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## Information for employees of self-insuring employers

If you are injured on the job, you may be entitled to workers' compensation benefits. Your first step to obtaining these benefits is to report your injury to your self-insuring employer. This enables your employer to complete an accident report. If you lose eight or more calendar days as a result of your injury, you must complete the *First Report of an Injury, Occupational Disease or Death* (FROI) form with your employer. You can get this form from your employer or online at [www.bwc.ohio.gov](http://www.bwc.ohio.gov).

Many employers are not self-insured and do not pay workers' compensation benefits directly to their employees. If you work for such an employer, this information will not apply to you. Check with your employer or BWC on how to file your workers' compensation claim.

### Timely reporting

Report immediately any accident to your employer. By responding quickly to any inquiries from your employer, you will speed up the decision on your claim and payment. Keep your employer informed of your recovery and anticipated return-to-work date. Be sure to tell your doctor that your injury is work related.

### The claims process

Your employer must keep a record of all employee injuries and has 30 days to notify BWC of all injuries that result in an injured worker being off work for eight or more calendar days as well as all contested or denied claims.

Once we receive a copy of your application, we will notify you of your assigned claim number. Use this number whenever you contact us, and give it to all of your doctors treating the work-related injury.

If your employer certifies the FROI, your employer agrees your injury should be allowed. If your employer is unsure of the facts and/or does not agree with the facts of the claim application, your employer may reject your claim. Your employer will inform you of the decision.

If your claim is rejected, we will forward your claim to the Industrial Commission of Ohio (IC). The IC is a separate agency from BWC and is responsible for hearing all disputed claims. The IC will determine whether your disputed injury or occupational disease is compensable. The IC will schedule a hearing approximately 45 days from the date it receives your claim file.

While a claim is contested, the employer is not required to pay compensation benefits.

### Medical payments

If your employer allows your claim, the employer will pay for medical services directly related to your workplace injury. Except for emergency situations, your employer must approve certain medical services in advance, such as hospital or nursing home stays, physical therapy, nursing services and dental work. Your employer must approve or deny a request for treatment from your attending physician within 10 days of receipt of the request.

Self-insuring employers may require the use of generic drugs if they have a program in place that uses a network of pharmacies. Check with your employer prior to having any prescriptions filled for your allowed condition.

To be considered for payment, you must file medical bills with your employer within one year of the date you were treated. Your employer must pay medical bills within 30 days of their submission, unless he or she contests the bill.

If your employer questions a medical bill, the employer may request additional medical documentation from your attending physician. Once your employer receives the additional information, the employer has another 30 days to pay or deny the medical bill.

Should your employer deny a medical bill, we require the employer to notify you in writing. You can then file a *Motion (C-86)* online to request a hearing before the IC. To do so, log onto [www.bwc.ohio.gov](http://www.bwc.ohio.gov), click Injured workers, then Forms. This form is also available from your employer or from your local BWC customer service office.

### Benefit payments

If you cannot return to work for eight or more days, your employer will pay a percentage of the wages you lose, as well as related medical expenses.

Temporary total is usually the first form of compensation awarded during your recovery from a work-related injury. Temporary total begins on the eighth calendar day following the accident and is issued on a biweekly basis. If you are off work for 14 consecutive days, your employer must also pay you for the first seven days you missed work.

Temporary total is awarded based on medical evidence from your attending physician, furnished on a *Physician's Report of Work Ability (MED-CO-14)*. You must also submit a *Request for Temporary Total Compensation (C-84)* to ensure the continuous payment of compensation.

Your weekly rate of compensation is based upon your wages earned at the time of injury. Your weekly benefit rate cannot exceed the statewide average weekly wage (AWW) for the year in which you were injured.

For the first 12 weeks of missed work, you will receive 72 percent of your full weekly wage (FWW). If you sustained an injury on or after Oct. 20, 1993, your employer will issue your first 12 weeks of compensation at the rate of 72 percent of your FWW or 100 percent of your net take home weekly wage, whichever is less.

After 12 weeks of missed work, you receive temporary total at the rate of 66-2/3 percent of your average weekly wage.



## **BWC self-insured department**

Online services, including the ability to update your personal claims information, check the status of your claim and find BWC forms are available 24 hours a day.

BWC's self-insured department monitors the activity of all self-insuring employers in Ohio to ensure all workers' compensation benefits are paid fairly, promptly and in accordance with Ohio's laws. You can contact the department by calling 1-800-OHIOBWC and following the prompts or by emailing [SIINQ@bwc.state.oh.us](mailto:SIINQ@bwc.state.oh.us). While it is necessary to first contact your employer with any questions you may have regarding your claim, the self-insured department is available to address your specific questions. The self-insured department also accepts and processes complaints filed against self-insuring employers. The form, *Filing of an Allegation Against a Self-Insured Employer* (SI-28), is available at [www.bwc.ohio.gov](http://www.bwc.ohio.gov).

However, if your attending physician returns you to work with restrictions you may be eligible to receive wage loss compensation. Wage loss is payable in claims when you suffer a reduction in earnings as a direct result of the restrictions caused by the allowed conditions in the claim. Wage loss is payable in medical-only and lost-time claims, with a date of injury or diagnosis on or after Aug. 22, 1986. This includes returning to work with your same employer to different job duties, less hours and less pay resulting from the related restrictions or to a different employer. Your employer awards wage loss based on medical evidence from your attending physician, furnished on a *Physician's Report of Workability* (MEDCO-14) or similar form. These periodic reports support your continued entitlement to benefits. Payment of wage loss compensation can begin the day after the date of injury.

Your employer pays wage loss at 66-2/3 percent of the difference between the AWW (or greater of FWW/AWW if the date of injury is prior to May 15, 1997) and the injured worker's present earnings.

## **Rehabilitation services**

Vocational rehabilitation is the process of restoring the vocational functioning of a worker who experiences an industrial injury or occupational disease. Upon referral, a self-insuring employer will determine whether the injured worker is eligible for vocational rehabilitation services using established criteria. If the injured worker is eligible, the self-insuring employer will provide rehabilitation case management services equal to or greater than BWC. In many cases the vocational plan will include payment of living maintenance or living maintenance wage loss, or wages in lieu of compensation (i.e., salary continuation) directly to injured workers while they are participating in a vocational rehabilitation plan.

## **General information**

BWC requires your self-insured employer to post notices of his/her self-insuring status indicating the location in the plant(s) for the filing of a claim, and the job title and department of the employees designated to be the person(s) responsible for the processing of the workers' compensation claims.

The self-insured employer is required, upon request, to make your claim file available for review at a reasonable place and time (not to exceed 72 hours). You or your representative are entitled to one copy of your claim file free of charge. The employer may charge a nominal fee for subsequent copies.

## **Questions?**

Visit our website at [www.bwc.ohio.gov](http://www.bwc.ohio.gov), or call your local customer service office or 1-800-OHIOBWC.