

Please standby for realtime captions.

Hello.

On your check.

Martin clear. Dashed out and clear. [Music] ? Once again, this is Kevin, Mike from Orlando, Florida. This is a quick audio chat. If you can hear me, so your status to agree. Enjoy the music, I will be back.

Hello, Kevin.

Good afternoon, Denise, I hear you loud and clear.

Awesome, thank you.

You are welcome.

Good afternoon. We are from Orlando, Florida. Is an audio check. If you can hear me, please set your status to agree. Select the green checkmark if you can hear me. If you cannot, you cannot hear me. If you can hear me, hit the green checkmark, that's very important to start the presentation. I have my fellow advocates Dan and Matt here to help reach out to anyone who needs any assistance with their audio. Once again, please set your status to agree. Again, in under 10 minutes.

Good afternoon. About a minute left until he get started. This is Kevin. If you can hear me, set your status to agree. Click on the person, your two options, please choose the green agree checkmark if you can hear me. Will be looking for anyone who does not have green to make sure you can hear. Your calling into the line, press*, six to me. Once again, if you can hear, set your status to agree I cooking the green checkmark at the top. If you're called and by phone, press*six to me. Susan, would you like to do another audio check? Get going? Susan, are you on the line? Susan? We cannot hear you if you're speaking.

Can hear me? Click we can hear you. So, with that being said.

I'm going to go ahead and move it. I'm going to move in today's lesson, go ahead, this is recorded, we will get the recording started.

Everyone, while this is floating, thanks for having Susan and myself on today. Where the program analyst for [Indiscernible]. We are located in DC. These are emails in case you want to reach out to. We are available, if we don't get back to you immediately, will try to get back to in the first 24 hours. We will give you a brief overview of the federal program. We can cover how to form an employee for work-related injury and reports of a traumatic injury. Two recent updates for COVID-19. This is a 2 1/2 hour presentation really. I will be condensing it down to an hour. We will skip some of the slides for time. You will receive a copy. As always, Susan I are available anytime. Exxon air there.

By the time we are finished, you guys shall have a base understanding of how the workers comp claim loads. And a basic understanding of the [Indiscernible]. You will initiate the steps when emergency treatment is required and understand the difference between a traumatic injury and an occupational illness and understand how to file for Ahmaud Arbery -- COVID-19 infections. We have the responsibilities, that is what we are seeing the bulk of our issues. This pertains to HR 201 series.

