
Policy Number: 103.241
Title: Workers' Compensation
Effective Date: 4/2/19

PURPOSE: To define procedures for work related injuries, illnesses, and incidents, consistent with state law, and to assist employees with returning to work depending on their physical and mental capabilities.

APPLICABILITY: All employees

DEFINITIONS:

Essential functions – the fundamental job duties of a position.

Injured on duty (IOD) pay – defined in collective bargaining agreements/plans.

Managed care provider – selected by the State of Minnesota, CorVel offers clinic choices for each work location/facility to provide state employees with all necessary medical treatment for work-related injuries and illness. The 24 hour phone line for CorVel is 612-436-2542 or 866-399-8541.

Maximum medical improvement (MMI) – the point at which the medical condition of an injured worker has stabilized, and further functional improvement is unlikely, despite continued medical treatment or physical rehabilitation.

Nurse triage – a 24/7/work injury nurse line through CorVel to assist injured workers in determining if medical attention is needed.

Occupational health care provider – hospital or clinic with an established protocol for post-exposure evaluation and treatment.

Return to work process – a prescribed process that provides for the review of pertinent facts and information by designated management representatives, to determine if individual employees may or should return to work.

Suitable job – a job available to an injured employee who is unable to return to his/her previous position that provides an economic status or equivalent/similar to pre-injury position – including wages, benefits, seniority and chances for advancement and/or promotion.

Telehealth – an optional method to call a medical provider, from a computer and from most mobile devices, to receive medical care electronically.

Treatment professional – professional authorized by law to provide medical or mental health care within the United States and who is in good standing in the profession.

Work-related injury/illness – an injury or illness arising from and during the course of employment due to causes in excess of the hazards normally found in employment. Corrections officers are also covered for occupational diseases as specified in Minn. Stat. § 176.011, subd. 15 (b).

PROCEDURES:

A. Employee responsibilities

1. The employee must immediately inform the employee's supervisor of any work-related injury/illness sustained while on duty, regardless of the degree of seriousness, or of an incident which posed a possible threat or risk for injury or illness. If the supervisor is not available, the employee must inform the acting supervisor, designee, or watch commander.
2. Employees are encouraged to contact the CorVel nurse triage phone line prior to medical attention, if they are uncertain if medical care is needed, or to obtain direction on the type of care needed.
 - a) Call 844-235-2055 for any non-emergent work injuries or for injuries that are minor and possible medical attention may be needed. Next day follow-up calls may be provided to the employee.
 - b) This is intended to help the injured worker get early or immediate care; to address medical concerns; and to provide the appropriate level of care.
 - c) The employee should provide the work location when calling (State of Minnesota or the DOC facility work location).
 - d) The nurse triage phone line staff might provide a referral to telehealth.
3. If seeking medical attention, the employee is encouraged to contact the employee's supervisor and request an Injured Worker's First Fill Prescription Information Sheet. This is available in the Worker's Compensation Program Employee Information Packet, provided to the employee by the supervisor, or by contacting the human resource management (HR) office.
4. Employees are encouraged to seek medical attention from telehealth or from a managed care provider.
 - a) Managed care providers are posted on bulletin boards and may be located by contacting the HR office or the managed care provider directly.
 - b) If outside emergency medical treatment is needed, a designated staff member must immediately assist the employee in obtaining the necessary care.
 - c) The employee must notify the managed care provider immediately if admitted to an overnight stay at the hospital, if immediate surgery is required, or within 48-hours of seeking medical attention if not admitted.
 - d) The employee may contact the HR office, his/her supervisor, or other party to request assistance with the notification process to the managed care provider.
 - e) Access to telehealth is gained through the nurse triage phone line. Injured workers may call telehealth, from a private space, shortly after an incident while remaining at work. A face-to-face video conference is held with a medical provider. The telehealth provider can send prescriptions electronically to the injured worker's designated pharmacy.

