

CITY OF SPOKANE ADMINISTRATIVE POLICY AND PROCEDURE	ADMIN 5800-10-03 LGL 2010-0021
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TITLE: WORKERS COMPENSATION CLAIM REPORTING

EFFECTIVE DATE: July 5, 2010

REVISION EFFECTIVE DATE: N/A

1.0 GENERAL

1.1 The City of Spokane is self-insured for its workers' compensations exposures caused by employee injuries or death. The City internally handles these claims.

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2.0 DEPARTMENTS/DIVISIONS AFFECTED

This policy shall apply to all City divisions and departments. If there is a conflict between this policy and an appropriate collective bargaining agreement, the agreement shall control.

3.0 REFERENCES

RCW 51.28.010
RCW 51.28.025

4.0 DEFINITIONS

None

5.0 POLICY

- 5.1 It is the policy of the City of Spokane that workers' compensation time loss benefits shall be administered according to the laws of the State of Washington and applicable bargaining unit contracts.

6.0 PROCEDURE

6.1 Injuries.

- 6.1.1 Employees injured while on duty, shall report the injury to their supervisor and describe the incident and nature of the injury.

6.2 Employee Injury Report.

- 6.2.1 The injured employee shall complete a City of Spokane Employee Injury Report, whether or not medical treatment is to be sought.
- 6.2.2 The report shall be given to the employee's supervisor so the supervisor can complete his/her section of the report.
- 6.2.3 The report shall be forwarded to the Risk Management Department within twenty four (24) hours of the date of the report of the injury.

6.3 Self-Insured Accident Report (SIF2).

- 6.3.1 State law requires the completion of the Self-Insured Accident Report (SIF2) when an individual sustains an injury that requires medical treatment by a licensed physician.
- 6.3.2 The SIF2 is a four (4)-part form with the pink copy going to the injured worker for his/her records. It is imperative that the injured worker sign both the medical release and legal release at the time the form is completed. This is a legal document and any changes on the form should be initialed by the injured worker or by the workers' compensation claims adjudicator who made the change.
- 6.3.3 The completed Self-Insured Accident Report (SIF 2) is attached to the Employee Injury Report and both reports should be forwarded at the same time to the Risk Management Department.
- 6.3.4 At the time the SIF2 is completed, the payroll clerk shall give the injured worker a Physician Packet that includes a Physician Initial Report (PIR) and a Physicians' Disability Statement (PDS). The PIR is left at the medical facility and the physician will forward it to

the Risk Management Department upon its completion. The PDS form should be taken back to the supervisor as it will show whether the injured worker is released for work, can perform full duties or restricted duties, or if he/she has been certified off work altogether. The form is needed for all parties to be aware of the status of an injured worker.

6.3.4 When an injured worker is certified off work, a Non-Uniformed Employee Release/Authorization Form for Use of Illness Leave must be completed by the employee. The form notifies the Risk Management Department and the employee's departmental payroll clerk that the employee is choosing to use any accrued illness leave for the days missed due to the on-the-job injury. The Risk Management Department needs to be notified if vacation banks are being chosen.

6.3.5 All of the above paperwork is forwarded to the Risk Management Department within twenty four (24) hours of the report of the injury.

6.4. Sick Leave Banks Usage.

6.4.1 If accrued sick leave is used by the employee, the claims adjudicator completes a calculation sheet to show the number of hours being used from the leave bank. The calculation sheet is given to the Accounting Department's Payroll Division for adjustment to the leave banks accordingly. The Payroll Division immediately notifies the Risk Management Department if there are not enough hours in the banks to allow the City to issue a warrant (check) for the balance if need be. The injured worker's pay stub will show the number of hours used from his/her leave banks.

6.5 Employee Responsibilities.

6.5.1 The employee is responsible for notifying his/her supervisor if unable to return to work. The employee is to have his/her physician complete a Physicians Disability Statement form (PDS) and return the signed form to his/her supervisor the same day, if possible, or within twenty four (24) hours.

6.5.2 It is the employee's responsibility to remain in contact with the workers' compensation claims adjudicator and his/her supervisor or payroll clerk, depending on the department.

6.5.3 The employee is required to keep in touch with the supervisor or the supervisor's designee informed regarding current status.

6.5.4 The employee must provide a PDS form in returning to work, light duty or full duty.

6.6 Responsibilities of the Risk Management Department.

6.6.1 Upon Receipt of a City of Spokane Employee Injury Report.

- a. If a claim (SIF2) is not attached to the form, the claims adjudicator reviews the form making sure all of the necessary information is completed. The information is entered into the Workers' Compensation Claim Management System. An incident number is automatically assigned in the system.
- b. Once an employee number and/or social security number is input in the system, all information is pulled up from the database and automatically put in the appropriate places. The individual inputting the information is responsible for completing all of the blanks as required.
- c. Upon completion of inputting the claim, a copy of the incident report is given to the Safety Officer in the Risk Management Department for review and comments. A copy of the incident report is kept in a separate file in the event a SIF2 is filed; at which time it will be attached to the claim.