These are some of the forms used for the initiation process. This by no means an exhaustive list. For the basics, we will only focus on the [Indiscernible]. This is used to form a file for traumatic injury. Take the recent examples of this would be, something such as falling off a chair, falling downstairs, Muslims, cuts, something that happens by external force and on one shift. We'll get into more of that later. So, FECA stands for federal employee compensation act. When employee is injured, they must be giving notice in writing to the eligible for benefits. Employees are generally notified of the, benefits. These are generally not done in writing. There is a powerful presentation. So, if an employee is injured, it's important that they meet with their quick nadir. I think you guys have noted that as collateral. Again, it has to be done in writing. If there is an injury, it's an employee's right to choose whether or not to file a claim. It doesn't matter if it's in the wrong form. That's their prerogative. Let's say I'm a I'm going to make up a name here. Let's say Joe falls off a chair. They would probably file the claim on a Ca1 form. He chooses to file it under CA two. If he chooses to file it under that, that's his prerogative. I did not say this earlier, I know some of you guys have questions. Just for the sake of time, we will get to all the questions at the end. The first polling question it to, employees must file a claim for all entries, and/or illnesses sustained on the job, true or false? We will give you guys about 10 more seconds here. Ken, do we move on? Does this and when everyone answers? Perfect. That's my answer. The answer is false. Kevin, perfect, there it is. The employee doesn't have to file a claim right away. If they sustain an injury, his prerogative to file a claim or not. If they want to file a claim, they don't have to do it immediately. They can file it up to three years. Again, just remember, the statute of limitations on a dramatic injuries three years. The important thing is we cannot force them to file a claim. So, injured employees must notify their immediate supervisors of injury in writing. It can be done in a memo, a note, and email. Or informal channels. Again, if they will file a claim they have up to three years. It's important that we have notice of that injury in writing. Just so we can substantiate the claim in the future. But, it can be done through [Indiscernible]. Sometimes, an employee is injured on the job and does not notify the supervisor. please meet your Mike. So, sometimes an employee is injured, they don't know how to file, unfortunately, that filing counsels written notice of injury. In addition to [Indiscernible], it serves as written notice for genetic injury. So, it is important that workers comp monitors the systems, it will go dish will go more into that later. Sometimes, the employees just don't notify supervisors and they file the claim. Again, the filing of the claims requires written notice. And then, dramatic injury is going to be defined as the condition of the body caused by specific event or incident within a single workday or shift. The condition must be caused by an external force, which is identifiable at the time and place of occurrence and the function of the body affected. Again, Joe falls off a chair on Monday, at work, during work hours, that would be considered a traumatic injury. Something like carpal tunnel, that happens over a period of time would not be considered traumatic injury. So, a C2, this is the only time we'll talk about this today. We don't see too many of these. Ca2 serves as a written notice for disease or illness and claims for compensation. Occupational disease is a condition produced by public environment over a period of time. Evidence is required. A through H goes through different occupational illnesses and it's required to support the illness. Occupational illness is something like carpal tunnel, work-related hearing loss, work-related psychiatric illnesses. That is not an exhaustive list, those are examples. We are going to refocus on this one. When an employee files a Ca1, they are entitled to 45 days of continuation of pay, CFP. That is up to 45 days, not 45 days. I know a lot of you guys are asking what the continuation of pay is, it is famously [Indiscernible]. The federal employee compensation act provides that the employer must give them the regular pay during any period resulting in injury up to a maximum of 45 calendar days. This is called continuation of pay. The employer, not the Department of Labor has the continuation of pay. Continuation of pay is subject to all other panel deductions that would regularly have. This is to keep the employee stable while they recover from the disability. From a work related traumatic injury. To be eligible for the continuation, the employee must of filed within 30 days of injury and provide medical evidence that supports the disability. We talked about earlier how an

employee does not have to file a claim immediately or at all. They can file up to three years after. If they file past 30 days, that's all they file in the first 30 days. Of course, it has to be backed up and supported. You can provide other choices. This is to be compensated, and often must be a qualified [Indiscernible]. We have the right to get medical reports, anytime you get a medical appointment, they must return for C-17. That's after each appointment. C-17 is idle. You can return that employee back to work. That goes under the radar. One of the takeaways here is that if an employee goes to [Indiscernible] workers comp claim, make sure they get a return. Lastly, make sure the employee understands [Indiscernible], when they file a Ca1, on a system, or even on the paper form, COP is [Indiscernible]. The form assumes that they know what it is. So, in many cases, employees don't understand [Indiscernible]. Consider choosing this, they have sick leave or annual leave to take off work. For those that done by fax, the process is tedious and it takes months. Susan is working on a lead buyback. It was an issue back in 2018. That's all you want to avoid. It gives undue stress and strain. This is a list of the employee's rights and responsibilities. Let me point out that number one, those are responsibilities. Two, three, four, five, nine our rights. The employee has the responsibility to promptly report the cause of injury. They have a right to file a Ca1 or Ca2. The employee has the right to make [Indiscernible]. They have a right to the information in writing. They provide medical evidence and support capability. It's to ensure their aware modified work. Core, light duty. [Indiscernible] and, the employee will be made aware of their responsibilities as a new employee orientation. That's done by the supervisors and workers comp. Look at the polling questions. The question is, in order for claim to receive their seer pay entitlement, they must have filed a what? You have 30 seconds. Okay. I ended the pole. The city got this right. It's a Ca1. The COP is paid at 100% right. Let's get back to the sides. The next one is actually a polling question. I will in the pole. The answer is C, 30 days. Now let's go to the emergency treatment. In some cases it might be a injured and they might require emergency medical treatment. We are getting authorization for medical treatment. It happens. If an employee test requires treatment come the supervisors need to work on the following. The injury, the immediate medical treatment. The name and the position, or the facility, the employee has to be treated. That is because we are going to need that information to fill out a C 16 point. The supervisors also prepare and [Indiscernible]. On to tell us what the employees capabilities are and if they are fully stable. That's important and bring the employee back to work. Once the workers comp staff is notified, but we're going to do is we're going to provide verbal authorization for the medical examination and treatment. We are going to follow that up with an ending. That is kind of like a check. It's going to to get paid. Along with the CA 20. Then they will be notified of the availability, that way the provider knows hey, this guy can go back to work in some sort of capacity, the doctors can figure out what the employees limitations are. And then it's our job to figure out and find a job that suits limitations. This should only be handled by the workers comp staff. We do not authorize the payment for position, hand out payment like a blank check. Will get this later. This allows you to print the C 16, or let the supervisor printed on. Please don't do it. But the workers comp staff handle the processing. Nonemergency treatment, that is pretty standard. Employee is injured, they require emergency treatment, is required to provide a report immediately on the incident. The employee is not required to file a workers comp claim immediately or at all. They want to file they have up to three years. If they want to get COP, they have up to 30 days to file the claim. All right, polling question number four. So, the question is, can an employee choose [Indiscernible] of their choice, true or false? Let's give 20 seconds on the clock. I'm going to end the pole. The answer is true. If -- is the employee's right to choose the provider of their choice. The provider needs to be a certified Worker's Comp. position to be paid. Okay. Thank you. Now, we are going to go over how a claim flows. The claim, the injured party is going to start [Indiscernible], they're going to initiate a claim by starting to fill out a Ca1. Let me backtrack here. The way the claim flow is the claim will go to the supervisor to the reviewer, which will be Worker's Comp. personnel, or myself and Susan. And then from there because the Department of Labor. The department of labor will make a decision on

