
City & County of San Francisco

**NEW EMPLOYEE'S GUIDE TO WORKERS'
COMPENSATION BENEFITS**



Provided by the Department of Human Resources
Workers' Compensation Division

September 2015

Department of Human Resources
One South Van Ness, 4th Floor
San Francisco, CA 94103
Main Phone: (415) 557-4800
www.sfdhr.org



Table of Contents

GENERAL

| | |
|---|---|
| What is workers' compensation?..... | 3 |
| What kinds of injuries or illnesses are covered?..... | 3 |
| Workers' compensation claims administration..... | 3 |

THE BENEFITS UNDER CALIFORNIA WORKERS' COMPENSATION LAW

| | |
|--|---|
| Medical Benefits..... | 4 |
| Temporary Disability Benefits..... | 4 |
| Permanent Disability Benefits..... | 5 |
| Supplemental Job Displacement..... | 5 |
| Return-to-Work Supplement Program..... | 5 |
| Death Benefits..... | 6 |

NAVIGATING THE SYSTEM

| | |
|--|---|
| How do I report a work-related accident or illness?..... | 6 |
| How do I access medical care for my work injury or illness?..... | 6 |
| Your Primary Treating Physician..... | 7 |
| Predesignation of Personal Physician..... | 7 |
| Returning to Work..... | 8 |
| Working Safely..... | 8 |
| What if benefits are denied?..... | 8 |
| Workers' Compensation Fraud..... | 8 |

FOR ADDITIONAL INFORMATION.....

WORKERS' COMPENSATION AND NON-DISCRIMINATION.....



What is workers' compensation?

Under California law, all employers in the State of California must provide workers' compensation benefits to employees who have suffered a work-related injury or illness. The benefits include both medical care and disability benefits to help cover lost wages through a no fault system and at no cost to the injured or ill worker.

What kinds of injuries or illnesses are covered?

Injuries or illnesses that arise out of and in the course of (due to) employment are covered under workers' compensation. Those injuries could be a single event (having an automobile accident, slipping and falling, etc.) that causes an injury. Another type of injury is one that occurs over a period of time such as losing hearing due to constant exposure to loud noises. Some injuries and illnesses for safety officers are legally presumed to be work-related because of the nature of their work.

There are injuries that may not be covered such as those that result from voluntary work, off-duty recreational, social or athletic activities (such as playing softball with co-workers on your department's team), or voluntary participation in city-sponsored wellness activities.

Workers' Compensation Claims Administration

The City and County of San Francisco is self-insured for workers' compensation which means that all money to pay claims comes directly from the City and not an insurance company.

The majority of the City's workers' compensation claims are handled by City employees working in the Workers' Compensation Division of the Department of Human Resources. The rest are handled by Intercare Holdings Insurance Services. Their address is: P.O. Box 579, Roseville, CA 95661 and their toll-free telephone number is 1-888-834-9416.

A full listing of department workers' compensation claims assignments can be found on the DHR website under the Workers' Compensation tab at:

<http://www.sfdhr.org/index.aspx?page=76>



THE BENEFITS UNDER CALIFORNIA WORKERS' COMPENSATION LAWS

This section provides a brief overview of the range of benefits provided under the California Workers' Compensation System.

Medical Benefits



All reasonable and necessary medical care for your work injury will be paid for by the City for your workers' compensation claim. Medical benefits may include treatment by a doctor, hospital, or physical therapist, and lab tests, x-rays and medication. All medical costs are paid directly to the medical provider and no co-payments are required. If you do incur a workers' compensation injury or illness, you should immediately notify your claims adjuster if your medical provider attempts to bill you for treatment.

The City maintains a state-approved medical provider network (CCSF MPN) for the treatment of work-related injuries. These are physicians who understand the California physician reporting and billing requirements. The CCSF MPN clinics are pre-authorized by the City to provide treatments that are common to the type of injuries that occur on the job. Unless you "pre-designate" your own treating physician prior to an injury, you will be able to select a physician within the network.

