatment. Inform the attending physician that you are seeking Workers' Compensation benefits. You should not pay any medical or pharmacy providers directly for treatment of your work-related injury or illness.

**\*\* Employee is not to pay any out-of-pocket expenses \*\***

Please be advised that since July 1, 1991, Red Hook Central School District became self-insured for Workers Compensation. All bills for medical services concerning your incident must be submitted by the provider directly to the address provided below and will be paid in accordance with the applicable Workers Compensation Fee Schedule. Include the name of the Red Hook Central School employee on the bill /claim.

### **PROVIDERS SUBMIT BILLS/CLAIMS TO:**

#### **WRIGHT RISK MANAGEMENT COMPANY, INC.**

900 Stewart Avenue, Suite 600  
Garden City, New York 11530

***POLICY NUMBER: W861579***

Telephone #: (516) 227-2300  
Facsimile #: (516) 794-5254

#### **Contacts for Inquiries, Questions, Problems:**

Medical Claims: Susan Wilson – (516) 750-9383  
Claims Examiner: Stacy Barry – (516) 750-2418  
Claims Manager: Sean Slaven – (516) 750-9404