whether to accept the claim or deny the claim. Now, the clock starts when a claim is initiated. That means when the claim and or injured party representative finds that. Up until then, there's a lot of information that they need to gather, medical evidence, they need to document what happened, where it happened, how it happened. It can take a couple days. Until the form is complete, finished, signed, the clock does not start. The clock starts, we have 10 days to get the form to the department of labor. 10 days for the supervisor and then to do their portion and get the form to the Department of Labor. They should file this electronically, it's highly recommended. Manual submissions take longer. When you get that, we can either take that information on there, we could transcribe it word for word, electronically. It will add to the claim. If the injured party is disabled and taking time off work and have [Indiscernible], or they need to be treated. We want to reduce the panel for filing a claim, or processing a claim. It's recommended that everyone do this electronically. We get a lot of people saying I don't have an [Indiscernible] account. It's easy to create one. Use your VA email. That should not really be an excuse. The [Indiscernible] portion is pretty straightforward. Again, you have to go back, you have to get all the evidence together, the who, what, when, and how. It is generally straightforward. Plug-in information, I still highly recommend that they work with the claim, through the cuts when they see these mistakes. We see this a lot when the injured party gets to the part where you want to elect COP or sicken annually, that does not give a clear definition of what continuation of pay is. So, when the employees don't know the definition, they stray away from that and may choose to use sicken annually. This could possibly hurt the employee later on should they need to buy the lead back. Again, I encourage Worker's Comp. to work with the claim on a file response. Now, supervisor responsibilities, supervisors need to probably respond to the incident. I cannot stress this enough. This is by far the biggest bottleneck. Supervisors need to provide initial guidance to injured workers to notify them of personal immunity. They need to forward the work status the medical documentation, and he completed forms received by a party to the workers comp staff is immediate three days. The way that translates is when the claim files a form, may file the claim, it is pushed to the supervisor, supervisor needs to finish their portion of that form. Within three days of the claim signature. That is what it roughly translates to. Now, the supervisor needs to provide light duties verbally and in writing. When they get that back, they need to make sure that the provide the employee every opportunity to work those assignments within the scope that the doctor prescribed. They need to provide all requested documentation and require a response. They need to notify the personnel. They need to notify safety. [Indiscernible] the responsibilities fall under [Indiscernible]. Think you guys need to understand. We have a unique problem where some of our supervisors and what they call political. They're just sitting around the country, they are tied up in meetings, there tied up in meetings, audit, most of the time. In this case, this response is supervisor. It has information at the employee, and have [Indiscernible]. Just because this is not available, does not mean that the claim does not get processed. So, we should advise workers, we should obtain the name and provide the Worker's Comp. status. So that we can provide that to the provider. We did not investigate the incident. We can complete the supervisor portion of the C1 and C2. We will go into that. Within the first five days. That's a little block where [Indiscernible]. We must get wet ink signatures on all claim. The [Indiscernible] requires that all claim and physical copies of claims that maintain a log file cabinet. This is going to give the answer reviewer to print the form out. If you make copies, there [Indiscernible]. We need to keep those in a lockbox. That is an Festival item. Because of the pending, I understand there's a backlog. We print those funds, get them signed, put them in the file cabinet. This is our biggest backlog. This mostly causes us to be late. This is easy to do so because it's an automated email. A lot of us don't read automated email. You need to elect supervisor. It will say that Sivan email you the claim. Click on the email. It has a link they can click. When you click back, it goes here. The Worker's Comp. staff going to the system. That will send a reminder email out again to the supervisor. So, what is supervisor click selling, they will get on this. You can determine which one is true. If you can review the claim, click yes I will review. The information will be blacked out. It's private, personal

