

On-the-Job Injury Leave Information

Workers' Compensation (**WC**): What you should know (taken from a presentation by Risk Management)

Background

- **What is Workers' Comp?** "Workers' compensation is a type of insurance coverage that employers must provide for their employees. For employees who are injured on the job or develop occupational diseases, this insurance pays for medical expenses and partial wage replacement during periods of temporary disability. It may also provide permanent impairment benefits for those who qualify. There is no payment for pain and suffering under workers' compensation."
- **Who is the WC Insurance Carrier for the University of Colorado?** The University is self-insured for workers' compensation. University Risk Management (**URM**) administers the insurance program and also handles the claims administration for workers' compensation.
- **What happens after a claim for WC is submitted?** Upon receipt of the Incident Report, URM will assign the claim to an adjuster, who will then investigate the incident and begin the process of determining compensability and managing the claim from its inception to its conclusion. Any questions regarding a specific claim should be directed to the assigned adjuster.

Procedures

- In the event of an emergency, call 911 or go to the nearest hospital. You do not need to contact URM for authorization to call an ambulance or go to the nearest emergency room.
 - Within 4 days of the injury, inform your supervisor of your injury and complete the Employee's Injury Report (EIR) form. This form can be completed on-line at the following website and submitted electronically
https://urm.cusys.edu/docs/forms/incident_report_form.asp
Or, print the form, complete as indicated and fax to University Risk Management at 303-860-5680.
 - If further treatment is required, you must then go to one of the designated medical providers.
- In the event of a non-emergency injury, the injured employee may go directly to a designated medical provider (**DMP**) after submitting the Injury Report form. Further authorization from URM is not required before going to the clinic or scheduling an appointment.
- For non-emergency care, you must go to a designated medical provider. If you need to be seen immediately, you can simply walk-in. Otherwise, schedule an appointment. You may choose to go to either of the designated medical providers listed below:
 - Arbor Occupational Medicine
4790 Table Mesa Drive, Suite 200
Boulder, CO
Phone: (303) 443-0496OR
 - Workwell Occupational Medicine
Burlington Medical Center
205 S. Main St., Suite C
Longmont, CO
Phone: (303) 702-1612

- After the exam, the DMP will give the patient a Work Status Report (**WSR**). This report outlines work restrictions that may be assigned due to the injury.
- The WSR should be shared with the supervisor as soon as possible so s/he can determine if the restrictions can be accommodated. This should be done after each exam.
- If the supervisor is unable to accommodate the work restrictions, or the employee has been taken off work by the DMP, the supervisor, payroll liaison or the department administrator should begin recording time lost due to the workers' compensation injury/illness on the URM Lost Time form. This is in addition to the time collection in PeopleSoft. The Lost Time form may be found at: https://urm.cusys.edu/docs/forms/90day_workcomp.asp.
- The supervisor should contact URM at:
University Risk Management-Boulder Campus Operations
3215 Marine Street, RL 6 Building, 2nd floor
587 SYS
Boulder,CO 80309
Phone: 303-735-5900
Fax: 303-492-1911
Email: Carolyn.Peet@cu.edu

Refusal to Seek Medical Treatment

- The University cannot force anyone to seek medical treatment. However, Risk Management strongly encourages injured workers to seek medical care, at least for an initial visit.
- If the employee refuses to seek medical treatment, URM asks that the employee submit an EIR form as an "Incident Only" claim. That way the injury has been documented and submitted in a timely manner.

Timelines

- The injured worker has 4 days to report an injury in writing to his/her employer.
- URM has 20 days to admit/deny a claim for lost time compensation and initiate initial payment of temporary total disability (TTD) or temporary partial disability (TPD).
- Compensation (TTD/TPD) must be paid every two weeks by URM to the injured worker if the worker is not eligible for on-the-job-injury leave (OJI-see page 3) or have exceeded the 90 days of OJI.
- URM has 20-30 days to file an admission after a change in lost time benefits, (i.e. return to work or change in hours).

