

# Workers' Compensation Insurance

LAST REVISED ON 01/2014

**This policy applies to:** Employees covered by Workers' Compensation Insurance, which include the following: All University personnel (regular, temporary, full-time, part-time, and time-as-reported (TAR), faculty, staff, student employees, appointees, trainees, and interns).

*Individuals represented by collective bargaining agreements receive benefits in accordance with those agreements.*

## I. Policy

Workers' Compensation is insurance that provides employees injured on the job with wage reimbursement and payment for medical care related to the illness or injury. If death results, benefits are payable to the surviving spouse and dependents as defined by law.

## II. Guidelines

**A.** Timely reporting of a Work Related Injury is critical to our compliance with NY State regulations as well as prompt payment and medical care of the injured worker.

**B.** The first seven calendar days that an employee loses time from work due to a work related injury is considered a waiting period and may be paid out of the employee's banks (vacation/PTO/sick/supplemental). Beginning with the eighth calendar day employees who lose time from work associated with a work-related illness or injury are eligible to receive up to 2/3 of their average weekly wages based on 52 weeks of payroll immediately preceding the date of injury up to a maximum weekly benefit (NYSAWW\*). These weekly benefits are determined by New York State Workers' Compensation Law and are subject to modification.

*\*NYSAWW is the New York State Average Weekly Wage which is the average weekly wage of the state of New York for the previous calendar year as reported by the Commissioner of Labor to the Superintendent of Insurance on March 31 of each year.*

**C.** If the absence lasts more than 14 days, payments are retroactive to the first day absent. (Any time used from the employee's bank of time will be reimbursed at 2/3 of the hours used.)

**D.** An individual's disability absence covered under Workers' Compensation runs concurrently with Family Medical Leave Act (FMLA). Therefore, time away from work on an approved work related illness or injury, counts toward the 12-week annual entitlement under the FMLA. Additional Information about [FMLA \(https://www.rochester.edu/human-resources/benefits/leave-disability/family-medical-leave-fmla/\)](https://www.rochester.edu/human-resources/benefits/leave-disability/family-medical-leave-fmla/) is available online.

**E.** Medical treatment related to a work-related injury that is approved by the Third Party Administrator (TPA) and/or the Workers' Compensation Board will be paid to the employee directly by the University's TPA –Gallagher Bassett. Medical providers may submit the bills to:

**Gallagher Bassett**

**P. O. Box 23812**

**Tucson, AZ 85734**

[\(800\) 635-1550 \(tel:8006351550\)](tel:8006351550)

**Monday – Friday 8 a.m. – 7 p.m. EST**

### **III. Reporting Procedures for Work Related Injuries/Illness**

**A.** Employees must immediately report to their supervisor any injury received on University premises, or while on University assignment off University premises, or any illness which they believe may have been caused by their University work. *Faculty* members should report injury or illness to the department chairman or administrator. In the event of a life-threatening situation on premises, the Security Division should be called at [\(585\) 275-3333 \(tel:585-275-3333\)](tel:585-275-3333).

**B.** The department supervisor, administrator, or employee must report the incident by completing the Employee Incident Report Form (SMH 115) on-line within 24 hours. The [Employee Incident Report Form \(http://www.safety.rochester.edu/SMH115.html\)](http://www.safety.rochester.edu/SMH115.html) is available online.

**C.** If the employee's supervisor becomes aware that he or she has lost time from work beyond one (1) full shift due to a work related injury/illness (even after the initial reporting of the incident), please contact Leave Administration at (585) 276-5133 (tel:5852765133) and report the following information: Name of employee, employee ID, date of injury, and first day of absence.

**D.** Department supervisors should forward any medical documentation that the department receives from the treating physician excusing the employee from work and/or documenting restrictions/limitations. This documentation should be faxed to Leave Administration at (585) 235-6703 (tel:5852356703) to be reviewed. Prompt notification to Leave Administration will prevent delays in benefits and expedite the employee's return to work.

