



**Office of Human Resources
Standard Operating Procedure
HR SOP #507**

Subject: Workers' Compensation

Effective Date: August 16, 2018

Policy Statement:

The Department of Natural Resources (DNR) will coordinate Workers' Compensation benefits in accordance with the Georgia Workers' Compensation Act.

Definitions:

Workers' Compensation (WC): A benefit program created by State law, administered through a contract with Georgia Administrative Services, which is a third-party administrator, that provides medical, rehabilitation, income, death and other benefits to employees and dependents due to injury, illness and death resulting from a compensable work-related claim covered by law.

Modified Duty: Refers to performance of job tasks that have been specifically changed (as a temporary or permanent arrangement, typically not to exceed 90 calendar days) to allow individuals to perform their regular-duty assignments in a limited manner.

Procedure:

Official Notices:

All employees should be familiar with both the *Bill of Rights for The Injured Worker* (Attachment 1) and the *Official Notice* (Attachment 2). The *Official Notice* provides guidance to the employee regarding medical treatment. These posters must be displayed on Official Bulletin Boards in all agency facilities as per HR SOP #901, *Bulletin Boards*.

Medical Emergencies:

In the event of a medical emergency, the employee shall seek immediate medical attention from the nearest medical facility or emergency room. If possible, a completed *Georgia Activity Analysis* (GAA), Attachment 1 of HR SOP #508, *Return-to-Work* should be provided to the healthcare provider at that time.

When possible, the injured employee should be transported to receive medical attention if the condition of the employee allows it. However, if there is any doubt about the seriousness of the employee's condition, an ambulance should be called to transport the employee.

NOTE: A wallet-sized card listing Amerisys, Inc. contact information and instructions for emergency care and pharmacy benefits is provided as Attachment 3 of this SOP. All employees should carry a copy of the card and present it to healthcare staff as necessary.

Compensable Workers' Compensation Injuries:

If an employee is injured while performing assigned job duties during assigned work hours, the employee is covered under the Workers' Compensation Program. Injuries sustained while engaging in unassigned duties or during lunch breaks are not covered. Generally, injuries that occur during an employee's commute are not covered. The Georgia State Board of Workers' Compensation makes benefits eligibility determinations.

Documenting and Reporting the Injury:

Any injury or illness arising out of and in the course of employment is by definition a compensable on-the-job injury. The supervisor and the injured employee have responsibilities regarding documenting and reporting the injury.

The supervisor must:

- Prior to reporting the injury address medical concerns of the injured employee as a first priority.
- Complete the *Georgia Activity Analysis* and send it to the medical facility with the employee, if possible.
- Immediately complete the *Employee's Report of Injury* (Attachment 4).
- Determine if there were any witnesses to the accident. If there were witnesses, have each witness complete an *Accident Witness Statement* (Attachment 5).
- **If the injury requires medical treatment or lost time from work use the Employee's Report of Injury to report the injury** via the telephonic reporting system by calling 1-877-656-RISK (7475) as soon as possible but at least within 24 hours following the incident.
- **Do not call and report an injury that does not require treatment beyond simple first-aid.** (Use of the telephonic reporting system for an injury that does not require medical attention will result in a charge to DNR. Payment of this fee will be deducted from the budget of the Division to which the injured employee is assigned.)
- Place the *Employee's Report of Injury* (Attachment 4) and the *Accident Witness Statement* (Attachment 5) in the employee's management file.
- If the employee received medical treatment and the injury was reported, notify the OHR Workers' Compensation Coordinator.

The injured employee must:

- Report the injury to the supervisor immediately, if possible, but at least within 24 hours. (Failure to report the injury within 30 days may result in loss of WC benefits.)

- Call the Managed Care Organization (MCO) Case Manager at Amerisys at 1-800-900-1582 or 678-781-2848, to report the injury to receive assistance in obtaining medical care, finding a Physician and/or getting the appropriate follow-up care.

DOAS will subsequently report the injury or illness to the Georgia State Board of Workers' Compensation using the *Employer's First Report of Injury*, Form WC-1.

Treatment:

Once the emergency is over, any additional treatment must be provided only as directed by the MCO, Amerisys, Inc. or the Department of Administrative Services (DOAS) Claims Representative. Injured employees must go to an authorized Physician that is part of the MCO. If an injured employee goes to a Physician not on the approved list, this will be considered unauthorized treatment and the employee will be responsible for the cost associated with this medical care. Some health insurance policies will not pay for medical treatment associated with an on-the-job injury.

An injured employee may change their authorized treating Physician, within the DOAS Physician Network, one time during their treatment by calling Amerisys, Inc. at 1-800-900-1582 or 678-781-2848. Any further change of Physician will require the agreement of DOAS Risk Management and the Case Manager.