Temporary Disability Benefits

If you are disabled and unable to work due to your work-related injury/illness for more than 3 calendar days, temporary disability benefits will partially replace your lost wages. The first 3 calendar days are not paid unless you are disabled more than 14 days, or are hospitalized. Temporary disability pays two-thirds of your average weekly wage, subject to minimum and maximum amounts set by State law. Temporary disability payments begin when your doctor says you can't do your usual work or available modified work. The payments must be made every two weeks.

Generally, temporary disability stops when you return to work, or when the doctor releases you for work, or says your injury has improved as much as can be medically expected.

State law limits the payment of temporary disability benefits to 104 weeks within a 5-year period.

Sworn officers receive their full salary for the first year of disability, called Disability Pay (DP) for Police and Firefighters pursuant to the City Ordinance. In addition, select job classifications in the Sheriff's Department, Juvenile Probation Department and Adult Probation Department are entitled to full salary under Labor Code Section 4850.

The City Ordinance also provides full salary to non-sworn temporarily disabled employees if the injury is the result of a physical assault, called "Assault Pay" or "Battery Pay".

Permanent Disability Benefits

Your examining physician will report on any permanent impairment that may be considered a permanent disability once your injury/illness has reached maximum medical improvement. Under State workers' compensation law, a permanent disability rating involves a specialized formula. This formula considers your age, occupation, type of injury/illness, diminished future earning capacity, and the permanent impairment caused by your work-related injury/illness.

After the amount of impairment is determined, the physician will estimate the percentage that is caused by other factors not related to work, such as a prior injury. Employers only pay for that percentage of permanent disability that is directly caused by the injury.

If there are questions or disagreements about the amount of permanent impairment, a state Qualified Medical Examiner will evaluate your condition and provide determination.

Generally, permanent disability payments are issued every two weeks in an amount established by State law and paid over a fixed number of weeks until the total amount has been paid.



Supplemental Job Displacement (SJDB)

If your work-related injury/illness precludes you from permanently returning to full duty and your employer does not offer a modified or alternate work within 60 days of all conditions reaching maximum medical improvement, the employee is entitled to a nontransferable voucher for education-related costs. The voucher is limited and can only be used at state-approved schools. For injuries/illnesses occurring on or after January 1, 2013, the amount is \$6000. For injuries prior to this date, the amount is tied to the existence of permanent partial disability and ranges from \$4000-\$10,000.

This chart provides the benefit range for injuries between 1/1/2004 and 12/31/2012:

| |
|---|
| \$4,000 for permanent partial disability of less than 15 percent |
| \$6,000 for permanent partial disability between 15 and 25 percent |
| \$8,000 for permanent partial disability between 26 and 49 percent |
| \$10,000 for permanent partial disability between 50 and 99 percent |

Return-to-Work Supplement Program (RTWSP)

For employees injured on or after 1/1/2013, the State may provide an additional payment to employees whose permanent disability benefits are low in comparison to earnings losses. To be eligible for this one-time payment, you must:

- Have received a Supplemental Job Displacement Voucher (SJDB) from your claims administrator; and
- Apply for the benefit within one year from the date the SJDB was served on you.

The application process for this one-time supplement must be made on-line. For additional information and instructions, you can visit the State Division of Workers' Compensation website: <http://www.dir.ca.gov/RTWSP/RTWSP.html>

These are state funds and are not paid directly by the City.

Death Benefits

If the work-related injury/illness causes death, payments may be made to your dependents. The amount of death benefits is set by State law and depends on the number of dependents and whether they were partially or totally dependent on you. Such payments are made at the same rate as temporary disability, but payments will not be less than \$224 per week. A burial allowance of up to \$10,000 is also provided.

NAVIGATING THE SYSTEM

The following sections describe more detail for employees who are injured on the job, including how to access medical care, what to expect, and how to resolve problems.

How do I report a work-related injury or illness?

Immediately report an injury or illness that you believe was caused by your work to your supervisor (or manager in the supervisor's absence). The supervisor will provide you with a DWC-1 "Workers' Compensation Claim Form". Complete the employee section of the form including the date, place and description of how the injury occurred. Your supervisor or manager will then complete the employer section and provide you with a copy. The completed form will be sent to the claims administrator for processing.

