PRAIRIE VIEW A&M UNIVERSITY UNIVERSITY ADMINISTRATIVE PROCEDURE

31.02.99.P0.01 Workers' Compensation Insurance

Approved May 15, 1998 Revised September 27, 2010 Revised October 9, 2015 Revised November 10, 2020 Next Scheduled Review: November 2025



UAP Purpose

The purpose of this University Administrative Procedure (UAP) is to outline the procedures to be followed by employees and supervisors when utilizing Workers' Compensation Insurance due to a workplace injury, illness or death in accordance with System Policies 31.02 Employee Insurance and Retirement Benefits and 24.01 Risk Management and with specific reference to the following guides: Workers' Compensation Insurance Guide, Early Return to Work Program, and Origami-Incident Entry Guide.

Definitions

Workers' Compensation Qualifying Event - an employee injury, occupational disease, or work related death in the course and scope of his/her employment.

Official Procedures and Responsibilities

1. GENERAL

1.1 Workers' Compensation Insurance (WCI) is a form of insurance specifically designed to provide medical payments and, in some cases, financial payments to employees who suffer injuries, occupational diseases, or to the employee's family in the case of a work related death in the course and scope of employment. In instances of injury or illness, the employee is entitled to medical aid, hospital services, and medication reasonably required at the time of injury and anytime thereafter to cure and relieve the effects naturally resulting from the injury. In some instances, financial payments will be available to offset a temporary loss of earning capacity and/or to compensate for permanent impairment due to the injury.

2. ELIGIBILITY

- 2.1 All employees, excluding those on unpaid leave of absence, are covered under the program at no personal expense.
- 2.2 An employee may not receive benefits if his/her injury occurred while the employee:

- 2.2.1 Was under the influence of illegal substances or intoxicated;
- 2.2.2 Was attempting to injure oneself intentionally or while unlawfully attempting to injure someone else;
- 2.2.3 Was injured while voluntarily participating in an off-duty activity;
- 2.2.4 Was injured by an act of God; or,
- 2.2.5 Was injured during horseplay.

3. EMPLOYEE RESPONSIBILITIES

- 3.1 Employees who suffer an injury or illness as a result of and in the course and scope of employment should immediately notify their supervisor. Injuries should be reported within twenty-four (24) hours. Failure to report the injury within twenty-four (24) hours of the occurrence (or manifestation of the occupational disease) may result in the denial of the claim. Other employee responsibilities may include, but are not limited to:
 - 3.1.1 Responding to any correspondence delivered by the System Office of Risk Management (SORM) or other agencies or individuals needing information regarding the incident;
 - 3.1.2 Advising the treating practitioner that he/she believes the illness or injury may be work-related;
 - 3.1.3 Ensuring personal contact information in Workday has been updated;
 - 3.1.4 Providing the Office of Human Resources (OHR) with a work status report after each doctor's visit:
 - 3.1.5 Completing appropriate time-off entries in the Workday system; and,
 - 3.1.6 Completing the Request for Paid Leave Form, if applicable.

4. EMPLOYER RESPONSIBILITIES

- 4.1 Department liaisons, supervisors, or designees are required to report any work-related injury or illness to the OHR as soon as possible after the incident is reported or has been identified. Other departmental responsibilities pertaining to an employee's accident in the workplace may include, but are not limited to:
 - 4.1.1 Providing additional information such as witness statements, wage information, or medical information for purposes of determining eligible WCI benefits;
 - 4.1.2 Investigating the accident to determine cause; and,
 - 4.1.3 Implementing necessary procedures for the prevention of future accidents.

5. PROCEDURES

- 5.1 All employees and supervisors shall adhere to the following procedures when processing an employee's workers' compensation request:
 - 5.1.1 The online Employer's First Report of Injury or Illness Form must be completed in its entirety by the employee's supervisor immediately following the occurrence of a workers' compensation qualifying event. Access the Origami online portal at https://www.tamus.edu/business/risk-management/. Once the online form is completed, the information routes to the OHR designated leave coordinator.
 - 5.1.2 If the occurrence results in the employee being absent from work, the employee will also need to complete a <u>Request for Paid Leave Form</u> and return it to the OHR.
 - 5.1.3 If an injury occurs but the employee does not lose time from work, the digital Employer's First Report of Injury or Illness Form will be completed and maintained in the Origami Portal.
 - 5.1.4 If an injury occurs and the employee loses time from work or is seen by a doctor, the following steps will be followed:
 - 5.1.4.1 The online Employer's First Report of Injury or Illness Form along with any witness statements will be completed and forwarded to the SORM by the OHR designated leave coordinator through the Origami Portal;
 - 5.1.4.2 The employee will need to complete the <u>Request for Paid Leave</u> <u>Form</u>. The OHR designated leave coordinator will forward the form to the SORM:
 - 5.1.4.3 The OHR designated leave coordinator will need to complete the Employer's Wage Statement and forward it to the SORM if the employee returns to work, resigns or receives a salary increase;
 - 5.1.4.4 The OHR will maintain a copy of all information and file it in the employee's Workers' Compensation File; and,
 - 5.1.4.5 The employee is responsible for forwarding updated "Work Status Reports" to the OHR after each doctor's visit.
 - 5.1.5 If the employee is able to return to work with restrictions, the employer may allow the employee to return to work under the <u>Early Return to Work Program</u>. If the employee returns to work under the Early Return to Work Program, the immediate supervisor will work with the OHR to provide the employee with a Bona Fide Offer of Employment that includes:
 - 5.1.5.1 The offer must be in writing;
 - 5.1.5.2 The offer must include a copy of the Work Status Report that the offer is based upon;

- 5.1.5.3 The location where the employee will be working;
- 5.1.5.4 The schedule the employee will be working;
- 5.1.5.5 Wages the employee will be paid;
- 5.1.5.6 A description of the physical & time requirements of the position; and,
- 5.1.5.7 Statement that the employer will only assign tasks consistent with the employee's physical abilities, knowledge and skill, and will provide training if necessary.

Related Statutes, Policies, Regulations and Rules

System Policy 31.02 Employee Insurance and Retirement Benefits

System Policy 24.01 Risk Management

System Regulation 24.01.01 Risk Management Programs

Forms

Notice to Employees of Workers Compensation Insurance

Employer's First Report of Injury or Illness - Origami Portal (Incident Entry Guide)

Request for Paid Leave

Employer's Wage Statement

Supplemental Report of Injury

Contaminated Sharps Injury Reporting Form

Notice of Healthcare Providers of Workers' Compensation Insurance Coverage

Notice of Injured Employee Rights and Responsibilities in the Texas Workers' Compensation System

Guides

Workers' Compensation Insurance Guide

Early Return to Work Program

Origami – Incident Entry Gu

Insurance Standards

Workers' Compensation Legal Requirements and Claims Administration

Contact Office

Office of Human Resources 936-261-1730