



Division of Human Resources
& Organizational Effectiveness

Workers' Compensation Administration Manual

An Administrator's Guide to the Workers' Compensation Claim Process
At
Texas A&M University

Benefit Services

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References:

System Regulation 24.01 – Risk Management

<http://tamus.edu/offices/policy/policies/pdf/24-01.pdf>

Standard Administrative Procedure 24.01.01.M1.01 – Workers' Compensation Insurance

<http://rules-saps.tamu.edu/PDFs/24.01.01.M1.01.pdf>

Standard Administrative Procedure – Early Return to Work Program

<http://www.tamus.edu/assets/files/safety/pdf/earlyreturn.pdf>

1. Introduction

The Texas A&M University System Workers' Compensation Insurance (WCI) Program provides benefits to those employees who suffer injuries or illnesses which are determined to have originated in the workplace. Department administrators are responsible for providing Human Resources with appropriate documentation when such illnesses and injuries are reported. This manual is designed to provide HR Liaisons with useful information regarding WCI policies and procedures.

2. WCI Administrator / Liaison Responsibilities

The duties of a department WCI administrator will vary according to each department, but the main duties will most likely consist of, among others:

- following established procedures for WCI claims processing,
- maintaining a current knowledge of updated University WCI procedures;
- having a working knowledge of the forms related to the WCI process;
- communicating WCI procedures to managers, supervisors, and employees; and
- providing timely reports and other items upon request to Human Resources.

3. Supervisor / Manager Responsibilities

Supervisory and management responsibilities will vary according to each department, but the main duties will most likely consist of, among others:

- maintaining a safe environment for employees and visitors;
- communicating WCI procedures to staff;
- reporting workplace injuries to appropriate department personnel (department WCI liaison or administrator, etc.) when made aware of an accident or incident of illness;
- investigating accidents to determine cause;
- implementing procedures for the prevention of future accidents where necessary; and
- providing reports upon request from either the department or Human Resources.

4. WCI Forms

Several WCI forms may need to be completed during the duration of a claim. Timely submission of these forms is required by law and should be submitted to Human Resources as soon as possible to benefits@tamu.edu or fax 979-862-3128.

4.1 First Report of Injury:

<http://employees.tamu.edu/media/330830/569cWCIFirstReport.pdf>

Form Instructions:

http://employees.tamu.edu/media/313101/569WC_FirstReportInstr.pdf

Deadline for submission to HR: 24 “business” hours after employer becomes aware of illness or injury.

This form must be completed once that we, as an employer, become aware of any workplace injury. This must be done, regardless of whether or not the injury is considered serious or if the accident occurred within the course and scope of duties. Please note the following additional items regarding this form:

- The first report must be completed by the supervisor or WCI designee and may not be completed by the injured employee.
- All information must be completed on the form; please use the instructions above to ensure the information is complete and accurate. Incomplete forms will delay the processing of a WCI claim, which in turn may become a violation of state law.
- A separate handout, entitled “Injured Employee Rights and Responsibilities”, must be provided to each employee who suffers a workplace injury. The form may be found at http://www.oiec.texas.gov/documents/448.2e_r_and_r.pdf

4.2 Witness Statement:

http://employees.tamu.edu/media/330833/565WC_Witness.pdf

Deadline for submission to HR: As soon as possible.

This form should be completed by a witness who observed the accident and therefore has first-hand knowledge of the occurrence. This form is required only if someone witnessed the reported accident. A witness should not be *forced* to complete this document; however, the witness may have his/her name entered in box 25 (witness list) on the first report of injury if s/he has been found to have observed the incident.

4.3 Request for Paid Leave:

<http://employees.tamu.edu/media/330836/569aWCIRReqForPaidLeave.pdf>

Form Instructions:

<http://employees.tamu.edu/media/330827/569bWCIRReqforPaidLeavetInstr.pdf>

Deadline for submission to HR: Within three days of the employee’s having missed one shift of work.

This form should be completed by the WCI Liaison when the department becomes aware that the employee is losing time due to a work-related injury. Lost time is defined as missing more than one shift of work. The form may be completed by the WCI liaison or designee if the employee is unavailable for a signature, provided the employee is consulted first regarding the choice of leave to use.

4.4 Supplemental Form of Injury or Illness:

<http://www.tamus.edu/assets/files/safety/pdf/supplementalreportofinjury.pdf>

Form Instructions:

<http://employees.tamu.edu/media/330821/592SupplementalInstr.pdf>

Deadline for submission to HR: Within three days of change in return to work or pay status.

