

NOTICE OF PERSONAL CHIROPRACTOR OR PERSONAL ACUPUNCTURIST

If your employer or your employer's insurer does not have a Medical Provider Network, you may be able to change your treating physician to your personal chiropractor or acupuncturist following a work-related injury or illness. In order to be eligible to make this change, you must give your employer the name and business address of a personal chiropractor or acupuncturist in writing **prior** to the injury or illness. Your claims administrator generally has the right to select your treating physician within the first 30 days after your employer knows of your injury or illness. After your claims administrator has initiated your treatment with another doctor during this period, you may then, upon request, have your treatment transferred to your personal chiropractor or acupuncturist.

You may use this form to notify your employer of your personal chiropractor or acupuncturist.

Please Print

Your Chiropractor's or Acupuncturist's Information:

Name of Chiropractor or Acupuncturist

Address - street, city, state, zip code

Telephone number

Employee Information:

Name

Address

**Employee's
Signature** _____

Date: _____

Return form to: CSU Long Beach, Safety, Risk Management & Information Security, 1250 Bellflower, FM/SRM-104, Mail Stop 5702, Long Beach, CA 90840-5702.