**E.** The New York State Workers' Compensation Employer's First Report of Incident (C-2F) will be completed by Leave Administration and sent to the University's Third Party Administrator (TPA) Gallagher Bassett who will review and forward to the NYS Workers' Compensation Board, if appropriate. Please note: timely reporting of a work related illness or injury is critical to our ability to maintain compliance with NY State Worker's Compensation Regulations\*

*\*The C-2F must be received at the Workers' Compensation Board within ten days of the incident; failure to do so could result in a fine. In addition, if a C-2F is not filed medical claims that occur as a result of the injury will not be paid by the University's TPA.*

**F.** If medical treatment is needed, the individual must be treated by a physician registered by the New York State Workers' Compensation Board. Please confirm with your treating physician that they accept Workers' Compensation cases. Employees are free to choose any physician, podiatrist or chiropractor registered by NYS Workers Compensation Board. If you need assistance in finding a physician, please call our office at (585) 276-5135 (tel:5852765135) or (585) 276-5136 (tel:5852765136) or review the provider list ([https://www.rochester.edu/human-resources/wp-content/uploads/2019/11/WC\\_Providers.pdf](https://www.rochester.edu/human-resources/wp-content/uploads/2019/11/WC_Providers.pdf)) online.

**G.** The injured or ill faculty or employee must advise the treating physician that the need for treatment is work related and provide your claim number. The physician will need to complete the Workers' Compensation Medical Report (C-4) and forward to the Workers' Compensation Board.

**H.** The injured or ill employee losing time due to a work related injury/illness should communicate regularly with Leave Administration at (585) 276-5133 (tel:5852765133) and his or her supervisor regarding their estimated or actual return to work date.

## IV. Continuation of UR Benefits during Workers' Compensation

**A.** During the first six months an individual is receiving Workers' Compensation lost-time benefits, the following benefit plans will be continued unless the employee signs a form(s) canceling the coverage(s): Health Care, Dental Assistance Insurance, Long-Term Disability Insurance, and Group Life Insurance. Individuals who choose to continue these coverage(s) while receiving Workers' Compensation payments will need to pay their normal share of premiums. Individuals remain eligible for tuition benefits.

**B.** For periods of job related disability extending beyond six months:

1. Employees covered under the University of Rochester's Long-Term Disability Plan (<https://www.rochester.edu/policies/policy/long-term-disability-plan/>) should refer to the plan document.
2. Individuals not approved or eligible for benefits under the University's LTD Plan may be eligible for a Leave of Absence. The Leaves of Absence policy #357 (<https://www.rochester.edu/policies/policies/leave-of-absence/>) is available online.
3. Individuals who are not eligible for LTD benefits or leaves of absence will be terminated. (Termination will not affect continued eligibility for Workers' Compensation benefits).

*Please see the Health Program Guide for the impact termination has on other University of Rochester Benefits*

## V. Return-to-Work Program

**A.** The University of Rochester Return-to-Work (RTW) Program (<https://www.rochester.edu/human-resources/benefits/leave-disability/return-to-work/>) is designed to help an employee to reach full recovery following illness or injury by allowing timely and appropriate treatment while he or she continues in meaningful work. The goal of the RTW Program is to return the employee to regular duty generally within 90 days or as soon as his or her medical condition permits.

**B.** RTW Program Purpose and Benefits

1. Minimizes lost time from work due to work related injury/illness;
2. Assists injured or ill employees with recovery to return to meaningful employment.

### **C. RTW Eligibility Criteria**

1. An employee enters the program if lost time occurs and he or she is unable to perform regular duties.
2. The injured or ill employee reports medical restrictions so that transitional assignments may be identified.
3. The medical provider certifies that the injured or ill employee has temporary restrictions. The medical provider releases the employee to participate in the transitional assignment.

### **D. RTW Program Procedures**

1. Employees interested in participating in the Return-To-Work Program (RTW) must provide a Work Accommodation Form (WAF) to their treating physician. The WAF is used to identify the employee's task ability and is available through HR.
  - The WAF form can be found at: <https://www.rochester.edu/human-resources/wp-content/uploads/2019/11/waf.pdf> (<https://www.rochester.edu/human-resources/wp-content/uploads/2019/11/waf.pdf>)
  - The WAF should be sent to the Return-to-Work team (Box 270025), or faxed to (585) 235-6703.
2. All medical conditions will be kept confidential. Work restrictions will be discussed with the department/unit supervisor.