6.6.2 Entering Information From Self Insured Accident Report (SIF2).

- a. Upon receipt of a SIF2, the claim is entered into the workers' compensation claim management system. At that time reserves are placed into the system. The reserves are an estimate of the amount a claim will cost the City of Spokane. The reserve calculations are based on the type of injury that has been sustained, type of medical treatment being rendered and whether this is a new injury or an aggravation to a previous injury. Time loss reserves are placed on claims that have either resulted, or appear will result, in an injured worker being off work.

6.6.3 Time Loss Benefits.

- a. Time loss benefits are compensation for wages lost due to a work related injury/disease when the injured worker is unable to perform any type of work.

- b. All employees, with the exception of LEOFF I employees, who have an allowable compensable claim are eligible for time loss benefits if time is lost from work based on medical certification from a licensed medical physician. Volunteers are not paid, so they do not receive compensation, unless they are employed elsewhere and are allowed time loss compensation for that position. Otherwise, the law allows for medical payments only.
- c. Different bargaining units have negotiated different ways to fully compensate employees for wages for time loss. There are two (2) ways at the City, and both are acceptable by the Washington State Department of Labor & Industries.
- d. Uniformed police and fire employees have "disability leave." Disability leave is full pay for up to six (6) months of time loss due to the injury. This is called "kept on salary". The employee's department is reimbursed for the statutory amount that is due under Department of Labor & Industries rules.
- e. Non-uniformed represented employee's time loss benefits are calculated per the state requirements. A time loss benefit calculation is between sixty percent (60%) to seventy five percent (75%) of the employee's gross income, with a minimum and a maximum set by the state. The range differences are due to marital status and number of dependents and cannot go over seventy five percent (75%) of regular pay. Other variables can include, but not limited to, hours worked per week and other incomes.
- e. The City allows employees not on a "kept on salary" plan to get full salary by using accrued illness leave banks to supplement their time loss benefit. An employee may choose to use vacation time in lieu of illness leave. Completing the Use of Illness Leave form documents this choice. Employees choosing to use accrued illness leave will receive a full paycheck. The illness leave bank will have only the supplemental amount to the workers' compensation lost time benefit deducted. Once an employee chooses to use vacation, the employee cannot switch later to using sick leave as a supplement, or in any way as an addition to the workers' compensation lost time benefit. Supplementing the time loss benefit with illness leave is only available as the employee's illness bank is available. Leave sharing is not available for workers' compensation claims.

6.6.4 Time Loss Benefits Eligibility.

- a. When a claim (SIF2 and/or incident report) is received in the Risk Management Department, the claims administrator reviews each form and determines if an individual has missed any time off work as a direct result of this incident.
- b. If the information on the form(s) does not indicate one way or the other, the employee's department is called to see if the individual has returned to work and the date of return. If the individual has not returned, then the Risk Management Department needs any medical documentation that has been received certifying the individual off work.

6.6.5 Managing a Claim.

- a. The adjudicator handling the claim is responsible for ensuring all medical documentation is in the file and noted on the computer. It is the workers' compensation division's responsibility to keep in contact with the employee's physician's office on a regular basis.
- b. The claim adjudicator authorizes certain medical procedures based on the information in the file. If authorization for a procedure is being requested and the adjudicator does not have the necessary information, he/she will request it, review and determine if the need for that procedure is allowable under the claim.
- c. Prior authorization is needed from the Risk Manager for any investigation done on an injured worker. This includes the reason the adjudicator feels an investigation is needed, the estimated cost factors and what the projected outcome will be and how it will assist the City in costs, etc.
- d. The Risk Manager will discuss the claim with legal counsel who will determine if in-house or outside special counsel is needed. If special counsel is needed, a written cost estimate is requested from the attorney. The contract is submitted to the city council for its approval. Once approved then that attorney will be assigned the case.
- e. Once a claim has reached fifty thousand dollars (\$50,000.00) in total incurred costs, the claim will be

presented to the Finance Committee and reported on quarterly in subsequent reports in executive session.

6.5.6 Excess Carrier:

- a. When a claim is filed for a substantial injury, e.g., head injury, paralysis, loss of limb, etc., the City's excess insurance carrier is notified in writing of the potential costs factors of the claim. If more than one (1) individual is injured in an incident or a death results due to an injury, the excess carrier is also notified immediately. The information forwarded to the excess carrier includes the name(s) of the individual(s) involved; the date of the injury, the type of injury sustained and estimated cost factors.


7.0 RESPONSIBILITIES

The Risk Management Department shall administer this policy.

8.0 APPENDICES

None


APPROVED BY:



City Attorney (Asst)

6-16-10

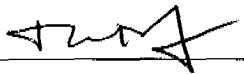
Date



Risk Manager

6/17/10

Date



City Administrator

20JUN 10

Date