The Employer's Role:

When your Employee is Injured on the Job

State of California
Department of Personnel Administration
Workers’ Compensation Program

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Introduction

Every State department has (at least) one Return-to-Work Coordinator (RTWC) who manages your workers’ compensation program. That person is your expert. This booklet provides a summary of the State’s Workers’ Compensation Program and outlines your responsibilities in the event that one of your employees has an on-the-job injury. It will provide a generic explanation of a complex system. For specific questions, please consult with your RTWC or your department’s written policies and procedures.

Workers’ Compensation Definitions

Workers’ Compensation

The workers’ compensation system was established to provide benefits to employees who sustain a work-related injury or illness. Benefits include medical treatment, payments for lost wages, diminished future earning capacity, retraining costs, and death benefits to the employee’s dependent(s). Under workers’ compensation law, benefits are paid regardless of fault.

All State employees are covered by workers' compensation. The cost of this protection is completely paid by your department, the employer. The employees make no contribution. Benefits are tax-free and not subject to Social Security deductions.

Work-Related Injury

“Injury” is described in Labor Code §3208 as any injury or disease arising out of employment.

Example of an injury: A sprained back while lifting a heavy box at work.

Example of an illness: A skin rash as a result of exposure to chemicals or solvents used at the work site.

State Compensation Insurance Fund (State Fund)

State Fund administers workers compensation claims on behalf of the State of California, the employer. State Fund makes all liability determinations and ensures that your injured employee receives all benefits that they are lawfully entitled. State Fund offices are located throughout the state, your RTWC can direct you to the office that adjusts your department’s claims.

For office locations, forms, and more workers’ compensation information, please visit their website at:  http://www.statefundca.com/statecontracts/Index.asp
Return-to-Work Coordinator (RTWC)

The RTWC is responsible for managing the workers' compensation cases for your department, and for assisting injured employees in returning to work as soon as medically feasible. The RTWC often relies on the employee's supervisor to provide updated medical slips and to get information on the availability of transitional light duty assignments, or permanent modified duty.

Return-to-Work Meetings

The purpose of a return-to-work meeting is to bring together people concerned about an injured employee to help create a return-to-work plan. Attendees may include a facility or regional RTWC, someone from your personnel office, the State Fund claims representative, and the employee's first-line supervisor.

Transitional Duty Assignments

When injured employees have medical restrictions that prohibit returning to their regular work activities, the employer can temporarily modify the employee’s normal job or assign the employee to another position to facilitate rapid return to work. Such temporary assignments should be encouraged and allowed without loss of pay. By minimizing the disability time in this way, the injured employee can ease back into a regular work routine. Ideally, the employee will make a full recovery and return to their normal work activities. The employee's physician, the RTWC, the first-line supervisor, and the State Fund claims representative can collaborate to determine the feasibility of a transitional duty assignment.

Your Responsibilities

Before an Injury Occurs

Post the Posting Notice (SCIF e13913, e13914), or equivalent form, in a conspicuous location. The notice should contain the names and phone numbers of your employer selected physician, hospital and ambulance, as well as phone numbers for local fire, police and the Division of Workers' Compensation's Information and Assistance Officer.

As of October 8, 2010, you must also post the Guide to the State Fund Medical Provider Network for State of California Employees (e13174) near the Posting Notice.

The law requires each employer to provide a safe place of employment. Each department is required to have a comprehensive Injury and Illness Prevention Program (IIPP) (LC §6401.7). The IIPP focuses on preventing the types of injuries and illnesses most common in your work environment. All supervisors are expected to know the elements of the IIPP and to train their employees on the procedures to be followed.
Contact your department’s Health and Safety Officer to obtain a copy of your IIPP. Despite efforts to prevent injuries, they still occur. Knowing what to do when an injury occurs gives your employees assurance that they will be cared for properly and guarantees that you will meet all required timeframes.

**After An Injury Occurs**

Per Labor Code §5401, you must provide a *Workers’ Compensation Claim Form (DWC 1)* & *Notice of Potential Eligibility (e3301)* to your employee within one working day.

You may also provide the employee with the *I’ve Just Been Injured on the Job, What Happens Now?* brochure available on the DPA website at: [http://www.dpa.ca.gov/benefits/workers-comp/main.htm](http://www.dpa.ca.gov/benefits/workers-comp/main.htm)

For injuries requiring immediate emergency assistance, dial 911. If needed, have a trained individual administer first aid or CPR. If emergency treatment is not needed but it appears that medical treatment is required, arrange for treatment by the physician listed on the *Posting Notice* (e13913, e13914). An appointment for non-emergency medical treatment must be made for the injured employee within three working days from your department’s notice of an injury, or one working day of receipt of the *Workers’ Compensation Claim Form (DWC1/e3301)*.

