



pennsylvania

DEPARTMENT OF LABOR & INDUSTRY

BUREAU OF WORKERS' COMPENSATION

**REMEMBER: IT IS
IMPORTANT TO TELL
YOUR EMPLOYER ABOUT
YOUR INJURY**

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:

SOUTHERN TRANSCRIPTION SERVICES INC

Date Posted: 08/16/16

IF INSURED:

(Complete all applicable spaces)

IF SOMEONE OTHER THAN INSURER IS HANDLING CLAIMS:

(Complete all applicable spaces)

Name of Insurance Company:

SEE ATTACHED ENDORSEMENT

Name of TPA (Claims administrator):

Address:

3600 WISEMAN BLVD.

Address:

ONE PARK PLACE, 300 S. STATE ST.,
7TH FLOOR
SYRACUSE, NY
13202

SAN ANTONIO

TX

78251

Telephone Number: (877) 287-1312

Telephone Number: 877-383-7022

Insurer Code:

2358

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 intent to defraud is in violation of Section 1102 of the Pennsylvania Workers' Compensation Act, 77 P.S. §1039.2, and may be subject to criminal and civil penalties under 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*

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