California Maritime Academy

EMPLOYEE’S GUIDE

TO

WORKERS’ COMPENSATION

Human Resources Office
California Maritime Academy
200 Maritime Academy Drive
Vallejo, CA 94590-8181
Phone: (707) 654-1021
Fax: (707) 654-1141
QUESTIONS AND ANSWERS

1) What is Workers’ Compensation?
   Workers’ Compensation (WC) is the exclusive remedy for employees injured on the job. Providing medical care, wage loss compensation and rehabilitation, no matter who was at fault.

   The cost of this protection is completely paid by the California State University system, as the employer. Employees make no payroll contribution to workers’ compensation. Benefits are tax-free and not subject to social security deductions.

2) Who is eligible for Workers’ Compensation benefits?
   All State employees are covered by the WC program. Covered individuals include temporary and permanent employees (staff and faculty), student assistants and work study students, and appointed volunteers.

3) What is a Workers’ Compensation injury or illness?
   An injury or illness that occurs due to employment is considered a WC injury or illness. Under workers’ compensation law, you will receive help if you are injured, no matter who was at fault.

   Workers’ Compensation covers various types of events, injuries, and illnesses. You could get hurt by one event at work, such as hurting your back in a fall, or by repeated exposures at work, such as hurting your wrist from doing the same motion over and over.

4) Who administers the Workers’ Compensation claims?
   A third-party administrator (TPA) manages Workers’ Compensation claims on behalf of the CSU system. The TPA determines eligibility, authorizes medical treatment, and provides medical or wage compensation benefits to which the injured worker is entitled. The cost of these benefits is then billed to the CSU system “Risk Pool.”

   When you, as a University employee, are injured or become ill as a result of work-related activities, you are entitled to certain benefits provided you comply with established procedures. The following information is provided to assist you during the WC claims process. Failure to follow these procedures will delay and may cause denial of medical treatment payment and Workers’ Compensation (WC) benefits.

5) How does this coverage affect my own health insurance?
   Workers’ Compensation is separate from your personal health care insurance. Workers’ Compensation benefits cover work-related injuries and illnesses only. There is no deductible – all medical bills are paid by the TPA (and the billed to the CSU system “Risk Pool”). It is important to inform your “treating physician” IMMEDIATELY that you believe your injury or illness is work-related.

6) How do I file a claim?
   If you are injured on the job, if medically possible, tell your supervisor immediately that you have been hurt. In turn, your supervisor will inform the Workers’ Compensation Coordinator in the Human Resources office of your injury. The WC Coordinator will then provide you with the Workers’ Compensation Claim Form (DWC1) on which you can explain when and where your injury/illness occurred and describe the injury and the part of the body affected. You must complete the “Employee” section (lines 1 through 8) of the DWC1 and return the completed form to the WC Coordinator. After the WC Coordinator completes the “Employer” section (lines 9 through 18) of the DWC1, a copy will be mailed to your home address. The TPA will contact you to explain the benefits to which you may be entitled.

7) How do I obtain medical treatment for my injury or illness?
   If the injury requires emergency assistance, dial 911.

   For a Minor Injury or Illness use:
   STUDENT HEALTH CENTER
   California Maritime Academy
   Phone: (707) 654-1170
   Hours: Monday through Friday, 8:00 a.m. to 3:00 p.m.

   After Hours:
   KAISER MEDICAL CENTER (Occupational Health Department or Minor Injury/Illness Department)
   975 Sereno Drive
   Vallejo, CA 94589

   In non-life threatening situations, your supervisor will accompany you (or will designate someone else to accompany you) to the appropriate Designated Medical Facility.

8) May I choose the doctor who will treat me for my injury or illness?
   A CMA employee may designate his or her own personal physician to treat them for a work-related injury or illness as long as had pre-designated the physician before the injury or illness occurred AND your personal physician meets all of the following criteria: The physician:
   • Is your primary care physician
   • Is licensed per the Business and Professions Code
   • Previously provided treatment to you
   • Retains your medical records and history, and
   • Agrees to be your “pre-designated” physician and signs the “Pre-Designation of Personal Physician” form.

   If you have not “pre-designated” your personal physician prior to the date of your injury/illness, you must seek medical treatment from a Designated Medical Facility listed above.

9) Should I maintain contact with my supervisor during my time off from work?
   Yes - it is extremely important for you to maintain contact with your supervisor throughout your disability period. If your supervisor is not able to answer any questions you have regarding the WC process or benefits, feel free to contact the Workers Compensation Coordinator in Human Resources office at (707) 654-1139.

10) What are my benefits and rights?
    Within one day after an employee files a claim form, the law requires the employer to authorize medical treatment as required and limited by law. All medical treatment is provided in accordance with the medical treatment utilization schedule.

   Waiting Period: Payment for medical treatment begins immediately. Normally there is a three calendar day waiting period - including weekends -- before benefits for lost wages begin. Employees will use their accrued leave during that period. Payment will be retroactive to the first day of disability if the employee is hospitalized or if the employee is off work for more than 14 calendar days. All disability periods of absence must be documented by a physician.

11) Are all absences covered by WC Benefits?
    NO. If your absence(s) is not supported by a signed physician’s statement, it is not covered by WC benefits. Absences not covered by WC must be reported on our monthly Absence and Additional Time Worked Report (STD 634).
12) What are my WC compensation wage loss benefit options?