If you delay reporting your injury or delay completing the DWC-1, your entitlement to workers' compensation benefits may be delayed or even jeopardized. If your employer does not learn about your injury within 30 days, you could lose your right to receive workers' compensation benefits.

Of course, in the event of an emergency, the most important thing is to get care immediately.

How do I obtain medical care for my work injury or illness?

If you have a work-related injury/illness, contact your supervisor immediately. Your supervisor or department workers' compensation coordinator will, if you have not pre-designated a personal physician (see pre-designating a personal physician section below), refer you to an Occupational Health Clinic. In addition, the City has elected to provide to you a broad range of medical services which you may choose to treat for work-related injuries/illnesses. That panel of medical providers is referred to as a Medical Provider Network (MPN). You can access the City's MPN to choose an initial or ongoing treatment provider by logging onto the County's MPN website at: <http://www.intermedccs.com/ccsfmpn>

State law requires that you receive a separate notice that provides important information about the Medical Provider Network. If you did not receive it, contact your departmental personnel officer.

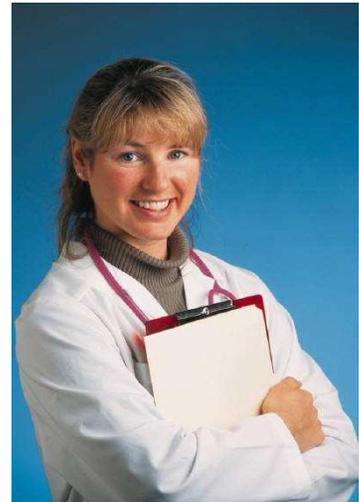
Your Primary Treating Physician

Your primary treating physician (PTP) is the doctor with the overall responsibility for treatment of your work-related injury/illness and for coordinating care with other providers. The PTP recommends the type of medical care you need and whether a referral to a specialist is needed.

Your PTP is also responsible for determining when you can return to work, helping identify the work you can do safely while you recover, and writing medical reports that will affect the benefits you receive.

All treatment must be consistent with state treatment guidelines. It is therefore important that your PTP provides well documented treatment requests so there is no delay in the approval process. For treatment that may be outside of the state guidelines, the law provides for a review process called “utilization review” which involves doctors and other health consultants reviewing your medical treatment needs by following medical treatment guidelines approved by the state.

There are time limits to approve, modify, delay, or deny treatment requests from your physician.



Predesignation of Personal Physician

In the event you sustain an injury or illness related to your employment, you may be treated for such injury or illness by your personal medical doctor (M.D.) or doctor of osteopathic medicine (D.O.) if:

- The doctor is your regular physician, who must be either a physician who has limited his or her practice of medicine to general practice or who is a board-certified or board-eligible internist, pediatrician, obstetrician-gynecologist, or family practitioner, and has previously directed your medical treatment, and retains your medical records;
- Prior to the injury your doctor agrees to treat you for work injuries or illnesses; and
- Prior to the injury you provided your employer the following in writing: (1) notice that you want your personal doctor to treat you for a work-related injury or illness, and (2) your personal doctor's name and business address.

Your ‘personal physician’ can also be a medical group, if the medical group is a single corporation or partnership composed of licensed doctors of medicine or osteopathy, which operates an integrated multispecialty medical group providing comprehensive medical services predominantly for non-occupational illnesses and injuries with all other parameters that must apply. It cannot be a chiropractor or acupuncturist.

You should receive a Predesignation Form from your personnel officer at the time you are hired. You may use this form to notify your employer if you wish to have your personal medical doctor or doctor of osteopathic medicine treat you for a work-related injury or illness and the above requirements are met. Please provide it to your personnel department and keep a copy for your records.

Returning to Work

You should take an active role in returning to work as soon as possible by communicating with your treating doctor, claims adjuster or examiner, and department about the kind of work you can do while recovering from your injury/illness. The City and County of San Francisco's Temporary Transitional Work Program promotes the provision of temporary, modified or alternative positions for injured workers recovering from work related injuries/illnesses. Such positions are made available by your department or another department in order to ensure your safe (within the restrictions established by your doctor) and speedy return to work. Research has found that injured workers who return to the job as soon as medically possible have the best outcomes both physically and mentally.