### **E. Transitional Work Assignments (TWA)**

1. The Transitional Work Assignment (TWA) should be offered immediately upon the medical provider's release and whenever transitional work is available.
2. A TWA is outlined and regularly reviewed. The employee should advise his or her supervisor

and/or designated contact person of problems while performing assigned duties. The process review continues until the employee is able to resume regular duty or until the end of the program.

3. Transitional work assignments will be offered for the number of hours and days approved by the treating physician. The assignment can be less than 40 hours per week, but not to exceed 40 hours per week.
  4. The department offering the TWA will pay the wages of the RTW employee. If there is a difference in the pay between the employee's pre-accident wage and that of the TWA, the injured or ill employee will be paid in accordance with New York State Workers' Compensation laws.
  5. An employee is not obligated to return to a TWA under the Family Medical Leave Act (FMLA), however, not accepting the TWA may impact eligibility for Workers' Compensation lost time benefits.
  6. Medical treatment and/or exams must be scheduled before or after your work hours.
  7. There is no limit to the number of employees permitted to participate in the RTW program.
  8. An injured or ill employee may participate in the RTW Program up to 90 calendar days. Continuation in the program may be approved on a case-by-case basis by the RTW Manager, supervisor, and treating medical provider.
  9. An employee participating in the RTW Program must abide by the same performance criteria and work rules as all University employees, and are subject to all policies and procedures.
  10. The medical provider may release the employee from the RTW Program at any time to return to his or her regular job.
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*The University reserves the right to interpret, modify, amend, or terminate any or all of the plans at any time including actions that may affect cost sharing or covered benefits as well as benefits that are provided to current and future retirees.*

## **ABOUT THIS POLICY**

### **Policy Number**

271

### **Policy Group**

Human Resources

### **Issuing Authority**

Human Resources

### **Responsible Officer**

Kathy Miner

### **Contact Information**

[kathy.miner@rochester.edu](mailto:kathy.miner@rochester.edu) (mailto: [kathy.miner@rochester.edu](mailto:kathy.miner@rochester.edu))

## **ADDITIONAL RESOURCES**

**[Human Resources: Leave and Disability \(https://www.rochester.edu/human-resources/benefits/leave-disability/\)](https://www.rochester.edu/human-resources/benefits/leave-disability/)**

**[Return to Work: Work Accommodation Form \(https://www.rochester.edu/human-resources/wp-content/uploads/2019/11/waf.pdf\)](https://www.rochester.edu/human-resources/wp-content/uploads/2019/11/waf.pdf)**

**[Employee Incident Report Form \(http://www.safety.rochester.edu/SMH115.html\)](http://www.safety.rochester.edu/SMH115.html)**

## **RELATED POLICIES**

**[Long-Term Disability Plan \(https://www.rochester.edu/policies/policy/long-term-disability-plan/\)](https://www.rochester.edu/policies/policy/long-term-disability-plan/)**

**[Reassignment/Absence to Prevent Contagion Due to Workplace Exposure \(https://www.rochester.edu/policies/policy/reassignment-absence-to-prevent-contagion-due-to-workplace-exposure/\)](https://www.rochester.edu/policies/policy/reassignment-absence-to-prevent-contagion-due-to-workplace-exposure/)**

**[Hiring Replacements for Staff Members on an Approved Work-Related or Non-Work-Related Illness or Injury Absence \(https://www.rochester.edu/policies/policy/replacements/\)](https://www.rochester.edu/policies/policy/replacements/)**

**[Family Medical Leave \(https://www.rochester.edu/policies/policy/family-medical-leave/\)](https://www.rochester.edu/policies/policy/family-medical-leave/)**

**[Paid Family Leave \(PFL\) \(https://www.rochester.edu/policies/policy/paid-family-leave/\)](https://www.rochester.edu/policies/policy/paid-family-leave/)**

**[Vacation \(Effective 01/01/2021\) \(https://www.rochester.edu/policies/policy/vacation/\)](https://www.rochester.edu/policies/policy/vacation/)**

**Paid Time Off (PTO) (Effective 01/01/2021) (<https://www.rochester.edu/policies/policy/pto/>)**

**POLICY KEYWORDS**

**Benefits (<https://www.rochester.edu/policies/all/?filter%5Btopics%5D=306>)**