Option 1: Temporary Disability (TD)
(This option is available to all CMA employees. However, this is the only option available to CMA student employees.)
Option 1 provides a minimum of $126 per week or actual weekly wage up to a maximum of $840 (or State Average Weekly Wage (SAWW), whichever is greater) as of 1/1/06. The SAWW is the average wage that employers pay employees covered by unemployment insurance.) You will receive TD payments every two weeks during the time you qualify for this benefit. Generally, TD stops when you return to work, or when the treating physician releases you for work or says that your injury has reached a point of maximum improvement. TD payments will not be extended beyond 104 compensable weeks within two years after the initial TD payment. Exempt are certain injuries that typically take longer to heal, they are subject to a cap of 24 weeks within a five-year period.

Option 2: Temporary Disability with Supplementation of Applicable Vacation and Sick Leave Credits
(This option is available to all CMA employees with available leave credits.)
Same as Option 1, except that accumulated sick leave and vacation credits will be used to supplement TD, allowing you to continue receiving your full net pay until your vacation and leave credits are exhausted.

Option 3: Industrial Disability Leave (IDL)
(This option is available to all active CalPERS members)
Payments begin after a 3-day waiting period of physician-authorized absence from work for employees qualified for IDL. The 3 days are reimbursed if you are hospitalized or if you are disabled for all duties beyond 14 days. For the first 22 days, you would receive the total adjusted IDL gross (IDL gross is calculated by subtracting federal and state withholding - based on marital and exemption status in effect on the date of the disability - and/or Social Security and Medicare withholding from the gross salary). Retirement contributions are then deducted from this amount. If your disability continues, you would be paid at the rate of 2/3 of the adjusted IDL gross less voluntary deductions. If gross is sufficient, (unless the employee requests they be cancelled) for a total of 365 days within a 2 year period.

Option 4: Industrial Disability Leave (IDL) with Supplementation of Sick Leave Credits
(This option is available to all active CalPERS members with available leave credits)
Same as Option 3, except that accumulated sick leave will be used to supplement IDL after the first 22 days, allowing you to continue receiving your full net pay until your sick leave credits are exhausted.

13) How will my TD, IDL, or Sick Leave Supplementation benefits be paid?
TD checks are issued by the TPA and will be mailed to your home mailing address.

Authorization for IDL is issued by the TPA. Because pay for IDL and Sick Leave Supplementation does not always issue from the State Controllers Office on a timely basis, and to ensure that funds are available on payday, the Payroll Office will cancel your direct deposit for the duration of the disability period and request a salary advance, if necessary. Depending on the timing, your pay will either issue in the form of a “salary advance” (based on an approximation of net pay) or a “pay warrant” from the State Controller’s Office. Because we cannot determine ahead of time what form your pay will take you may wish to make prior arrangements with your department regarding the disbursement of your pay.

When you return to work status, you will need to go to Human Resources to reinstate your direct deposit of your pay warrant.

14) How is Permanent Disability (PD) calculated?
Your examining physician will report on any permanent impairment that may be considered a permanent disability. Under WC law, a permanent disability rating involves the use of a specialized formula. This formula considers your age and occupation at the time of your injury or illness, plus any permanent impairment(s) that the examining physician may indicate. The permanent disability rating yields a specific dollar amount. The exact amount depends on the date of injury, the percentage of disability, and your average weekly earnings at the time of injury.

15) What if I have a recurrence and require further medical care?
If you need additional medical care you have one full year after your last treatment to notify the TPA claims examiner of your request for additional medical care.

16) May I file a Workers’ Compensation claim if an injury occurs outside of work?
The CSU is not liable for the payment of WC benefits for an injury resulting from your voluntary participation in any off-duty recreational, social, or athletic activity which is not a part of your work-related duties.

17) Are there limits for filing a WC claim?
Yes. Generally, the law requires you to provide your employer with notice of your injury or illness within 30 days of the date of the injury or illness. In additional, should you disagree with any of the TPA’s actions, in order to protect your rights, you must commence proceedings before the Workers’ Compensation Appeals Board (WCAB) by filing an Application for Adjudication of Claim within one year of the date of injury or illness, or a year from the last furnishing of indemnity or medical treatment benefits by your employer or TPA. It is very important that you act promptly so as not to risk losing your benefits because you waited too long.

18) What are my protections against discrimination for filing a Workers’ Compensation claim?
It is illegal for an employer to punish or fire you for having a work-related injury or illness, for filing a claim, or testifying in another person’s WC case. If you believe you have experienced discrimination because of your injury or illness, you should discuss your rights with an Information Assistance Officer at the State Division of Workers’ Compensation.

19) What if I have not received the benefits I think I should have?
If you think you have not received the benefits you should have, ask for an explanation from the TPA claims examiner. Misunderstandings and errors sometimes do occur, but you can resolve most of them by talking with your claims examiner. If you are not satisfied with your claims examiner’s answers, you have several options: (1) you have the right to consult with and be represented by an attorney; (2) you can consult with the Information and Assistance Officer at the State Division of Workers’ Compensation; and (3) you can file an Application for Adjudication of Claim with the Workers’ Compensation Appeals Board to resolve your claim formally.