# WORKERS' COMPENSATION EMPLOYEE RESPONSIBILITIES AND INFORMATION

 Report ALL incidents and accidents as soon as possible to your supervisor (or his/her designee in the event of absence), preferably by the end of the shift, and <u>complete a Notice of Injury or</u> <u>Occupational Disease (C-1) Form within seven (7) days of the incident/accident.</u>

**NOTE:** The C-1 Form must be completed and submitted to your supervisor (or designated person) unless immediate medical attention is sought. This form serves as a record in the event that medical treatment is sought at any future date related to the incident or accident. You will receive a copy and your supervisor will retain a copy. The Insurer is required to deny a claim for injuries if this C-1 Form is not completed within 7 days of the incident/accident. (NRS 616C.015).

- 2. If immediate medical treatment is needed, when practical, you must:
  - Notify your supervisor and receive information in regard to procedures and forms that must be completed.
  - Complete a Claim for Compensation form (C 4) at the treating physician's office.
  - Return the completed Claim for Compensation form (C 4) to your supervisor or designated organization representative within 24 hours after each visit if possible, but no later than 3 full calendar days.
- 3. Temporary Modified Duty OR Transitional Duty:
  - If your Health Care Provider (HCP) indicates that you have temporary physical/mental restrictions that do not allow you to perform all of your regular job duties, you may be assigned modified duties, as appropriate.
  - If offered transitional duty because you cannot perform a majority of your regular essential functions, either transitional duty that meets your HCP's restrictions will be assigned within your department or an appropriate transitional assignment will be located within the organization. If you receive transitional duty assignment, you will receive your normal wages and benefits. Wages will be pro-rated if less than the normal hours/day worked pre-injury. Transitional duty will last until whichever of the following occurs first:
    - You are released to full duty;
    - Your claim for workers' compensation benefits is denied;
    - Your HCP indicates you have permanent restrictions preventing you from returning to your regular position.
    - > Appropriate transitional or modified tasks are no longer available.
    - Ninety consecutive calendar days have elapsed from the acceptance of the temporary assignment. (NOTE: There might be special extenuating circumstances that could apply.)
- 4. Employees must respond to either modified duty job offer or transitional duty assignment with 24 hours when possible, but no later than 3 business days. Exceptional circumstances will allow up to 7 business days for a response. Please note that workers' compensation benefits could be discontinued if the employee does not accept the modified or transitional duty assignment. However, employees may elect to utilize additional benefits if eligible under the Family Medical Leave Act.

- 5. If you are not released for any type of modified or transitional duty assignment, or if your temporary assignment has expired, you must:
  - Maintain regular contact with your supervisor (or Organization's designated person, HR, etc.) as agreed upon.
  - Provide the completed Occupational Health Progress Report by your HCP after each appointment to your supervisor (or designated person) unless other written arrangements are made. This will constitute your medical leave authorization. Only this form, or similar form with required information will be accepted as documentation of authorized medical leave.
  - Select leave choice option as appropriate.
  - Provide the organization (HR/supervisor) with current address and phone number at all times.
  - If an employee is absent due to a work related injury for more than 5 working days, he/she may qualify for compensation at the rate of 66 2/3 of their salary for the period of absence.
- 6. Permanent Physical Limitations: If you are released to work, but your HCP indicates that you will have permanent physical limitations that will not allow you to perform the essential functions of your regular position, and changes or accommodations cannot be made, you will be assigned a Vocational Rehabilitation Counselor. Your employer, HCP, and Vocational Rehabilitation Counselor will coordinate efforts, taking proactive steps within all applicable policies to include state and federal guidelines to ensure legal compliance in identifying all benefits, protections, or options available to you.
- 7. If an employee reports an injury and seeks medical treatment, the employee <u>must see</u> one of the district's approved physicians in order for the expenses to be covered under workers' compensation. The following is a list of facilities that employees can choose from to receive treatment:

## VALLEY PRIMARY CARE FACILITIES

## MINDEN MEDICAL CENTER

(for normal business hours) - 445-7800 925 Ironwood Drive Minden, Nevada

## CARSON VALLEY MEDICAL CENTER

(Occupational Medicine) - 782-1615 897 Ironwood Drive Minden, Nevada

#### CARSON-TAHOE HOSPITAL

Emergency Services - 445-8000 1600 Medical Parkway Carson City, Nevada

## CARSON VALLEY MEDICAL CENTER

(24-hour emergency room) - 782-1500 1107 US Hwy 395 Gardnerville, Nevada

## LAKE PRIMARY CARE FACILITIES

## BARTON MEMORIAL HOSPITAL

(24-hour emergency room) – (530) 541-3420 2170 South Avenue So. Lake Tahoe, CA 96150