5. In cases of potential blood exposure, the employee should seek medical attention immediately, as outlined in Policy 105.170, “Bloodborne Pathogens,” to ensure proper treatment, preferably from the occupational health care provider. Obtain necessary forms from the supervisor/watch commander prior to seeking medical attention.
6. The employee must contact CorVel prior to seeking medical attention from a non-managed care provider.
7. The employee must complete the required forms on the date of injury or as soon as possible thereafter and provide them to the employee’s supervisor.
 - a) All forms must be completed and submitted within 24-hours, except in extraordinary or emergency circumstances.
 - b) The forms include:
 - (1) Information and Privacy Statement (link attached);
 - (2) Employee Statement Regarding the Injury/Illness/Incident form (link attached);
 - (3) Leave Supplement form (link attached); and
 - (4) Incident Report (link attached) (required for facility employees).
 - c) If applicable, the Department of Public Safety Crash Records Request form for personal vehicles may also be needed.
8. The employee must inform a supervisor and HR if any work is missed or medical attention is sought due to a work related injury/illness.
9. If work is missed or medical attention is sought, the employee must provide a return to work release from the doctor to HR.
 - a) Approval must be received from HR prior to returning to work.
 - b) Medical documentation required includes the duration and reason for the leave.
 - c) Medical documentation is also required for each medical appointment and change in restrictions.
10. The employee must inform the health care provider to submit workers’ compensation bills to the managed care provider, and provide the Managed Care ID card to the medical provider. If the employee is seen for a possible exposure incident, the bills should be submitted to the regional HR office at the employee’s work location pursuant to Policies 105.170, “Bloodborne Pathogens.”
11. The employee must record any hours or days missed and/or medical appointments during work hours on the employee’s timesheet. The employee must:
 - a) Record which days are workers’ compensation and time missed due to the injury (lost time) or for medical appointments;
 - b) Include the total hours missed in the comment section of the timesheet for each day missed and/or appointment (e.g., workers’ compensation – (#) hours on (date) for (what – e.g., medical appointment)); and

- c) Refer to and follow Policy 103.240, "Return to Work Process."
- 12. The employee must self-monitor and not exceed any work restrictions that are in place.
- 13. If an employee feels that the employee's work exceeds the work restrictions, the employee must contact the employee's supervisor or HR.
- 14. The employee should request a leave of absence as indicated by the appropriate contract plan, if needed.
- 15. The employee must provide the safety administrator/safety director medical treatment information necessary for determination of Occupational Safety and Health Administration (OSHA) record keeping status of the work-related injury/illness.

B. Supervisor's responsibilities

The supervisor must:

- 1. Inform the HR office and safety director/administrator of all work related injuries/illnesses on the date of injury or on the date the facility/work location was notified of the injury/illness.
- 2. Ensure a designee is in place to respond to work related injuries/illnesses when away from the work location.
- 3. Immediately notify the HRM office and safety director/administrator within the timeframes mentioned below in the case of serious, life threatening injury, multiple injured employees in a single event, or death.
 - a) Safety must notify the OSHA, of all work related:
 - (1) Fatalities within eight hours;
 - (2) Inpatient hospitalizations within 24 hours;
 - (3) Amputations within 24 hours;
 - (4) Losses of an eye within 24 hours.
 - (5) Refer to Policy 105.125, "A Workplace Accident and Injury Reduction Program (AWAIR)."
 - b) HR staff must notify the Department of Administration (Admin) of any serious injuries or workplace fatalities within 24 hours and provide all required workers' compensation forms.
 - (1) The Department of Labor and Industry (DOLI), within this same 48-hour period.
 - (2) If HR staff are not available, the supervisor/watch commander must contact the Department of Administration at
 - (a) 651-201-3020; or
 - (b) 651-201-3013; and
 - (c) Provide notification to the HR office.
- 4. Provide the employee with a copy of the workers' compensation Information and Privacy Statement form and ask the employee to review and sign the statement.