Note: If you are referring the injured employee to your employer selected physician, then you must provide him or her with the *Guide to the State Fund Medical Provider Network for State of California Employees* brochure (e13174).

If an employee has pre-designated a treating physician or medical group, the employee has the right to seek medical treatment with that physician. The employee must have given the department written notification of the name of the physician prior to the date of injury. It is the employer’s responsibility to arrange safe transportation or accompany the injured employee to this first doctor visit.

The doctor must examine the employee, submit a doctor’s first report of occupational injury, and comment on your employee’s ability to return to work. Your description of the employee’s normal duties, or of alternate "transitional" or "light duty" work that may be available, may help the doctor make a decision. By planning ahead and having this information readily available, you may save the employee lost time from work, assist in conserving sick leave or other leave credits, and reduce your workers’ compensation costs.

**Reporting the Injury**

There are strict timeframes for reporting occupational injuries to State Fund. The completed *Claim Form (DWC1/e3301)* must be submitted to State Fund within one calendar day of receipt. The *Employer’s Report of Occupational Injury or Illness*...
(e3067) must be submitted to State Fund within five calendar days of your knowledge of the injury. It is important that you contact your RTWC immediately to start this process. You may also refer to the *Workers’ Compensation Claims Kit* for instructions on how to complete these forms. To obtain a copy of this publication, contact the Department of Personnel Administration’s Workers’ Compensation Program at (916) 445-9760. You may also access this kit online at: [http://www.dpa.ca.gov/benefits/workers-comp/main.htm](http://www.dpa.ca.gov/benefits/workers-comp/main.htm)

**Maintaining Contact with Your Injured Employee**

It is important to maintain contact with any employee who is injured on the job. Support and encouragement during the period of disability will help the employee feel connected to the workplace and will contribute to the employee’s desire to return to work as soon as it is medically feasible.

Disabling injuries can cause acute family and financial problems which can interfere with the employee’s recovery. Your objective should be to maintain a support network for the employee. If your employee is too ill to maintain direct contact, work with their representative to ensure that their needs are met to the best of your ability. Show that you are interested in their welfare and that you sincerely want to do what is best for the employee. Make the employee feel important and needed by keeping him or her abreast of current events in the workplace. Encourage co-workers to maintain ongoing contact with the injured worker as well.

**Workers' Compensation Benefits**

**Medical Care**

Treatment that is reasonably required to cure or relieve the effects of the injury is paid for by the employer. This includes medical, surgical, chiropractic, acupuncture, and hospital treatment, including nursing, medicines, medical and surgical supplies, crutches and apparatus, including orthotic and prosthetic devices (LC §4600).

Medical treatment will be based on the American College of Occupational and Environmental Medicine’s Occupational Medicine (ACOEM) Guidelines until the Administrative Director publishes the official Medical Treatment Utilization Schedule per LC §5307.27.

**Temporary Disability Benefits**

The State offers various types of temporary disability benefit programs under workers' compensation: Temporary Disability, Industrial Disability Leave, Enhanced Industrial Disability Leave, and Labor Code Section 4800/4800.5 Time.
The RTWC or personnel specialist can provide detailed benefit information to the injured employee. Some departments encourage first-line supervisors to participate in benefit information counseling, so that the supervisor is better prepared to assist the employee.

Before benefits start, most disabled employees will serve a waiting period of three calendar days. The waiting period is waived if the employee is hospitalized, if the injury was caused by a criminal act of violence, or if the employee is disabled more than 14 calendar days.

TEMPORARY DISABILITY (TD) payments start on the fourth day of medically approved absence from work due to a work-related injury. TD is based on two-thirds of gross pay at the time of injury. The Legislature determines the minimum and maximum benefit rates. There is a limit of two years of TD paid per claim. State employees are allowed to supplement TD payments with accrued leave credits up to the amount of their full net pay.

INDUSTRIAL DISABILITY LEAVE (IDL) is a salary continuation program that is paid in lieu of TD for active members of the California Public Employees’ Retirement System (CalPERS) or the California State Teachers’ Retirement System (CalSTRS). IDL is available to employees for 52 weeks within a two-year period from the first day of disability. IDL payments are based on the employee’s full net pay for the first 22 working days of disability and after that are calculated at two-thirds of the employee’s gross pay. All excluded employees and rank-and-file employees in all Bargaining Units (except Bargaining Unit 5) can supplement IDL payments with accrued leave credits up to the amount of their approximate full net pay.

