



# CLAIMS

A basic understanding...

*Samantha L. Boggess, CWCP  
Director of Claims Services, OIC*

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2

## Reporting a Claim

Who is responsible?

*Injured Employee/Claimant*

- *WV Code §23-4-1a Report of Injuries by Employee*
- *§85-1-3 Claimant's Report of Injury and Application for Compensation*

**Injured Worker:** Responsible for giving immediate notice to the employer or an employer's agents... *WV Code § 23-4-1a.*

**Pursuant to §85-1-3: Immediately after sustaining an occupational injury, a claimant should:**

- 1) Seek necessary medical care
- 2) Immediately on the occurrence of the injury or soon as practicable thereafter give or cause to be given to the employer or any of the employer's agents a written notice of the occurrence of the injury
- 3) File a workers' compensation claim or request that one be filed on his or her behalf

### **Employer**

**WV Code §23-4-1b Report of Injuries by Employers:** It is the duty of every employer to report to the Commission, the Successor to the Commission or another Private Carrier, whichever is applicable, every injury sustained by any person in his or her employ.

...Shall be made on forms prescribed by the Commission or Insurance Commissioner, whichever applicable, and shall be made within **five (5) days** of the employers receipt of the employee's notice of injury, required by §23-4-1a, or within **five (5) days** after the employer has been notified by the Commission or the Insurance Commissioner, whichever is applicable, that a claim for benefits has been filed on account of such injury, whichever is sooner...

**Pursuant to §85-1-4:**

The **claimant's employer** shall report to the private carrier every injury sustained by any person in its employ within **five (5) days** of the employer's receipt of the notice of an employee's request to file a claim.

## SAWC Program Brochures

[www.wvinsurance.gov/SAWC.aspx](http://www.wvinsurance.gov/SAWC.aspx)



**Employer Manual**



**Employee Manual**

## Claims Reporting Methods

- Internet Reporting:  
<https://webclaims.zurichna.com/WC.aspx>
- Telephone: 1-800-987-3373
- Fax: 1-877-962-2567
- Email: [USZ\\_Carecenter@zurichna.com](mailto:USZ_Carecenter@zurichna.com)

## Claim Filing Forms

- **SAWC-1:** Injured Worker & Physician's Report of Injury
- **SAWC-3:** Employer's Report of Injury
- **SAWC-1HL:** Report of Occupational Hearing Loss
- **SAWC-105:** Employee's Report of Occupational Pneumoconiosis
- **SAWC-205:** Physician's Report of Occupational Pneumoconiosis
- **SAWC-305:** Employer's Report of Occupational Pneumoconiosis

## 3 Point Contacts

- Within 24 hours of assignment in lost time claims, the claims adjuster should contact:
  - Employer
  - Injured Worker
  - Physician
- No claim shall have a ruling decision without a contact to the chargeable employer.

## Reasons for Contacts?

- Gather all pertinent details of injury, policy, prior injuries, wage information, job description, medical records, diagnostics, witnesses, work history, etc.
- Explain WC Processes & Answer Questions
- Advise of Resources to Assist

## Injured Workers' Wages

- Information Letter 162A Procedure for Calculating WC Benefits on AWW
  
- Website Wage Forms & Tools
  - Employers Report of Wages
  - TTD Wage Calculator
  - Election of Option Form

## Job Description

### Importance:

- Claims Adjuster must have an understanding of job demands
  
- Physician must have a realistic view of job demands
  
- Injured worker knows from the beginning that everyone understands his or her job demands and the goal of returning to work

## Did you know...

**Part-time §23-4-6d** - At the date of injury, if working 25 hours or less is considered part-time, unless the injured worker is a construction worker.

**Subrogation §23-2A-1** - On or after January 1, 2006: statutory subrogation with regard to indemnity and medical benefits paid as of the date of recovery.

- Example: motor vehicle accident, faulty equipment

## Independent Medical Evaluation (IME)

### **§23-4-7a(f) 120 Days of TTD**

- Shall be referred

**§23-4-7a(1)** If the injured worker is at maximum medical improvement (MMI) the treating physician may give an impairment rating up to 15%.

## IME Reimbursement of Wages

### **§23-4-8 Physical Examination of Claimant**

...the employer shall reimburse the claimant for loss of wages, and reasonable traveling and other expenses in connection with such examination or examinations...

## Did you know...

**§23-4-7a(c)(2) Non-Awarded Partial (NAP)** shall be paid, if the injured worker is at MMI and has not returned to work. NAP benefits are paid at the PPD rate (**66<sup>2</sup>/<sub>3</sub>%**) and will be deducted from the PPD award.

## Did you know...

**§23-4-6(e)(1)** - Each 1% of permanent partial disability (PPD) is equivalent to 4 weeks of compensation.

### **§23-5-7 & S.B. 578 Settlements**

- May negotiate a settlement of any and all issues in a claim(s).
  
- As of June 10, 2015 - non-orthopedic claims may be settled if claimant has an attorney

## Did you know....

### **§23-4-9 Physical & Vocational Rehabilitation**

- Goal of Rehabilitation
- Benefits

### **§85-15-4 Priorities**

- Hierarchy Established

## Did you know...

### §23-4-6(m) Statutory PTD

- Impairment meets the code
- Example: Loss of both feet or use thereof

### §23-4-6(n)(1) PTD Eligibility - May be subject to PTD benefits if;

- Meets 50% permanent partial impairment threshold
- Has sustained a 35% statutory disability

## Avoid Discriminatory Practices

### §23-5A-3 - Termination of Injured Employee Prohibited; Re-employment of Injured Employees

- Reinstatement to Former Position
- If former position is unavailable, then to a comparable position (*comparable wages, working conditions and to the extent possible...duties*)

## In Summary...

Open communication between the adjuster and employer, as well as other pertinent parties, is essential for the injured worker to meet the return to work goal.