5. Provide the employee with the Employee Statement Regarding the Injury/Illness/Incident form and the Leave Supplement form and ask that the forms be completed.
6. Instruct facility employees to complete an Incident Report.
7. Complete the required information on the following forms or ensure the acting supervisor/designee/watch commander has completed the:
 - a) Injury/Illness/Incident Data form (link attached); and
 - b) Agency Claims Investigation form (link attached).
8. Complete a full, impartial, and accurate investigation of the injury/illness by using the Agency Claims Investigation form.
 - a) The investigation includes an inspection of the worksite where the injury occurred, statements from the injured employee, witness reports, and future follow-up/corrective actions.
 - b) When necessary, the safety director/administrator assists with the process.
9. Document all witness statements and contact information including name and phone number.
10. Collect all workers' compensation forms and submit originals to HR within 24-hours from the time of injury. This includes the following documents:
 - a) Information and Privacy Statement;
 - b) Leave Supplement form;
 - c) Employee Statement Regarding the Injury/Illness/Incident form;
 - d) Incident Report (required for facility employees and all witnesses);
 - e) Incident/Injury/Illness Data form;
 - f) Agency Claims Investigation form; and
 - g) Department of Public Safety Crash Records Request (for personal vehicles, if applicable).
11. Send a copy of the Incident/Injury/Illness Data form, the Agency Claims Investigation form, and the Employee Statement form to the safety director/administrator.
12. Provide the employee with the Workers' Compensation Program Employee Information Packet which includes:
 - a) Notice of enrollment in certified managed care plan letter;
 - b) Letter for the health care provider;
 - c) Certified managed care plan instruction brochure;
 - d) Managed Care ID card instructions;
 - e) CorCareRX pharmacy benefit letter;
 - f) Injured Workers' First-Fill Prescription Information Sheet;
 - g) Report of Workability/Fitness for Duty Certification;
 - h) A Guide to LifeMatters Services (Employee Assistance Program (EAP)); and
 - i) Nurse triage (24/7 work injury nurse line) reference sheet.
13. Direct the employee to the nurse triage, if not-emergent medical care may be needed. Then can refer the employee to telehealth (virtual medical care), or provide the employee with information about the managed care provider.

- a) Refer to the workers' compensation managed care clinic list on the iShare intranet human resources webpage on workplace posters, or contact HR.
 - b) Inform the employee to provide a workability notice to HR.
- 14. Inform HR if an employee misses any work or seeks medical attention as soon as notified. Inform the employee to provide HR with a workability update prior to a return to work, when restrictions change, and for each appointment.
- 15. Contact the managed care provider immediately if the injured employee is treated in an emergency room, is admitted to an overnight stay at a hospital, or requires immediate surgery.
- 16. Work with HR and payroll to complete the employee's timesheet. Some considerations include:
 - a) Time reporting on the date of injury;
 - b) Qualifications for the Family Medical Leave Act (FMLA);
 - c) Leave supplementing;
 - d) Unpaid leave; and
 - e) Injured-on-duty (IOD) pay.
- 17. Any days missed and/or medical appointments for workers' compensation, during scheduled work hours, must be recorded on the employee's timesheet and communicated to HR (e.g., "workers' compensation - the date, number of hours missed from work, and why (time lost or medical appointment). Print a copy of the timesheet, sign and date it, then send copies of timesheets to HR for any time lost or for medical appointments regarding the workers' compensation claims.
- 18. Work in conjunction with the safety director/administrator to identify, secure and isolate any equipment that may have contributed to the injury.
- 19. For motor vehicle crashes with personal vehicles – provide employee with the Department of Public Safety Crash Records Request form and direct the employee to complete this form.
 - a) The employee must submit this form to the HR office within five days.
 - b) HR must provide the completed form to public safety within ten days of the crash.
- 20. For motor vehicle crashes with a state vehicle, the employee must notify the employee's supervisor and DOC finance for instructions. (See also Policy104.4615, "Use of State Vehicles.")
- 21. Maintain contact with the employee, as deemed appropriate and necessary, for the duration of the time the employee is eligible for workers' compensation. If the injury/illness results in lost time from work, contact the employee within five working days following the injury/illness.
 - a) If the employee is hospitalized, contact either the employee or the person noted as the emergency contact as soon as possible after the injury/illness to maintain communication.
 - b) Initiate periodic contact and inform HR of any pertinent or new information.