This form accounts for any period of time lost from work for which the injured worker might be entitled to WCI benefits. Circumstances requiring the use of this form include:

- time lost as a result of a reported injury or illness;
- a return to work after an injury or illness;
- a change in wages;
- the employee's resignation; and/or
- the employee's termination.

4.5 Wage Statement

<http://www.tdi.state.tx.us/forms/dwc/dwc003wage.pdf>

Form Instructions

<http://employees.tamu.edu/media/330824/WageStatementInstr.pdf>

Deadline for submission to HR: Within three days of missing more than seven days of work due to the illness or injury.

This form is required whenever the employing department knows (or should have known) an employee will miss more than seven (7) cumulative days of work due to a work-related illness or injury.

5. Early Return To Work Program

Departments are obligated to attempt, in good faith, to provide meaningful temporary work to those employees who are placed on restricted duties by their physician. The objective of the Early Return to Work Program (RTW) is to return Texas A&M University employees to safe and productive work as soon as medically possible following an injury or illness. Additional RTW procedures, forms, and other information may be found at:

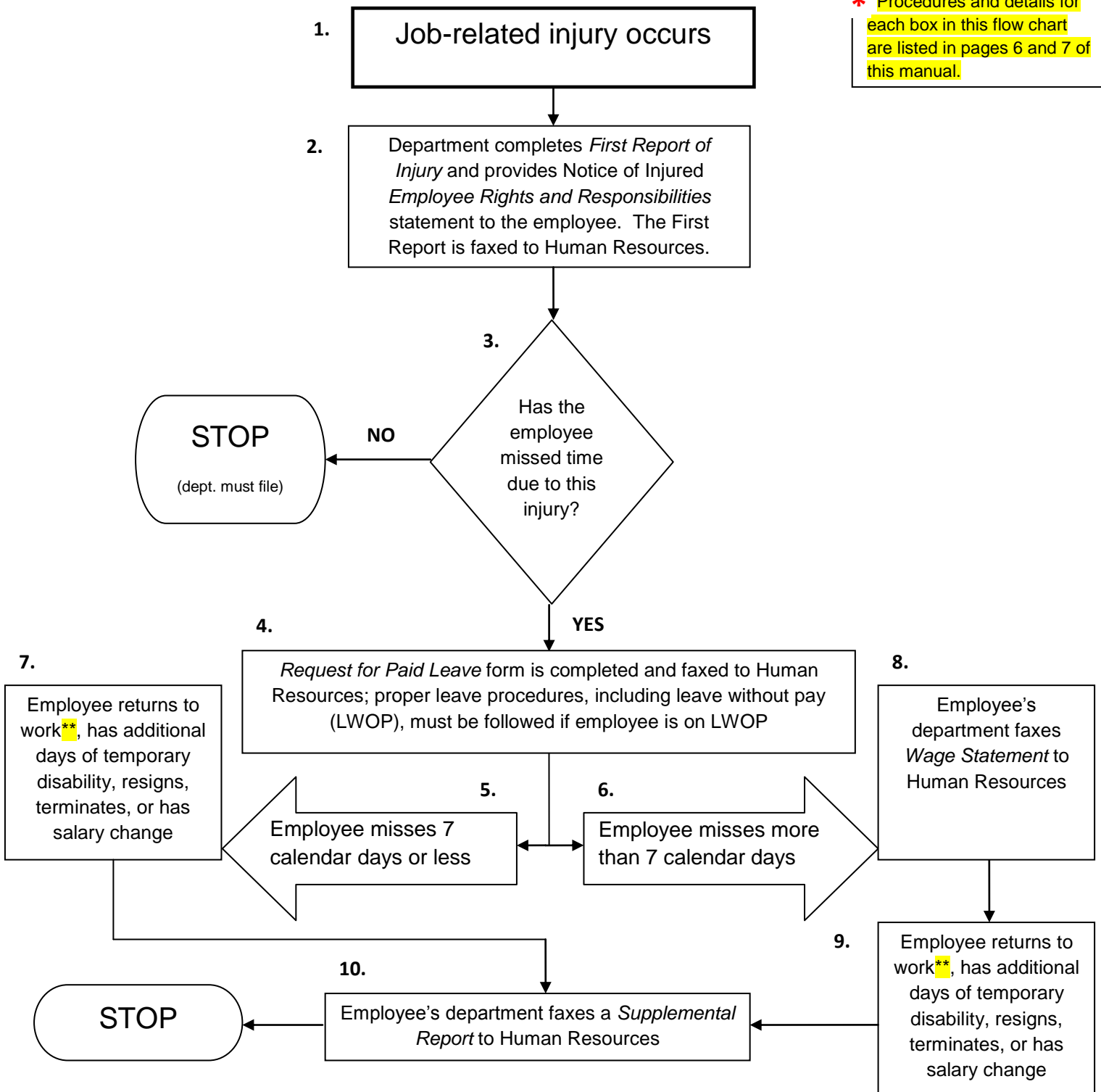
<http://employees.tamu.edu/benefits/leave/early-return>

6. Workers' Compensation Process Flow Chart

The flow chart on the following page illustrates the WCI process from beginning to end. Each decision-making process, along with the appropriate forms needed, is described in detail.

