



Altitude Energy, LLC

New Employee Designated Provider Notification Letter

To: All Employees

Date: 03/01/2021

Subject: Designated Medical Providers for Work-Related Injuries and Illnesses

All employees must obtain treatment of work-related injuries and illnesses from one of the following medical providers:

1. Name: Phillip Abston/ General Practice
Address: 1122 50th Ave
City, State & Zip: Greeley, CO 80634
Phone: 970 396-6994

2. Name: Susan Beck, MD / Urgent Care Clinic
Address: 2001 70th Ave Ste 110
City, State & Zip: Greeley, CO 80634
Phone: 970-810-4155

3. Name: Advanced Urgent Care
Address: 112 S Denver Ave
City, State & Zip: Fort Lupton, CO 80621
Phone: 303 558-0501

4. Name: Nextcare Urgent Care
Address: 1011 39th Avenue Suite A
City, State & Zip: Greeley, CO 80634
Phone: 970-351-8181

In the event of a life- or limb-threatening emergency, the injured employee will be sent to the nearest emergency medical facility. One of the medical providers designated above must provide all follow-up care.

If an unauthorized medical provider treats an employee, the employee will be responsible for payment for said treatment.

I have read and am fully aware of the organization's policy regarding medical treatment for work-related injuries and illnesses. I further understand that I must immediately report any work-related injury to my supervisor.

All employees must sign below, acknowledging this policy.

Employee Name: _____

Employee Signature: _____

Date: _____