The authorized treating Physician is responsible for determining the medical necessity for referrals to specialists, if needed.

Investigation:

DOAS will investigate on the job injuries/illnesses. Typically the investigation will be in the form of a questionnaire coordinated by DOAS through the DNR Office of Human Resources to the Division Human Resources Representative. Division Human Resources Representatives are expected to obtain the answers to the questions and return them to the DOAS representative as soon as possible. Copy the OHR Workers' Compensation Coordinator with the reply.

Lost Time From Work:

Employees who suffer an injury or illness arising out of and in the course of employment are entitled to weekly income benefits. An injured employee on a leave earning position who has lost time from work must complete a *Leave Election Form* (Attachment 6). Forward the *Leave Election Form*, with signatures, to the OHR Workers' Compensation Coordinator.

NOTE: Absences due to a Workers' Compensation claim which qualifies as a serious health condition may require designation as Family and Medical Leave (with or without pay). See HR SOP #608 – *Family and Medical Leave (FML)*.

The 'waiting period' for qualifying to receive Workers' Compensation lost wage payments is 7 *calendar* days. Typically, no payment is due to the employee for the first week of the disability unless the following conditions are met.

Entitlement to benefits for the first 7 calendar days of disability, or any portion of that time, requires:

- The employee to be out of work for more than 21 consecutive calendar days; and
- The lost wage payments for the first 7 calendar days will only be for the time that was designated as leave without pay.

The employee is entitled to receive two-thirds of their average weekly wage, not to exceed the maximum amount provided by law at the time of the injury or illness.

Employees who choose to receive Workers' Compensation benefits for lost wages will be placed on Authorized Leave Without Pay. **Employees cannot receive Workers' Compensation payments and regular salary or any type of paid leave at the same time.**

Workers' Compensation and Additional Income:

Employees who are absent from work due to an injury or illness compensable (determined to be eligible) by Workers' Compensation are NOT eligible to solicit or receive donated leave or to receive short term disability (STD) benefits available through the State Flexible Benefits program. For more details, refer to the STD Summary Plan Description (SPD) at <https://leplb0510.portal.hewitt.com/web/stateofgeorgia/login?forkPage=false>.

Long term disability (LTD) benefits payment, available through the State Flexible Benefits program, are deducted from any Workers' Compensation benefits. For additional details on LTD payments, refer to the LTD Summary Plan Description (SPD) at <https://leplb0510.portal.hewitt.com/web/stateofgeorgia/login?forkPage=false>.

Role of the Division HR Representative/Supervisors:

The supervisor coordinates with the Division HR representative and together they play key roles in the coordination the Workers' Compensation process. These individuals must;

- Ensure a Leave Election Form is completed by the employee as soon as possible after the injury/illness;
- Ensure the signed Leave Election Form is forwarded to OHR, to ensure the employee continues to receive full pay by use of their accrued compensatory time, sick, annual and/or personal leave, or to receive lost wage payments from DOAS;
- Complete the *Personnel Action Form* for Authorized Leave without Pay and forward it to the OHR WC Coordinator if the employee chooses to receive Workers' Compensation benefits for lost wages;
- Notify DOAS immediately when an employee returns to work to prevent overpayment of WC benefits; and
- Notify DOAS if an employee returns to work but has to go back out of work again for the same WC claim.

Medical Expenses:

Medical expenses arising from a work-related injury or illness are covered, if the claim is accepted by the DOAS Workers' Compensation Program. This may include hospital bills, prescribed drugs, ambulance charges, healthcare provider fees and other medical expenses.

Workers' Compensation provides reimbursement of certain reasonable personal expenses incurred to obtain medical treatment. This includes such things as prescription drugs, mileage, meals, lodging and other expenses, in limited instances, which are deemed necessary and appropriate in order to ensure the employee receives quality medical care. The employee should check with their Workers' Compensation Case Manager before incurring expenses.

The Nurse Case Manager and adjuster will work closely with the injured employee and the treating healthcare provider to ensure that all appropriate and necessary arrangements are made prior to scheduling major surgical procedures, MRI/CT scans or physical therapy.

Prescriptions:

If the authorized healthcare provider prescribes medication for the injured or ill employee, the Workers' Compensation/Managed Care prescription drug program will permit the employee to obtain prescription drugs at a designated pharmacy, at no charge to the employee. The information needed at the pharmacy is provided on the *Wallet Card* (Attachment 3). Employees should identify themselves at the pharmacy by stating that the processor is Premier Pharmacy Plan – Group #10602105. The telephone number for myMatrixx Healthcare Services is 1-877-804-4900, which is also on the *Wallet Card* under Pharmacy Benefits.