information. There any attachments, the supervisor click next. Lasky to provide information. Afterwards, they will have to enter in to the occupation code. Is the injury source code, the retirement coverage. They were notified of the injury. In most cases, they will notice it will be the date that they filed the form. That information is mandatory. That refers to COP. Those are optional. I highly recommend that this is available. Then they will skip over this portion. As Worker's Comp. personnel, some cases, it can feel like the incident happened and was in the performance work duty. Said decide to go to lunch but I decided to drive. It's not a work meeting, it's not work-related. I just want to go down the street to McDonald's. Generally, that would not be covered. How can the employee [Indiscernible]. Any control of the facility. That should be covered. I'm walking to work, I saponify it on fall. My back. They need to figure out who the third party was. Indicate that on the form. That would be an [Indiscernible] claim. This will show more information. If at any time they feel they need more information on the page allows. You can upload attachments that's giving them the ability to explain the responses or any previous fields. At this point, if the supervisor once the fighter claim, they will have to [Indiscernible]. There is a special process for claims. Finality put that information there, to get a summary of that information entered. If any required information had been answered, you have to go back and complete this before they continue. Assuming that the information is in there, I am dashing your proof, you can [Indiscernible], any of the workers, for myself and Susan. Now, once they receive it, we will review the [Indiscernible]. We will inform the mother not they should grant this. We will monitor this daily. We should be ensuring the signs of [Indiscernible]. If we all stick to this chart, the claims estimate that the department of labor on time. You will have action on the left. Because left to right. Went to reported injury. We will do that as soon as possible. You need to report that immediately. The only don't push out [Indiscernible] before they notified. If you wanted dropped under the fourth row. Let's say they complete this form, they can do so within three years. Once they receive it, they have three business days from the date to get that done. Made sure that the Department of Labor, this claim is [Indiscernible]. This chart for those that are Worker's Comp. personnel, I would print that out. For you this is all you need for the presentation. Pulling question number five.? Once this is initiated, the claim is submitted now will move on coronavirus updates. We'll see if we can get questions. Susan I myself have seen a lot of creditors claim the are the PHA. Will give you the information, should you have one. The regulations state, let me get back there. The regulation states that taking contract virus while performing their job duties. They will have the full coverage of the federal employees act. And for [Indiscernible]. It's related to that condition for associated complications. This chart here, this is a pyramid of how the department of labor classifies worker exposure. Generally, there enough on two categories, medium and lower risk. In some cases, the veteran service representative are considered high risk when they file a claim, they will be asked to go through additional steps. Will get those in the next couple fights. Besides work, claim the deferment of labor will take into consideration other sources of exposure. Which is the general public, customers, coworkers, if the claim is [Indiscernible]. Those at high risk. If you work at a high risk environment, these are essential workers. You can go to the grocery store. Those are high-risk. We file a claim, let me clarify. Claims for exposure generally not accepted. Define exposure and infection. That is been diagnosed by test results and a Dr. Bennett affected by COVID-19. Potential because the considerations we talked about before, how the employees have been exposed to the virus. Even though it could happen at work, it happens. Within RN, registered nurse in the meantime, we had a client at home. They are not to work virtually. Continuation of [Indiscernible] will not cover that. That is to be fully understood. Now, claims for COVID-19 infections are filed using Ca1. They consider COVID-19 infections a traumatic injury. Now, since most of us are not entirely in the high risk ugly. Most want to file a claim. That will require that the Department of Labor is going to require us to provide a statement. That's regarding the alleged accident. To 45 days. Claims for COVID-19 must be filed under shamanic injury or occupational illness. We will put 15 seconds on the clock. This one is pretty short. Okay. I'm going to end every year. Again, that is a genetic injury. It is kind of

