

# The Office of People, Culture, and Talent – Department of Risk Management

# **FACTS ABOUT WORKERS' COMPENSATION**

#### WHAT IT IS

Since 1913 California Workers' Compensation law has guaranteed prompt, automatic benefits to workers who become injured or ill because of their jobs. It is mandatory no- fault insurance to cover medical expenses and help replace lost wages when you are disabled from work because of a work-related injury or illness.

#### WHO IT COVERS

Antelope Valley Community College District (AVC) employees, student workers/students in clinical rotations and registered volunteers are covered for Workers' Compensation.

## WHAT IT COVERS

Almost any job-related injury or illness is covered from simple first-aid incidents to serious accidents up to and including physical and psychological injuries suffered by victims of violent workplace crime. There are a few injuries that may not be covered depending on how and when they occur, particularly injuries that result from voluntary, off-duty recreational, social or athletic activities.

#### **HOW TO REPORT AN INJURY**

- Immediately report any injury, no matter how slight, to your supervisor.
- File either an incident report or an accident report form with your supervisor immediately.
- If you wish to be seen by a doctor or are not sure, call the "Company Nurse Injury Hotline" at 1-877-518-6702.

The Risk Management department will provide you with a claim form to complete and refer you to their workers' compensation medical provider or your pre-designated physician. State law requires employers to authorize medical treatment within one working day of receiving the completed claim form. If you delay reporting your injury or delay completing the claim form, it may result in a delay in receiving benefits; and too long a delay may even jeopardize your right to obtain benefits altogether.

# NON-DISCRIMINATION POLICY

The District cannot terminate you or in any way discriminate against you because you file a claim, intend to file a claim, settle a claim, testify or intend to testify for another injured worker. If it is found that AVC discriminated, AVC may be ordered to reinstate you, reimburse you for lost wages and employment benefits, and pay increased workers' compensation benefits, costs and expenses up to the maximum amounts set by state law.

Page 1 of 4

## **WORKERS' COMPENSATION BENEFITS**

#### **MEDICAL CARE**

Keenan & Associates, the District's Third Party Claims Administrator will pay all reasonable and necessary medical costs for your work injury or illness. Medical benefits may include treatment by the doctor, hospital services, physical therapy, lab tests, x-rays, durable medical equipment and prescriptions. Keenan will process payments for all approved medical treatment and there are no co-pays associated with this medical treatment.

#### **HOW TO OBTAIN MEDICAL CARE**

#### **EMERGENCY CARE:**

Get help immediately. Call campus security at ext. 6399 or ext. 4444.

#### IMMEDIATE AND FOLLOW-UP CARE:

The District has designated *ProActive Work Health Services* as its occupational medical clinic to provide treatment for all work-related injuries. Please obtain the appropriate forms from Risk Management or Human Resources.

#### TEMPORARY TOTAL DISABILITY PAYMENTS

Temporary Total Disability (TTD) pays two thirds of your average wage, subject to minimum and maximum amounts set by state law. The payments are tax-free and there are no deductions.

TTD payments stop when your doctor says you can return to work or your condition has become Permanent and Stationary (your medical recovery has reached maximum foreseeable improvement). For injuries occurring on or after April 19, 2004, TTD payments stop after 104 payable weeks within two years from the date of the first TTD payment or after 240 payable weeks within five years from the date of injury for specific long-term conditions such as amputations, severe burns, and certain chronic diseases. For injuries on or after January 1, 2008, TTD payments stop after 104 payable weeks within five years from the date of injury or after 240 weeks payable for specific long-term conditions such as amputations, severe burns, and certain chronic disease. As employee's that fall within the California Educational Code, these TTD benefits will be paid in conjunction with Ed Code benefits.