Working Safely on the Job



The City and County of San Francisco strives to ensure a safe and healthful work environment for all its employees, clients, and visitors. This requires every employee to take an active role in ensuring their personal safety and the safety of others. Observe all safety rules, procedures and guidelines. Always use personal protective equipment where required. It is important to immediately report any unsafe conditions, hazards, accidents, and near-misses to your supervisor. Slip, trip and fall hazards, for example, can usually be easily corrected once reported. Emergency exits and stairways should be maintained free from obstructions to ensure immediate exit in case of emergency. The City depends on you to do your part in providing a safe and healthful environment for everyone.

Information regarding workplace safety can be found at the Department of Human Resources website at: <http://www.sfdhr.org>

What if benefits are denied?

There are a variety of reasons why a claim is denied. If a minor incident occurs that doesn't require more than first aid, it does not reach the threshold of a reportable injury claim.

If it does, the claims administrator must make a determination about whether your injury occurred as a result of your employment. Not everything that happens during work hours is necessarily related to work. So in order to make these decisions, the claims adjuster will contact you, your department, and your physician to inquire about your claim. You will also be asked to truthfully respond to a series of questions and to provide medical releases so that we can ensure that the claim is supported. Sometime, a claim that should be accepted is denied because the employee does not provide the necessary releases or information to support the claim and results in unnecessary delays.

If you disagree with any decisions that have been made on your claim, call your claims adjuster to see if you can resolve any disagreement. For free assistance, you can contact the state Division of Workers' Compensation's Information and Assistance Unit which provides continuing information on rights, benefits, and obligations under California workers' compensation laws. They can assist in the resolution of misunderstandings and disputes without formal proceedings and help ensure that full and timely benefits are furnished. For recorded information, their toll-free number is: [1-800-736-7401](tel:1-800-736-7401). Their district offices can be located at: <http://www.dir.ca.gov/dwc/IandA.html>

If the issues cannot be resolved informally, there are procedures set up by the state Division of Workers' Compensation to decide the outcome of your claim.

Workers' Compensation Fraud

It is a felony to file a false or fraudulent statement or to submit a false report or any other false document for the purpose of obtaining or denying workers compensation benefits. These laws apply equally to medical providers, claims adjusters, employers, and to employees who are claiming workers' compensation benefits.

In addition, you are required to report any money you have earned for work performed during periods they received temporary disability benefits (including Disability Pay or Labor Code 4850 benefits). Failure to follow this requirement may be a violation of the law. Workers' compensation fraud is a serious offense, and if convicted, a person can face up to five years in prison and/or a fine of up to \$150,000 or double the value of the fraud.

The vast majority of workers' compensation claims are legitimate. Most injured workers want nothing more than appropriate medical treatment and compensation for lost wages until they can return to work. Workers' compensation fraud, in its many forms, undermines the perceived legitimacy of the workers' compensation system and creates an unwarranted drain on scarce tax dollars. It is vital for the County to aggressively detect, prosecute, and deter fraud in order to protect precious tax dollars. You can report suspected workers' compensation fraud by contacting the Workers' Compensation Division of the Department of Human Resources, at (415) 557-4800. All information provided will be maintained in the strictest confidence.

The California Department of Insurance works with the local District Attorney's Office in the investigation and prosecution of workers' compensation fraud. They can be contacted at their fraud hotline telephone number of (800) 927-4357.

For Additional Information Available

More information about workers' compensation can be found at the following State of California website:

<http://www.dir.ca.gov/dwc>

You may also call the Division of Workers' Compensation Information and Assistance Unit for additional information

Workers' Compensation and Non-Discrimination

It is illegal for your employer to discriminate against you in any way because you filed a workers' compensation claim, intend to file a workers' compensation claim, settle a claim, testify or intend to testify for an injured worker. If it is found that your employer discriminated against you, your employer may be ordered to reinstate your job, reinstate your lost wages and employment benefits, and pay increased workers' compensation benefits up to a maximum established under law.