ENHANCED INDUSTRIAL DISABILITY LEAVE (EIDL) is an augmentation to the IDL program that provides "full net pay" for an eligible employee for one to three years. Check the specific provision of the memorandum of understanding that applies to your employee to determine eligibility and the length of time the benefit may be provided.

LABOR CODE SECTION 4800/4800.5 is a special benefit available only to eligible peace officers who work for the Department of Justice and the California Highway Patrol. It provides up to one year of full pay for injuries incurred in the line of duty.

**Permanent Disability Benefits**

Permanent Disability (PD) payments are made to compensate an injured employee for their diminished future earnings capacity because of permanent impairments or limitations resulting from the injury (LC §4061). An injured employee can receive PD payments and return to work full duty.
However, the PD payments can be reduced by 15% if the employer offers the injured employee regular, modified, or alternative work within 60 days of their Permanent and Stationary (P&S) date. The P&S date is clearly specified in the treating or evaluating physician’s report.

The modified or alternative work must pay at least 85% of the date of injury salary, last at least 12 months, be within a reasonable commuting distance, and accommodate the work restrictions. The 15% reduction takes place from the date of the offer and affects future payments. If the employer does not offer modified or alternative work then future PD payments are increased by 15% after the 60 day period has expired.

Supplemental Job Displacement Benefit (SJDB)

The SJDB is a voucher provided to the employee after their claim is finalized for a retraining or skill enhancement program at a state approved or accredited school. The voucher can range in value up to $10,000 based on the level of an injured employee’s permanent disability and can be used towards tuition, fees, books, vocational rehabilitation counselor services, and other related expenses.

To be eligible, an injured employee must not have returned to work within 60 days after the temporary disability period ends and have a permanent disability. However, the employer is not liable for the SJDB if they offer the injured employee regular, modified or alternative work within 30 days of their temporary disability period. The modified or alternative work must pay at least 85% of the date of injury salary, last at least 12 months, be within a reasonable commuting distance, and accommodate the work restrictions.

Death Benefits

Benefits may be paid to surviving dependents if a work-related injury leads to death within 240 weeks of the original day of injury. Benefits are paid in weekly installments. Minor children are presumed to be total dependents and continue to receive the weekly benefit until they reach the age of 18. However, dependent children who are mentally or physically incapacitated will continue receiving benefits for life. Additionally, the employer is responsible for providing reasonable burial expenses not to exceed $5,000.00 (Labor Code §4701).

State employees who are members of CalPERS are entitled to various benefits in the event of death under the Government Code and any applicable memorandum of understanding. Since benefits vary, an employee's death must be reported to CalPERS for an actual determination of what death benefits will be paid in each case.
Supervisor’s Checklist

1. Know the names and phone numbers of your contacts for questions related to employee safety and workers’ compensation. (Fill in the attached contact sheet.)

2. Know your department’s Injury and Illness Prevention Plan (IIPP).

3. Have an emergency treatment plan to ensure that any employee who is injured or ill receives prompt and proper medical.

4. Read the Posting Notice (e13913,e13914) or equivalent form and become familiar with your department’s chosen medical provider. It is the employer’s responsibility to authorize the first visit and either arrange transportation or accompany the injured employee to the appointment.

4. Keep your employee’s job descriptions within easy reach and send it with your employees to the doctor. It is also beneficial to provide the doctor with any available “transitional” or “light duty” job descriptions as well.

5. Provide the injured employee with a Workers’ Compensation Claim Form (DWC 1) & Notice of Potential Eligibility (e3301) within 24 hours of knowledge of the injury or illness.

6. Complete the Employer Report of Occupational Injury or Illness (e3067) immediately for submission to State Fund within five days of knowledge.

7. Maintain regular contact with your employee during their recovery period. Encourage coworkers to do the same.
Contacts

Return-to-Work Coordinator: ________________________________
Phone: ___________________________________________________

Personnel Benefits Specialist: ________________________________
Phone: ___________________________________________________

Health and Safety Officer: ________________________________
Phone: ___________________________________________________

State Fund Representative: ________________________________
Phone: ___________________________________________________

Department’s Medical Provider: ________________________________
Phone: ___________________________________________________

Date: __________________