#### PERMANENT DISABILITY PAYMENTS

If a doctor determines that your injury or illness will always leave you somewhat limited in your ability to work, you may be eligible for permanent disability payments. The amount will depend on the type of injury, your age, occupation, date of injury, and how much of the permanent disability was caused by the work injury. There are minimum and maximum amounts set by state law. Payments are made at a regular rate and are spread out over a fixed number of weeks until the total amount has been paid. If you received TTD, the first permanent disability payment is due within 14 days after the TTD payments stopped if permanent disability is believed to exist. A notice of permanent disability benefits will be sent when TTD ends. If you did not receive TTD, the first disability payment is due within 14 days after your doctor says your condition permanent and stationary (your medical recovery has reached maximum foreseeable improvement) and permanent disability is believed to exist. Subsequent payments are made every 14 days until the total amount is paid.

#### **DEATH BENEFITS**

If the injury or illness causes death, payments may be made to relatives or household members who are financially dependent on you. The amount is set by state law and depends on the number of financial dependents. Payments are made at the same rate as temporary disability. A burial allowance is also provided.

Page 2 of 4

#### SUPPLEMENTAL JOB DISPLACEMENT BENEFITS (SJDB)

If you have supplemental disability and you do not return to work within 60 days after your TTD ends, and the District does not offer modified or alternative work, you may qualify for a non-transferable voucher payable to a school for retraining and/or skill enhancement. If you qualify, the claims administrator will pay the costs up to the maximum set by state law based on your percentage of permanent disability. SJDB is a benefit for injuries occurring on or after January 1, 2004.

#### IF BENEFITS ARE DENIED

You have the right to disagree with any decision affecting your claim. Call your claims administrator (Keenan) to see if you can resolve any disagreement. Denied claims will result in reimbursement to the District of all industrial accident leave up to 60 days, by use of employee's sick, vacation and other available leaves.

# PRIMARY TREATING PHYSICIAN (PTP)

The District's primary treating physician (PTP), who must be in the Medical Provider Network that the District uses for its workers' compensation program, is the doctor with overall responsibility for treating your work injury or illness and for coordinating care with other providers. The PTP decides what types of medical care you need; whether they are temporary or permanent medical limitations or restrictions on your ability to perform work; and when you are able to return to work. If the injury results in some degree of permanent disability, the PTP will measure the disability and report the findings to the claims administrator. The PTP will also report whether you will need medical care in the future. As part of your Workers' Compensation benefits, the District will provide you with a PTP.

#### PERSONAL PHYSICIAN

If you have a personal physician and you wish to designate this physician to be your PTP, you must fill out the pre-designation form before you sustain an injury. The form is located in the Office or People, Culture and Talent and at the HR web site at www.avc.edu. Please note that the physician must agree to treat you for a work-related injury or illness before the injury occurs and the physician must sign the form.

Page 3 of 4

#### IF YOU HAVE OTHER QUESTIONS

You can contact an information and assistance officer at the State Division of Workers' Compensation (DWC) at 1-800-736-7401 for information on rights, benefits and obligations.

#### **EMPLOYER REPRESENTATIVE**

Antelope Valley College, The Office of People, Culture, and Talent – Department of Risk Management

Administration Building, A162

3041 West Avenue K Lancaster, CA 93536 Tel: (661) 722-6300 ext. 6428 or ext. 6311

Fax: (661) 722-6677 or Fax: (661) 722-6321

#### **CLAIMS ADMINISTRATOR**

Keenan & Associates Attn: Vikki Vaughn Sr. Claims Examiner PO Box 2707

Torrance, CA 90509

Tel: (951) 715-0190 ext. 1151

Fax: (951) 788-8013

#### DISTRICT PRIMARY TREATING PHYSICIANS

ProActive Work Health Services 44451 16th Street West Lancaster, CA 93534

Tel: (661) 945-5999 Fax: (661) 948-2897

ProActive Work Health Services 39251 10<sup>th</sup> Street West Palmdale, CA 93551

Tel: (661) 274-2000 Fax: (661) 349-7099

# **WORKERS COMPENSATION FRAUD IS A FELONY**

Anyone who makes or causes to be made any knowingly false or fraudulent material statement for the purpose of obtaining or denying workers' compensation benefits or payments is guilty of a felony.

Page 4 of 4