



REMEMBER: IT IS IMPORTANT TO TELL YOUR EMPLOYER

The name, address and telephone number of your employer's workers' compensation insurance company, third-party administrator (TPA), or person handling workers' compensation claims for your company, are shown below.

Employer Name: Tuscarora Intermediate Unit 11 **Date Posted:** 7/1/2018

IF INSURED:
(Complete all applicable spaces)

IF SOMEONE OTHER THAN INSURER IS HANDLING CLAIMS:
(Complete all applicable spaces)

Name of Insurance Company:
UPMC Work Alliance

Name of TPA (Claims administrator):
UPMC Benefits Management Services, Inc.

Address: 600 Grant Street US Steel, 8th Floor
Pittsburgh, PA 15219

Address: P.O. Box 2971, Pittsburgh, PA 15230

Telephone Number: (866) 397-8762

Telephone Number: 1-800-633-1197

Insurer Code: 2417

IF SELF-INSURED:
(Complete all applicable spaces)

IF SOMEONE OTHER THAN SELF-INSURER IS HANDLING CLAIMS:
(Complete all applicable spaces)

Name of person handling claims at the self-insured: _____

Name of TPA (Claims administrator):

Address: _____

Address: _____

Telephone Number: _____

Telephone Number: _____

Insurer Code: _____

Any individual filing misleading or incomplete information knowingly and with the intent to defraud is in violation of Section 1102 of the Pennsylvania Workers' Compensation Act, 77 P.S. §1039.2, and may also be subject to criminal and civil penalties under 18 Pa. C.S.A. §4117 (relating to insurance fraud).

Employer Information Services
717.772.3702

Claims Information Services
toll-free inside PA: 800.482.2383
local & outside PA: 717.772.4447

Hearing Impaired
toll-free inside PA TTY: 800.362.4228
local & outside PA TTY: 717.772.4991

Email
ra-li-bwc-helpline@pa.gov

*Auxiliary aids and services are available upon request to individuals with disabilities
Equal Opportunity Employer/Program*

