



**EMPLOYEE ACKNOWLEDGEMENT  
of PSWCA Direct Contracting Program  
Participation for Workers Compensation**

I have received information that informs me of Grayson County's relationship with the P.S.W.C.A. (*the Alliance*) and how to get health care if I suffer a work related injury/illness.

If I am injured on the job, I understand the following:

1. I must choose a treating doctor from the list of doctors provided by my employer or obtain the list myself which is located at <http://www.pswca.org/>
2. I must go to my treating doctor for all health care for my injury. If I need a specialist, my treating doctor will refer me. If I need emergency care, I may go anywhere.
3. JI Specialty Services on behalf of the Texas Association of Counties Risk Management Pool will pay the treating doctor and other referral providers.
4. I may be required to pay for health care received from a provider if that provider is not on the approved list.
5. Making a false or fraudulent workers' compensation claim is a crime that may result in fines and or imprisonment.
6. Additional information regarding the PSWCA is available on my pool's website at [www.county.org](http://www.county.org)

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

Best Phone Contact: \_\_\_\_\_

Employee Address:

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
City State Zip Code

Please indicate whether this is the:  Initial Employee Notification  Injury Notification  
(Date of Injury: \_\_/\_\_/\_\_)

**Important Contact Information**

- Alliance website is [www.pswca.org](http://www.pswca.org)
- Alliance phone number is 1-866-99-PSWCA (1-866-997-7922)
- For assistance locating a healthcare provider call: 800.752.6301

**ATTENTION EMPLOYEE:  
PLEASE RETURN THIS FORM TO  
THE OFFICE OF HUMAN RESOURCES  
AT GRAYSON COUNTY TEXAS**

**Claims Administrator, JI Specialty Services, Inc.**

P.O. Box 160120 • Austin, TX 78716 • 800-752-6301 • 512-427-2497 • FAX 512-346-9321