



Administrative Procedure WCK-P030  
**PROCESSING WORKER'S COMPENSATION CLAIMS**

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**Responsible:** Office of Human Resources, Risk Management Department

**PURPOSE**

This administrative procedure establishes the protocols for processing worker's compensation claims for employees in the Washoe County School District ("District").

**PROCEDURE**

1. An employee seeks medical treatment and completes a Physicians Report (C4) Form in the physician's office for a potential Worker's Compensation Claim and the paperwork is forwarded to Risk Management. Risk Management has six (6) days from notification to complete the forwarded paperwork to the third party administrator.
2. Risk Management receives the Employees' Notice of Injury or Occupational Disease (C1) Form, Employers Report of Industrial Injury or Occupational Disease (C3) Form and Physicians Report (C4) Form.
  - a. Forms are date stamped.
  - b. Forms are coded with department number, location number and position control number.
  - c. File is set up for employee using a green dot to identify as Worker's Compensation.
    - i. Risk Management contacts the employee's supervisor to obtain missing paperwork, if all forms are not received.
  - d. Forms for employees who have sought medical treatment and any related restrictions for their injury are forwarded to the third party administrator by fax.
    - i. Wage Verification Form (WCK-P031) is completed if the employee is missing time from work and forwarded with Employees' Notice of Injury or Occupational Disease (C1) Form and Employers Report of Industrial Injury or Occupational Disease (C3) Form.
3. Program Technician ensures that the District complies with the injured worker's restrictions.
  - a. The Program Technician contacts the third party administrator if the District does not comply.

- b. If the employee is off work and the District is unable to comply with their restrictions, a Wage Verification Procedure (WCK-P031) and a Waiver of Premium Procedure (WCK-P032) are completed.
4. Program Technician logs information into the Riskmaster Database.
  - a. Program Services Technician evaluates information on status of claim for Medical Only (MO), Lost Time (LT), or Information Only (IO) and claim number is noted on employee file. Not all claims are Occupational Safety and Health Act (OSHA) recordable (WCK-P035). A claim number is self-assigned by database.
5. If the employee is off work, the Program Services Technician attempts to find light duty work for the employee within the District. Returning the injured worker to his/her own department is the first priority. If that is not an option, then other departments in the District are contacted for possible light duty.
  - a. If there are no opportunities for light duty, the injured worker remains off work, and his/her supervisor notifies him of this.
  - b. Program Services Technician diary's all information regarding status of employee on calendar.
6. When Risk Management receives information on the determination of an accepted claim, the Program Services Technician monitors the employee until he/she is released for full duty.
  - a. If the claim has been denied, the employee has appeal rights. See procedure WCK-P036.
7. Employee assures that all paperwork is completed and received by Risk Management. All updates on his/her medical status is to be provided by his/her supervisor. Failure to do so could result in an injured worker's claim being denied.
8. Employee collects the awarded Worker's Compensation claim checks at the District's Risk Management Department. See Waiver of Premium Procedure WCK-P032.
  - a. The Third Party Administrator has 30 days after the receipt of the Employees' Notice of Injury or Occupational Disease (C1) Form, the Employers Report of Industrial Injury or Occupational Disease (C3) Form and the Physicians Report (C4) Form to make a determination on the Worker's Compensation Claim.

## IMPLEMENTATION GUIDELINES & ASSOCIATED DOCUMENTS

1. This Administrative Procedure reflects the goals of the District's Strategic Plan and aligns/complies with the governing documents of the District, to include:
  - a. Board Policy 7300, Risk Management
  - b. Administrative Regulation 7350, Industrial Worker's Compensation for Employees (Pending)
    - i. Wage Verification Procedure (WCK-P031)
      1. Wage Verification Form - EXTERNAL DOCUMENT (State Form D-8 revised 07/99)
    - ii. Waiver of Premium (WCK-P032)
    - iii. OSHA Posting Requirement (WCK-P035)
    - iv. Appeals of Workers' Compensation (WCK-P036)
    - v. Light Duty / Modified Return to Work (WCK-P037)
    - vi. Workers' Compensation Audit (WCK-P039)
    - vii. WCSD Accident/Exposure Investigation Report (WCK-F001)

## REVIEW AND REPORTING

1. This procedure will be reviewed as part of the bi-annual audit of the District's governing documents.

## REVISION HISTORY

Date	Revision	Modification
12/27/2005	A	Adopted as CSI Procedure
8/18/2006	B	Revised
9/05/2007	C	
11/15/2016	1.0	Revised: converted to administrative procedure;