Payment for prescription drugs is reimbursable in the event the employee must pay for it. If this happens, the employee should submit the pharmacy receipt along with a note stating these items were paid for by the employee requesting reimbursement to DOAS at:

Department of Administrative Services
Risk Management Services Division
200 Piedmont Ave, SE
Suite 1208, West Tower
Atlanta, GA 30334-9010

Any bills received from a work-related injury or illness should be sent to DOAS for processing within a year of the date of service. Approved expenses will be reimbursed within 15 days of submission to DOAS. These bills are **not** to be submitted to the Division Personnel Representative or the Office of Human Resources as this will delay the payment process.

Expenses connected to a work-related injury or illness are excluded under the State Health Benefit Plan or other group plans.

Mileage Reimbursement:

Mileage traveled to and from medical appointments is reimbursable. The employee must complete a *Workers' Compensation Mileage Reimbursement Request* (Attachment 7) and submit it to the address listed on the form.

Claim Denial:

If an injured employee's claim is denied, the employee will receive written notice from DOAS regarding the reason for denial. The Claims Adjuster will send the *Employer's First Report of Injury*, Form WC-1, which is filed with the Georgia State Board of Workers' Compensation.

The employee has the right to request a hearing from the Georgia State Board of Workers' Compensation if they disagree with the denial of the claim. *Notice of Claim*, Form WC-14, must be filed within 1 year of the injury. This form must be submitted to:

Georgia State Board of Workers' Compensation
270 Peachtree Street N.W.
Atlanta, GA 30303-1299

No compensation shall be allowed for an injury or death due to the employee's willful misconduct.

Workers' Compensation Monthly Report:

The supervisor's report of the injury and any subsequent investigation are used to develop an *Employee Workers' Compensation Report* and a *Workers' Compensation Claims Report*. The OHR Safety Coordinator distributes the reports monthly to Division Directors and other delegated Division representatives. These reports are created to ensure Division Management is aware of Workers' Compensation claims being submitted within their Division. These reports contain specific information for each Workers' Compensation claim and are created and distributed to ensure Division Management is contacting the local managers/supervisors to determine what can be done to prevent the accident from occurring again and to put measures in place to prevent future accidents of this type.

Return to Work:

It is essential that DNR supervisory/managerial personnel maintain sufficient contact with the employee to support and encourage the employee's safe return to appropriate work, as soon as the healthcare provider determines it is medically feasible.

The injured employee is expected to ensure that their Supervisor and the Division Personnel Representative are informed regarding any change in their condition, outcome of medical appointments and/or return to work status. If they are permitted by the health care professional, the employee must physically report to their supervisor at the work site at least once per month to complete a leave request and provide updated medical information from their doctor.

The employee must comply with the requirements of HR SOP #508, *Return to Work* prior to returning to work. (The forms mentioned in this paragraph are attached to HR SOP #508, *Return to Work*.) This includes the completion of the *Georgia Activity Analysis* (GAA), and the *Authorization for the Release of Medical Information*. If the healthcare provider releases the employee to work with restrictions, the development of a Transitional Employment Plan (modified duty) will be necessary.

When DNR offers suitable employment to an employee who has been released to return to work, with prescribed medical limitations, through a modified duty plan, and the employee refuses to

attempt the modified duty, the Workers' Compensation benefits can be suspended; therefore, HR Representatives/managers must notify the Claims Adjuster immediately.

In accordance with State law, a recuperating employee is allowed a 15-scheduled-workday 'grace period' to attempt to return to a modified duty assignment following a work-related injury or illness without fear of losing Workers' Compensation benefits if they are unable to perform the job duties. An attempt is defined by eight cumulative hours or one scheduled workday, whichever is greater.

Employees who return to work after taking Leave without Pay (LWOP) due to a work related injury or illness may be eligible to receive Creditable Service under the Employees' Retirement System (ERS) for some or all of the time on LWOP. Contact ERS or reference the ERS website at <http://www.ers.ga.gov/> for more information.

Records Retention:

Workers' Compensation documents, involving reported claims, must be retained in the Office of Human Resources for 5 years after the claim is closed.

Workers' Compensation documents involving no reporting of claims must be retained for 2 years in the employee's management file.

Attachments:

Attachment 1 – Bill of Rights for the Injured Worker

Attachment 2 – Official Notice

Attachment 3 – Wallet Card

Attachment 4 – Employee's Report of Injury

Attachment 5 – Accident Witness Statement

Attachment 6 – Leave Election Form

Attachment 7 – Mileage Reimbursement Request