Workers' Compensation Claim Process Flowchart*

* Procedures and details for each box in this flow chart are listed in pages 6 and 7 of this manual.



**Employee must be given bonafide offer letter when returning to work with restrictions.

1. Job-related injury occurs.

An “injury” for Workers’ Compensation Insurance (WCI) purposes is defined as “an injury or occupational disease that causes damage or harm to the body and arises out of the course and scope of employment.”

2. Department completes First Report of Injury and provides Notice of Injured Employee Rights and Responsibilities statement to the employee. The First Report is faxed to Employee Services.

Texas WCI laws state that we, as an employer, must complete a first report as soon as possible once we become aware of any workplace injury. Keep in mind that minor injuries can later develop into a more serious condition that may require medical attention or time off from work. The Notice of Injured Employee Rights and Responsibilities statement must be given to the employee after any reported injury. : Complete a first report once you become aware of an injury, regardless of whether or not you believe the injury is serious or whether or not you believe it occurred within the course and scope of your employee’s duties. Benefit Services fax: 979-862-3128.

3. Has the employee missed time due to this injury?

For WCI purposes, missed time is generally not considered until the employee misses more than one shift due to an occupational injury or illness. For instance, an employee who is injured at work and misses only two hours of work time to go to a physician is not to be considered as lost time if the employee returns to employment with no restrictions. However, several physician’s appointments or treatments that occur over a period of time related to the injury that totals more than one work shift may be considered to be lost time. You must complete additional forms (instructions are given below) in the event you find the employee has missed more than one shift of work.

You will not have to do anything else (other than fax the report to the Human Resources Benefits fax) if you find that the employee did not lose time due to the injury.

4. Request for Paid Leave Form is completed and faxed to Human Resources; proper leave procedures, including leave without pay (LWOP), must be followed if the employee is on LWOP.

Employees have the option of using their accrued sick and/or vacation leave in the event time is lost due to a work-related injury. The Request for Paid Leave form is used to document the employee’s choice of leave during a WCI-related absence.

The employee does not necessarily need to sign the form before submission to Human Resources, as an injured employee is not always available for signature. However, the WCI administrator may sign on the employee’s behalf, provided the administrator has contacted the injured employee by phone, email, etc. to determine whether or not paid leave is to be used.

5. Employee misses seven calendar days or less.

The WCI Administrator and supervisor must monitor all absences resulting from a work-related illness or injury. The State of Texas will not provide an employee with wage replacement benefits until the employee misses more than seven calendar days (or more than seven cumulative work shifts, if the absences are not consecutive) of work. Appropriate paid and unpaid leave will be applied during this period of absence.

6. Employee misses more than seven calendar days.

The employee may become eligible for wage replacement in the event s/he misses more than seven calendar days (or more than seven cumulative work shifts, if the absences are not consecutive) of work. Appropriate paid and unpaid leave will be applied during this period of absence.

7. Employee returns to work, has additional days of temporary disability, resigns, terminates, or has salary change.

Administrators must monitor all absences and returns to work resulting from a work-related illness or injury. Further actions are necessary as described in item #10.

8. Employee's department faxes Wage Statement to Human Resources.

Employees who are eligible for wage replacement pay will generally be compensated based on their earnings history for the 13 weeks previous to the injury. The wage statement will provide Risk Management with wage and other monetary information to ensure that the employee is paid appropriately.

9. Employee returns to work, has additional days of temporary disability, resigns, terminates, or has salary change.

Administrators must monitor all absences and returns to work resulting from a work-related illness or injury. This information will be recorded on a supplemental report referenced in item #10.

10. Employee's department faxes a Supplemental Report to Human Resources.

The supplemental report must be completed if the employee's status reflects the items below. This report is necessary for tracking

- *return to work date(s);*
- *time worked under a physician's restrictions;*
- *resignations of employment where the employee was eligible for WCI benefits; and*
- *salary changes during eligibility for WCI benefits*