- c) Maintain communication between the payroll office and the employee regarding leave balances and payment status.

- 22. If the employee does not miss work or seek medical attention initially, but does at a later time, notify the HR office immediately.
- 23. Work with HR to review any restrictions that may be in place and consider possible accommodations and/or transitional work. Refer to and follow Policy 103.240, "Return to Work Process."
- 24. Provide the employee with ongoing task assignments within restrictions identified on the most current workability report.

C. Witness responsibility:

- 1. Complete an Incident Report and provide information to the injured employee's supervisor concerning the nature and extent of the injury/illness.
- 2. Cooperate with all parties on the investigation of the claimed injury/illness.
- 3. Respond to the claim specialist, if contacted for questions.

D. Health services responsibilities

- 1. The facility's health services staff, if available, provides first aid.
- 2. All provided treatment must be documented on an incident report and submitted to the HR office within 24-hours.

E. HR staff must:

- 1. Provide information on nurse triage and telehealth, and regarding clinics/hospitals authorized to provide care for work-related injuries/illnesses.
 - a) The managed care provider clinics are posted, along with general information on the managed care provider, on iShare.
 - b) The list of medical providers for post exposure evaluation and treatment is also posted in the Bloodborne Pathogen Post-Exposure Packet, which is attached to Policy 105.170, "Bloodborne Pathogens."
- 2. As soon as possible after the reported injury/illness, initiate contact with the employee and the employee's supervisor to provide information concerning the workers' compensation process, the employee's rights and responsibilities and other related procedural information. Work with the supervisor to maintain contact with the employee, as deemed appropriate and necessary, for the duration of the workers' compensation process.
- 3. Verify that all necessary workers' compensation forms have been received and completed. Refer to Procedure B. 10., above.
- 4. Send all required information to Admin workers' compensation division within 48 hours of the employee's report of a work-related injury/illness when the employee has lost time from work or has sought medical attention.

5. Contact Admin within 48-hours of any serious or fatal injuries. Admin staff then notify DOLI within this required timeframe.
6. Follow and complete the Agency Workers' Compensation Coordinator Claim Management checklist from Admin. Enter all work injury/illness claims into the state's workers' compensation system.
7. Notify payroll of all workers' compensation claims with lost time and/or medical and provide the date of injury. Notify the safety director/administrator of all workers' compensation claims.
8. Inform the supervisor and payroll of the employee's qualifications for FMLA, leave supplementing, unpaid leave, and IOD pay. (The regional human resource director (RHRD) works with the appointing authority to determine if the employee qualifies for IOD pay.)
9. Provide notification to the supervisor, payroll and safety if the employee is informed by the claim specialist at Admin that the workers' compensation claim is denied.
10. Review workability slips prior to the employee's return to work.
 - a) Provide all workability slips to the workers' compensation program at Admin on the date received or as soon as possible, and immediately inform the claim specialist of all work status changes (e.g., return to work, absent from work, full-time to part-time status, etc.) to avoid over and under payments.
 - b) Refer to and follow Policy 103.240, "Return to Work Process."
11. Work with payroll staff to obtain the most current copy of the employee's timesheets with references to workers' compensation. Include the employee's current hourly rate(s) of pay, including any changes in hourly rate, on each timesheet stating workers' compensation activity. Submit copies of each timesheet to the workers' compensation program at Admin immediately to avoid over and under payments.
12. If the employee does not miss work or seek medical attention initially, but does at a later time, notify the claims specialist, safety director/administrator, and payroll immediately.
13. Notify the claims specialist, safety director/administrator, and payroll of lost time, changes in workability status, and return to work date.
14. Retain all forms and medical information in the employee's file.

