

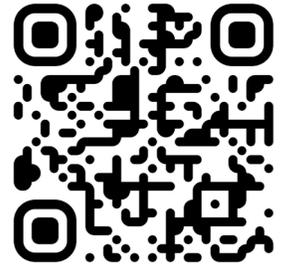


FOR YOUTH DEVELOPMENT®  
FOR HEALTHY LIVING  
FOR SOCIAL RESPONSIBILITY

## Staff Injury/Illness Reporting Process Injured Staff Member -Greater Cleveland

You received this package because you reported to your supervisor an injury or illness directly related to, caused by, contributed to, or significantly aggravated by events or exposures connected to the day-to-day activities of your employment in the workplace.

Any injury experienced during work must be immediately reported to your supervisor and risk management using the QR Code or the Risk Management Portal at [risk.ymcamsso.org](http://risk.ymcamsso.org).



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### For Life-Threatening Emergency Injuries:

1. The YMCA will call EMS and follow all established emergency procedures.
2. The YMCA will contact your emergency contact, and a supervisor or leadership may accompany you to the Emergency Room.
3. Follow steps 3 & 4, outlined below, as soon as you are able.

### For Non-Emergency Injuries:

1. Select a medical provider listed below.
2. Provide the medical facility staff with all detailed information regarding your injury.
  - a. A post-accident drug test may be required for all staff accidents.
3. As soon as possible submit a copy of all **documentation** received from the medical facility staff via email to **Jesse Drucker**, [jdrucker@clevelandymca.org](mailto:jdrucker@clevelandymca.org) and [hrdept@clevelandymca.org](mailto:hrdept@clevelandymca.org) and complete Staff Injury/Severe Illness Report via the Risk Portal ([risk.ymcamsso.org/new/](http://risk.ymcamsso.org/new/))
  - a. Enter the Subject as: Staff Injury - (Your Name) - (Date of Injury)
  - b. Choose: Risk – Greater Cleveland as the Category
  - c. Choose: Staff Injury/Severe Illness Report as the Ticket Option
  - d. Choose: Injured Staff Member as the Reporting Person
  - e. Continue filling in the form with information. Remember to be as detailed and factual as possible.
4. Obtain approval from your supervisor before returning to work.
5. Give a copy of all paperwork from the provider to your supervisor after every follow-up appointment.

### Additional Information:

1. Expect to be contacted within 48 hours by:
  - a. Human Resources Department
  - b. Your Workers' Compensation claims representative from **Sedgwick Managed Care Ohio**. Save your claim number and your claim representative's contact information.
  - c. Your claim representative will be able to assist you with questions regarding your claim, follow-up appointments, etc.
2. You must attend all follow-up appointments with an approved Worker's Compensation medical provider.
  - a. Follow-up appointments should be scheduled before or after work.
  - b. Failure to attend your medical appointments may result in a loss of benefits



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## YMCA OF GREATER CLEVELAND DESIGNATED PROVIDER LIST FOR INJURED WORKERS

**From:** YMCA of Greater Cleveland

**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, **Sedgwick Managed Care Ohio**. They will contact you with your claim number and additional information very soon. 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.

### Concentra Medical Centers

4660 Hinckley Industrial Pkwy  
Cleveland, OH 44109  
216-749-2730

5500 S Marginal Rd  
Cleveland, OH 44103  
216-426-9020

7730 First Pl, Ste D  
Oakwood Village, OH 44146  
440-735-0438

3900 Ben Hur Ave  
Willoughby, OH 44094  
440-975-4185

### Hometown Urgent Cares

22595 Lakeshore Blvd  
Euclid, OH 44123  
216-416-0214

12813 Rockside Rd.  
Garfield Hts OH 44125  
216-810-6100

205 W. Bagley Rd  
Berea, Ohio 44017  
440-398-8018

7715 West Ridgewood Dr.  
Parma, OH 44129  
440-809-8132

Lakewood Urgent Care  
11716 Detroit Rd  
Lakewood, OH 44107  
216-712-7818

2251 Tower Blvd  
Lorain, OH 44053  
440-787-2022

### STC Locations

6993 Pearl Rd  
Middleburg Heights, OH 44130  
880-204-1729

4503 Brookpark Rd  
Parma, OH 44134  
216-398-0349

1163 East 40th St, Ste 103  
Cleveland, OH 44114  
216-398-0349

1701 Mentor Ave St. 11  
Painesville, OH 44077  
216-98-0349

### Cleveland Clinics

Work  
5595 Transportation Blvd  
Garfield Heights, OH 44125  
216-587-5431

Brooklyn Express Care  
7580 North Cliff Ave.  
Brooklyn, OH 44144  
440-886-1800

Rocky River Urgent Care  
19895 Detroit Rd  
Rocky River, OH 44116  
440-356-5500

