

A photograph of a worker from the waist down. The worker is wearing a bright yellow high-visibility safety vest over blue denim jeans. The right knee is wrapped in white medical bandage. The worker is holding a yellow hard hat in their right hand. They are wearing brown work boots with black laces. The background is a blurred industrial or construction setting.

Injured Employee Handbook

ROCKYMOUNTAIN
THERAPY SERVICES

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APPROVED
**WORK INJURY
CLAIM**

WHAT IS WORKERS' COMPENSATION INSURANCE?

Workers' compensation insurance provides no-fault coverage, which allows employees who are injured on the job to receive benefits regardless of who caused the injury. In return for providing workers' compensation coverage for their employees, employers receive exclusive-remedy protection. This means that, in most situations, employees cannot sue employers for damages related to workplace injuries.

Coverage is divided into two categories: (1) workers' compensation insurance and (2) employer's liability insurance. Workers' compensation insurance covers medical expenses and reimburses employees for wages lost due to work-related accidents. Employer's liability insurance protects employers from lawsuits brought against them outside of the workers' compensation system by employees who were injured in job-related incidents. As with all types of insurance, there are some conditions and exclusions to both coverages.



YOUR RESPONSIBILITIES WHEN A WORK-RELATED INJURY OR ILLNESS OCCURS

1. Immediately report the incident to your employer.
2. Seek immediate medical or first-aid treatment. Your employer may require you to obtain initial treatment from a designated doctor or clinic. If your employer does not have a designated medical provider, seek treatment for all non-emergencies at one of their preferred provider organization (PPO) facilities. For life-or limb-threatening injuries please seek initial treatment from the nearest emergency room.
3. Inform your treating physician that you were injured in a work-related accident and tell the physician who your employer is insured with.
4. Seek ongoing treatment at one of your employers PPO facilities. If you are considering seeking care outside of a designated medical provider, please contact your adjuster for additional information.
5. Promptly provide information requested from your adjuster and cooperate with any investigation of your claim
6. Contact your claims adjuster to determine which medical services require pre-authorization.
7. Keep your claims adjuster and your employer informed of your progress and when you will be able to return to work. Keep them updated about any changes in your employment status, address or telephone number.
8. Be honest in reporting your injuries and capabilities. Your insurance company works to protect you and your employer against fraud. It is a felony to collect workers' compensation benefits through fraudulent pretenses, misrepresentations, or omissions.

YOUR BENEFITS

MEDICAL BENEFITS

Medical benefits are provided for reasonable and necessary medical care that is related to your work-related accident or illness. Some of the covered benefits include office visits, chiropractic care, dental care, prescription medications, surgical care and durable medical equipment. Payments are made according to your state's fee schedule.

PRE-AUTHORIZATION

Certain treatment, such as surgery, chiropractic care, and physical therapy require pre-authorization from your insurance company. Please check with your claims adjuster to find out what treatments need to be pre-authorized and how your treating physician can request that authorization.

PREFERRED PROVIDER ORGANIZATION (PPO)

Your workers' compensation insurance company may have agreements with a network of hospitals and physicians that offer quality care at a discounted rate. This does not apply to areas where there is no PPO facility available or in a life-or limb-threatening emergencies. For more information, please contact your employer, claims adjuster or visit your workers' compensation company's website.

MILEAGE

Insurance companies will reimburse you for mileage while traveling to and from medical treatment. You may have to request reimbursement in writing. Include dates, roundtrip mileage, and destination. Submit mileage claim as soon as possible. If you are required to travel long distances, you may be eligible for reimbursement for lodging and meals. Please contact your adjuster for further details.

PRESCRIPTION MEDICATION

Your workers' compensation company may provide a prescription card for you to use to obtain medications related to your claim. This allows the pharmacy to bill them directly with no out-of-pocket expense to you. Contact your adjuster for more information.

CHANGING PHYSICIANS

An employer or their insurance carrier may require an injured employee to be initially treated by a preferred medical provider. After the initial visit to the preferred provider, an employee may choose to make a one-time change of medical provider during the course of their claim, however, they must ensure the medical provider accepts workers' compensation insurance. An injured employee must also immediately inform the insurance carrier or self-insured employer of the one-time change of medical provider. A referral from one medical provider to another is not considered a change of medial provider.

COMPENSATION BENEFITS

You are paid compensation when your physician formally releases you from work because of a work-related accident or illness.

Compensation amounts are based on a percentage of your average weekly wage at the time of the injury.

Temporary Total Disability (TTD)

If you are temporarily unable to work in any capacity during your recovery, you will receive temporary total disability (TTD) compensation based on your average weekly wage, up to a statutory maximum. You will receive this benefit until you are able to return to work or your condition reaches a fixed state of recovery known as maximum medical improvement (MMI). Most states have a waiting period before TTD benefits are due. Your adjuster can help explain the standards in your state.

Temporary Partial Disability (TPD)

If you can return to work but because of medical restrictions related to your industrial injury or illness, you can't earn your full pre-injury wage, you will receive temporary partial disability (TPD) compensation. TPD benefits are calculated at two-thirds of the difference between your pre- and post-injury wages, up to a statutory maximum. These benefits end as soon as you can earn your full pre-injury wage or you reach MMI- whichever occurs first.

Permanent Partial Disability(PPD)

If you are declared MMI and left with a permanent loss of function, you might qualify for an impairment rating, which could entitle you to permanent partial disability (PPD) compensation. PPD benefits vary widely from state to state, so please contact your adjuster for details about your state's standards.

Permanent Total Disability (PTD)

If a work-related injury or illness completely prohibits you from returning to any type of gainful employment, you might be entitled to lifetime benefits known as permanent total disability (PTD) compensation. Please contact your adjuster if you need more details about this complex benefit.



How Long Will I Receive Compensation benefits?

Temporary compensation is paid until you are able to return to work or your condition reaches "maximum medical improvement" or medical stability. This may be determined by your treating physician or by a special medical evaluation with a physician chosen by your insurance company.

Are My Compensation Benefits Taxed?

Compensation Benefits are not taxable.

What If I'm Now Making More Money And Need To Be Off Work- Will My Benefits Increase?

Compensation benefits are based on your average weekly wage at the time of the injury and do not increase or decrease because of later changes to your income.

Can I Receive Unemployment Benefits While I Am On Workers' Compensation?

Contact your adjuster for state-specific details.

Do I Need An Attorney To Help Me With My Claim Or Filing For A Hearing?

While you are always free to hire an attorney, it is not a requirement for making a claim or filing for a hearing.

What Is The Family And Medical Leave Act?

The Family and Medical Leave Act (FMLA) became effective August 5, 1993. FMLA requires "covered" employers to provide up to twelve weeks of unpaid, job-protected leave and possible company benefits to "eligible" employees for certain family and medical reasons. For more information regarding FMLA, please contact the nearest office of the Wage and Hour Division of the U.S. Government Department of Labor, Employment Standards Administration.

What Is The Americans With Disabilities Act?

The American with Disabilities Act (ADA) makes it unlawful for an employer to discriminate in employment against a qualified individual with a disability. ADA requirements apply to employers with fifteen or more employees. Whether an injured employee is protected by the ADA depends on whether that person meets the ADA definition of "individual with a disability." The person must have a "record of" or be "regarded as" having a permanent impairment that "substantially limits a major life activity." Also, the employee must be able to perform the essential functions of a job currently held or desired, with or without an accommodation.