F. Payroll procedures

1. An employee incurring a work-related injury/illness that requires time away from work is paid the employee's regular rate of pay for the remainder of the scheduled workday on the date of injury, without a deduction from vacation and sick leave accruals, when medical documentation is provided to HR.

2. An employee who incurs a work-related injury/illness, and who remains off work with medical documentation, may elect to use accumulated sick leave and subsequent vacation leave or compensatory time while a determination of eligibility is in progress.
 - a) If the employee is issued a benefit check from the workers' compensation program at Admin covering the waiting period, the amount of that check is deducted from a subsequent payroll check(s) that DOC pays the employee; and
 - b) The equivalent leave hours used are restored to the employee's leave accrual balance in accordance with Minn. Stat. §176.021, subd. 5, which requires that the total compensation paid to the employee from Admin and DOC together do not exceed the employee's normal gross wage.
3. An employee authorized by the RHRD and facility or work location appointing authority to receive IOD pay is compensated according to the applicable collective bargaining agreement/plan.
4. An employee who receives workers' compensation benefits may choose to supplement the workers' compensation benefit check with paid leave.
5. Accrued sick leave must be exhausted before vacation leave or compensatory time may be used.
6. Workers' compensation benefits supplemented by paid leave accrues sick and vacation leave based on the combined total of the number of hours compensated by workers' compensation, the number of hours of paid leave, and/or regular hours worked.
7. If an employee returns to work on a part-time basis and also receives a partial workers' compensation benefit, the leave accrual is based on the combined total of hours worked and the number of hours the workers' compensation benefit represents. If the employee chooses not to supplement the workers' compensation benefit for hours not worked, the leave accrual is prorated.
8. When workers' compensation benefits are not supplemented, the employee is placed on unpaid leave and sick/vacation leave does not accrue.
9. If an overpayment has been made (e.g., the workers' compensation check plus the payroll check for the same payroll period is above the employee's normal gross wage and an adjustment cannot be made in the employee's subsequent payroll check(s)), an employee may be required to return a workers' compensation check.

INTERNAL CONTROLS:

- A. HR retains forms and medical information in the employee's file.
- B. Any injury or incident that is reported and/or results in an employee's lost work time and/or if the employee seeks medical attention are recorded in the state's worker's compensation database.
- C. Employee lost time is recorded as worker's compensation related on the employee payroll system at the end of each payroll period.

REFERENCES: Minn. Stat. §§ [176.011](#), subd. 15 (b) [176.021](#)
[Occupational Safety and Health Administration Standards](#)
[All applicable labor agreements/employee plans covering agency employees](#)
[Policy 103.240, “Return to Work Process”](#)
[Policy 103.270, “Family and Medical Leave Act”](#)
[Policy 105.125, “A Workplace Accident and Injury Reduction Program \(AWAIR\)”](#)
[Policy 105.170, “Bloodborne Pathogens”](#)
[Policy 300.300, “Incident Reports”](#)
[Policy 104.4615, “Use of State Vehicles”](#)
[Minnesota Department of Administration, Workers’ Compensation Procedures](#)

REPLACES: Policy 103.241, “Worker’s Compensation,” 12/5/17.
All facility policies, memos, or other communications whether verbal, written, or transmitted by electronic means regarding this topic.

ATTACHMENTS: [First Report of Injury/Illness/Incident Data form](#) (external Administration form)
[Agency Claims Investigation form](#) (external Administration form)
[Information and Privacy Statement](#) (external Administration form)
[Leave Supplement Form](#) (external Administration form)
[Employee Statement Regarding the Injury/Illness/Incident form](#) (external Administration form)
[Department of Public Safety Crash Records Request form](#) (external Administration form)
[Incident Report](#) (300.300A)

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