Consequences of Not Following the Timelines (above)

- The Workers' Compensation Act allows, at the discretion of an Administrative Law Judge, to assign penalties to the insurance carrier, up to \$500 per day for each offense. The injured worker must report the injury to his/her employer within four days of the occurrence. Failure to report in a timely manner may result in a penalty of up to one day's compensation for each day's failure to so report.

Lost Time Benefits Waiting Period

- The Workers' Compensation Act requires that at least 24 hours or three working days of lost time be accrued before any TTD/TPD benefits become due and payable. This applies to OJI as well.
- The first 24 hours are charged to the employee's sick or vacation (comp time if available). If there is no available sick or vacation, that time is docked from the employee's pay.
- Reimbursement for the first 24 hours is only made if the employee misses time from work for more than 14 days. These days can be in succession or cumulative.

Lost Time Recording/Reporting

- Lost time on the date of injury is not counted as lost time. Show any lost time on the date of injury as time worked. The employee must lose over three work shifts (24 hours) before lost time benefits are payable under workers' compensation.
- Once the 24-hour waiting period has been met, lost time should be reported to URM every two weeks. Continue reporting lost time in PeopleSoft time collection every pay period as well using the code OJI.
- You can report lost time to URM by one of the following ways:
 - Fax the lost-time report to URM at 303-860-5680
 - Send the lost-time report directly via e-mail to URM adjustor assigned to the claim
 - Submit the lost-time report via the lost time worksheet, found at the following website: https://urm.cusys.edu/docs/forms/90day_workcomp.asp

On-the-Job Injury Leave (OJI)

- OJI is an additional benefit over and above the Workers' Compensation Statutory benefits. OJI allows a worker who is injured on the job to receive full regular pay in lieu of the statutory 66 2/3% that workers' compensation allows.
 - Departments must grant injury leave to any eligible employee (may be classified staff, professional exempt or faculty).
 - The OJI benefit is good for 90 working days.
 - Student and temporary employees are not eligible for OJI
- Once the 24-hour (or 3 working shifts) period has been reached, the employee receives 100% pay for up to 90 days. The department is entitled to be reimbursed for 66 2/3% of the employee's average weekly wage, subject to a maximum amount per week as set forth by the Division of Workers' Compensation.
- Remember, you will be tracking and reporting to two separate entities during the claim. You continue reporting time in PeopleSoft and report lost time due to the injury to University Risk Management.
- The term "days" under OJI may or may not be full days. For example, a two hour appointment is counted as one *day* towards the 90 day total. This does not mean that an employee may take a full eight hours off for each appointment. Remember, only the actual time off necessary for the appointment as authorized by the Designated Medical Provider can be taken off as OJI.
- The 90-day count starts on the first date of lost time.
- The 90 days may or may not be concurrent business days. A day is not counted unless approved injury leave is used that day.
- If an injured worker is off work during a holiday, you do not count that time against the 90 days.

- If, after using the full 90 days of OJI, the employee misses more work due to the injury, the employee receives payment for 2/3rds of his/her pay directly from Risk Management and the other third is paid by using sick and annual leave.

How and When a Claim is Closed

- The designated medical provider (DMP) determines when the claimant has reached “Maximum Medical Improvement” (MMI).k MMI means that the injury or disease causing disability has become stable and no further medical treatment will improve the condition.
- At the same time the DMP will determine if the claimant has sustained any permanent impairment as a result of the injury. The DMP may also assign permanent work restrictions as a result of the injury.
- Once MMI is obtained, no further lost time will be considered due and payable, even if the DMP prescribes medical maintenance treatment post MMI.
- If the claim involved lost time over 24 hours, the URM adjustor must then file a Final Admission of Liability, reflecting the lost time benefits paid to date of MMI and admit for any Permanent Partial Disability.