Overview:

- ➤ Worker's Compensation (WC) is a benefit to any employee who has had a work related injury/illness.
- Any employee who suffers an injury/illness within the scope of his/her employment is eligible to file a WC claim.

Overview:

- For MTSU, worker's compensation is administered by the State of Tennessee Division of Claims Administration, who contracts with a third party administrator for the processing of state employees' claims.
- > The current third party administrator is CorVel.

Employees covered under WC:

- Full-Time Regular
- ➤ Part-Time Regular
- > Temporary Hourly
- > Student Workers
- ➤ Graduate Teaching Assistants
- > Adjunct Faculty

- A job related accident/injury/illness should be reported immediately. Call 911 for all emergencies that result in serious bodily injury.
- Supervisor should e-mail HR (<u>kim.burns@mtsu.edu</u>) and advise of the injury, employee name and MTSU ID.
- ➤ Departments should have established procedures for employees regarding notification.
- The employee should notify the supervisor immediately, advising of what happened, how it happened, who saw it happen and if they were injured as a result of the accident.

- The employee <u>and</u> supervisor must call the 24/7 call center at 1-866-245-8588. The injured employee will speak to the nurse to evaluate the nature of the injury and determine immediate care or treatment options.
- ➤ Initially, the supervisor will only verify that the employee is reporting a work related injury.
- If no medical treatment is recommended, the nurse will document the call and enter an incident report. No other action will be needed.
- ➤ If medical treatment is recommended, the employee will be directed to the nearest State approved medical provider.

Employee Responsibility - What information is needed?

- Employee first and last name;
- Employee contact information;
- Last 4 digits of the SSN;
- Date of birth;
- Date of injury;
- Nature of injury;
- Employer location and department;
- Supervisor name and contact information;

The employee must keep the supervisor and HR informed of their status regarding worker's compensation.

Supervisor Responsibility - What to do?

The supervisor must call the First Notice of Loss hotline at 1-866-245-8588 and select option #2 to answer the following questions;

- ✓ Employee SSN;
- ✓ Employee address;
- ✓ Date of hire;
- ✓ Date employer was notified of the injury/illness;
- ✓ Accident description
- ✓ Where the injury/illness occurred and if the injury was in the course and scope of employment;
- ✓ If the validity of the claim is in question

Lag Time Penalty

- A department has three (3) days to complete the First Notice of Loss (FNOL) and submit the required information to CorVel. Failure to comply will result in a fine assessment of \$500.00 per claim.
- ➤ This penalty will be charged to the departmental budget.

Worker's Compensation Benefits

- Payment of medical expenses directly related to the treatment of a compensable injury.
- Payment of temporary disability benefits until the employee is able to return to their job.
- Payment of permanent disability benefits if the compensable injury permanently lessens the ability to perform the job.
- ➤ Death benefits if compensable injury leads to death of employee.
- Continued group health insurance.

Worker's Compensation Benefits

Lost Time Pay

- Temporary Disability Benefits (TTD)
 - ✓ Employee must be in leave without pay status.
 - ✓ Employees may choose to use accumulated sick or annual leave instead of or prior to requesting lost time pay.
 - ✓ Employee should provide copies of all paperwork issued for treatment to HR. Due to HIPPA compliance, only HR will store medical records related to WC.
 - ✓ Employee should provide supervisor copies of any paperwork regarding return to work, restrictions, or follow-up visit dates or physical dates.

Worker's Compensation Return To Work Incentive

- The department has 14 business days from the date of release to return the injured employee to a transitional duty assignment or full duty status.
- If an employee has been released to return to work with restrictions or limitations, the department will be fiscally responsible for 50% of the Total Temporary Disability payments for that specific claim if they are unable to meet the restrictions or limitations.
- This expense will be charged to the departmental budget.

Conclusion Worker's Compensation

Questions
&
Answers