### Mercy Health Occupational Health Services

1957 Cooper Foster Park Rd  
Lorain, OH 44053  
440-233-1068

39263 Center Ridge Rd.  
N. Ridgeville OH 44039  
440-366-5577

**Health Express Urgent Care**

1400 W. Pleasant Valley Rd  
Parma, OH 44134  
440-882-6595

20300 Chagrin Blvd  
Shaker Hts., OH  
216-400-6212

34160 Center Ridge Rd  
N. Ridgeville OH 44039  
440-363-6788

3762 Pearl Rd.  
Cleveland, OH 44109  
216-777-2155

445 Avon Belden Rd. Unit B4  
Avon Lake, OH 44012  
440-368-2272

6092 Mayfield Rd.  
Mayfield Hts., OH 44124  
440-462-4677

**UH Occupation Health Locations**

Streetsboro  
9318 St Rt 14  
Streetsboro, OH 44241  
330-297-2385

Beachwood  
3619 Park East Dr.  
Beachwood OH 44122  
216-464-6211

Parma  
6115 Powers Blvd. Medical Arts Bld. 2  
Parma, OH 44129  
440-743-4940

Mentor  
8655 Market St.  
Mentor, OH 44060  
440-255-6400

**Lake Hospital Occ Health, Chardon**

510 Fifth Ave  
Chardon, OH 44024  
440-286-8908

**NEOMED-Summa Center for Corporate Health**

4211 State Route 44 Ste 120  
Rootstown OH 44272  
330-325-7237

**St Vincent Charity Occupational Medicine**

2475 E 22nd St  
Cleveland, OH 44115  
216-363-2691

**UH Madison Health Center**

6270 N Ridge Rd  
Madison, OH 44059  
440-428-6800

**UH Occupational Med**

39000 Center Ridge Rd  
N Ridgeville, OH 44039  
440-329-7492

# Steps to take when a workplace injury occurs

Call 911 immediately in case of serious or life-threatening emergencies

## If an incident or injury occurs, we are here to help. Just follow these steps.

An injured employee, their employer or medical provider may report a work-related injury. Your company has chosen Sedgwick Managed Care Ohio to help you through this process.

### Employee instructions

1. Immediately notify your supervisor.
2. Complete the first section of the BWC First Report of Injury (FROI) form as completely as possible.
3. Seek appropriate medical treatment if needed, and provide the attached ID card at all medical appointments.
4. Keep your supervisor informed of your medical status and return all completed claim documentation to your employer promptly.

### Employer instructions

1. Assist in the completion of an injury/incident report, and/or the Employer Info section of the enclosed FROI.
2. If medical treatment is involved, ensure the incident is reported to Sedgwick MCO using one of the methods described under "Reporting a work-related injury to Sedgwick MCO:"

## Reporting a work-related injury to Sedgwick MCO

-  **Online:**  
Submit an injury form (FROI) online at [sedgwickmco.com](https://sedgwickmco.com).
-  **Phone:**  
Contact our customer service team at 888.627.7586 (available 24/7).
-  **Email:**  
Send *encrypted* injury/incident reports as soon as possible to: [injury.incident@sedgwickmco.com](mailto:injury.incident@sedgwickmco.com).
-  **Fax:**  
Send injury forms to 888.711.9284.

Early documentation and reporting of injuries promotes the best results for everyone.

Detach ID card below and present at all medical appointments

### Workers' compensation identification card

 24-hour customer service: 888.627.7586

 Employer name: **YMCA of Greater Cleveland**  
Policy number: **8727**

## Key contacts and additional information

### Medical treatment questions, medical documentation and billing issues

Contact [Sedgwick Managed Care Ohio](#):

Phone: 888.627.7586

Fax: 888.627.0074

Mail: P.O. Box 1040, Dublin, OH 43017

### Prescription questions

Call 800.644.6292 and follow the prompts.

### Ohio Bureau of Workers' Compensation (BWC)

Call 800.644.6292 or visit [bwc.ohio.gov](http://bwc.ohio.gov).

### Medical options and provider search

If medical treatment is required, see a BWC-certified medical provider. For more information, see the Sedgwick MCO website at [sedgwickmco.com](http://sedgwickmco.com).

## Transitional work benefits everyone

A safe and timely return to work is important! Together, we will explore opportunities for modified duty/transitional work that can accommodate any physical limitations in order to speed your recovery, ease your transition back to work and minimize any hardship as a result of a workplace injury. Employee safety and recovery are the highest priorities. It's essential – and required – to keep Sedgwick MCO and your employer updated on your recovery status and work restrictions at all times.

Please provide MEDCO-14 form with any physical restrictions, as employer may have modified duty available.

Please send all information within 24 hours of visit.

Injury report and FROI fax:	888.711.9284
Medical and authorization fax:	888.627.0074
Customer service:	888.627.7586
Prescription questions:	800.644.6292 (follow prompts)

Send all mail and medical bills to:

Sedgwick Managed Care Ohio  
PO Box 1040  
Dublin, OH 43017

*This card is not a  
guarantee of coverage.*

## Responsibilities

### Sedgwick MCO

- Initiate new claims with the BWC, collect and submit required information
- Return to work and medical case management
- Review and approval of medical treatment
- Medical bill payment
- Medical management of workers' compensation claims
- All associated managed care organization responsibilities

### BWC

- Claim allowance and compensability determination
- Claim number assignment
- Compensation award payment(s)
- Coordination of Industrial Commission hearings

### Medical providers

- Treating physicians must be BWC certified
- Promptly submit all medical documentation to Sedgwick MCO
- Clearly indicate work readiness and periods of disability utilizing the MEDCO-14 form

## Important BWC forms

### First report of injury (FROI)

Initiates workers' compensation claim; complete and send to Sedgwick MCO

### MEDCO-14

Physician's statement of workability, recovery status; send to Sedgwick MCO

### C-9

Physician's request for treatment approval; addressed by Sedgwick MCO