Claims Reporting

When An Injury Occurs

• Employee calls Encompass (formerly PDI) Injury Care Direct - 877-247-7710
• Serious Injury
  • Call 911
  • Call York – 866-221-2401
  • If the injury requires hospitalization or results in death, Cal OSHA requires notification.
When An Injury Occurs (Cont.)

- Provide the employee the Workers’ Compensation Claim Form (DWC-1) either in person or by certified mail within one working day of knowledge or notice of injury or illness.

- Retain a copy of the DWC-1 with the date it was provided to the employee.

WC Claim Form- DWC 1

- Employee completes 1-9
- District completes 10-18
Employer’s Report of Occupational Injury or Illness (Form 5020)

- Employee referred for treatment
- Encompass completes the Employer’s Report of Occupational Injury or Illness (Form 5020), on the York Claims System Portal
- Encompass will reach out to the District contact to populate any additional required information not provided during the initial call with the injured employee
- The MSIA claims examiner will also make initial contact with the District as part of the claim set up process and will request a wage statement
Employer’s First Report- Form 5020

District Contact Outline

- Received a new claim for Claim number is: AAAA-XXXX
- Date of injury:
- Injured: Injured body part
- Employee states the following:
  - **New Question:** Was the employee paid for the date of injury?
  - Please confirm the following: Is he/she losing anytime at all from work?
  - Last day work?
  - Return to Work date?
  - Please confirm whether he/she is a 10, 11, or 12 month employee
  - Please be sure to provide a Wage Statement for past 52 weeks.
  - Is the District disputing this injury?
  - Were there any witnesses to this incident? Names and numbers if any?
  - Please add any additional comments you feel will assist in managing this claim
  - Be sure to send the DWC-1 form.

The DWC-1 form should always be given to the employee within 24 hours of knowledge of an injury.
Sample Wage Statement

Next Steps

- If there are witnesses to the incident, have them complete a witnesses statement
- Contact the supervisor for completion of the Supervisor’s Report.
- After the initial medical visit, instruct the employee to return to the District with the doctor’s work status report detailing work restrictions if any and remind the employee to bring in the work status report after every visit
- Review the physician’s release to determine if work modifications are needed
- Respond timely to requests from York and Encompass and be advised that pre-designation questions may be referred back to the District
- Always show compassion for the employee’s well-being
- Monitor satisfaction with overall treatment at the industrial clinic
Sample Supervisor’s Report

Education Code Provisions

- Employees are eligible for 60 working days of full salary (does not apply to substitutes or part-time employees)

- 60 days of full pay is per injury and does not start over for a new school year

- After 60 days, certificated employees may elect to use accumulated unused sick leave; classified employees must use up all current and accumulated leaves.
Education Code Provisions (Cont.)

- York pays substitute employee’s directly

- Once all leave has been used, employee then goes on difference pay (pays for their substitute)

  *Note: Bargaining language may enhance the leave benefit. Always check with legal counsel*

- After difference pay, employee is placed on the 39 month rehire list and Interactive Process must be initiated