counterintuitive. We somewhat expect that COVID-19 could happen over a period of time depending on incubation., We feel like that could be symptoms after we've been affected. Almost on. [Indiscernible] any additional information and guidance will be provided, will be for them and for death benefits. Now, let me see. Let me get back to the side. A lot of questions that we see concerning the VA we see this, if the plan to follow. The federal employee who doesn't work at high risk employment and [Indiscernible] what specific documentation will be helpful in establishing the exposure. So, we talked about earlier, we talked about what we need in the high risk category. What is helpful to prove that is a statement that explains the nature of the employment. However explicit the virus, how long and when the explosion most likely occur, how how frequently we were exposed, and where and why the closure occurred. Again, this is not an exhaustive list. If there's anything you want to add, feel free to do so.

This is a reference for the Department of Labor. Everything we went over today. Click the link, it will take you to the correct page you can read the material for yourself. At this point, I will turn it over to Susan. Alternative for Q&A.

Hello, everyone, can you hear me?

I can hear you.

Yes. Any questions?

Susan, someone is typing.

No question.

No questions, great. Okay. No questions. We have 12 minutes left.

There's one in there. Wait. What if they don't submit and decide [Indiscernible]. This goes back to the [Indiscernible]. Every employee is supposed to follow our [Indiscernible]. Employee does not any duty status report. They have exclusive authority to make the determination whether this is a request for leave. This is up to the discretion of the provider, whether or not they are on Worker's Comp. If they requested for specifically for [Indiscernible]. They would have to exercise that policy. They can authorize it for two days. You can submit the medical appointments. No exceptions. They have an absent policy.

Okay. Cheryl asked if we could print the side and presentation.

Erin asked when an employee partakes. As I considered to be filing a claim?

Yes.

Need to ask the reported incident not a claim. If they file that, go ahead.

Go ahead. I can't see the rest.

That they file this, it counts as filing a claim, if you don't want to file a claim but notified them of the incident, that could be done in writing, I forget with the safety format. It could be done by the letter, a memo. If there doing this, it counts as filing claim. In addition to medication.

You're right, that incident report is filing a claim for an injury. The incident report is for safety. That is further counted [Indiscernible]. The other one is for workers compensation. So, just because an employee files a notice that they got injured, the safety or the supervisor is required to do an incident report. However, if they do not want to file a workers compensation claim, they do not need to file a notice of injury. They did file the notice of injury, that is the filing of the claim. For the workers compensation.

Is a commonly asked question a lot of people get safety and Worker's Comp. confused. If there is an accident at work, there is an OSHA form, safety form that they must fill out. However, they are not a sit there not required to file a claim. They have two separate departments. It makes sense for them to be intermingled. There are two different. Kimberly asked if they had three years to file a claim. Kimberly, that's true. Let's say I hurt myself today, I can file a claim. I cannot file a claim at all. I choose to file a claim later, Allison [Indiscernible]. I have to file within 30 days. So, the longer they get away from the claim date, but said he file a claim to half or three years from now, it's hard to track that down. That's why there needs to be a written notice of the injury, you will mostly find not in the OSHA forms.

The statute of limitations for the guidelines is three years. I don't see any other questions. We have seven minutes left. Do you mind if I give everyone seven minutes of there like that? Click that on my this includes our [Indiscernible] for the month of August. Thank you very much for joining us. As stated in the check, you can, thank you for joining us. Enjoy the rest of your day. [Event Concluded]
Event Description:

OTM HR Community of Practice (8/27)

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