



TEXAS TECH UNIVERSITY HEALTH SCIENCES CENTER EL PASO

Operating Policy and Procedure

HSCEP OP: 70.13, Workers' Compensation Insurance

PURPOSE: The purpose of this Health Sciences Center El Paso Operating Policy and Procedure (HSCEP OP) is to establish policy and procedure for administration of the Workers' Compensation Insurance (WCI) Program in coordination with the investigation and analysis programs that are needed to promote prevention of work-related accidents, injuries and illnesses. This Operating Policy and its implementation will be in conformance with the policies and guidelines of the State Office of Risk Management (SORM) and the Texas Department of Insurance, Division of Workers' Compensation (TDIDWC), and collaborating policies of TTUHSC El Paso.

REVIEW: This HSCEP OP will be reviewed on March 1 of each odd-numbered year by the Managing Director of the Texas Tech University System Office of Risk Management, with recommendations for revisions submitted to the Chief Financial Officer by March 15.

POLICY/PROCEDURE:

1. General.

- a. Workers' Compensation Insurance (WCI) is regulated by the State of Texas and provides medical benefits and income indemnity for injuries and occupational illnesses that arise out of the course and scope of employment. This program covers all employees whose names appear on the payroll. The State Office of Risk Management is the agency directly responsible for administering this program for state employees. The TDIDWC promulgates rules and regulations governing WCI.
- b. The Incident Investigation program provides for investigation and analysis of all reported accidents that arise out of the course and scope of employment that did, or could have, resulted in injury or illness, and includes accidents involving employees that occur in or on TTUHSC El Paso facilities. All employees are included in the Incident Investigation program.

2. Program Administration.

- a. Orientation - Workers' Compensation Insurance. The Managing Director of the TTU Office of Risk Management is available to inform all employees of this program, their responsibilities in connection with it, and how to properly access benefits. This subject will be included in the briefing given to all new employees.
- b. Orientation - Incident Investigation. The Director of Safety Services is available to inform all employees of this program, their responsibilities in connection with it, and how to obtain assistance in meeting these responsibilities. This subject will be included in the briefing given to all new employees.
- c. Administrator/Supervisor's Responsibilities. All administrators/supervisors with managerial authority over employees' job duties shall provide the following assistance as appropriate when reportable work related accidents, injuries, or occupational illnesses occur.
 - (i) Assist injured employee in obtaining first aid or medical care if necessary. Note: If a blood borne pathogen exposure occurs, for the purpose of qualifying for

Worker's Compensation, the employee who claims a possible work-related exposure to HIV infection must provide the employer with a written statement of the date and circumstances of the exposure and document that, within 10 days after the date of the exposure, the employee had a test result that indicated an absence of HIV infection (28 TAC Part 2 Chapter 122 Rule 122.4 and Texas Health and Safety Code 85.116).

(ii) With the exception of emergency medical care, please utilize the following provider provisions for the employee's medical care:

a) In-network coverage- El Paso County falls within a network area; however, these coverages are subject to change. Please access the link below to verify coverage on the area service map:

<http://www.sorm.state.tx.us/workers-compensation/health-care-network>

You must complete the Workers Compensation Network Acknowledgement form ([HSCEP OP 70.13h](#)).

(iii) Call the Human Resource department and verbally report the injury or incident as soon as possible.

(iv) Submit a fully completed "FIRST REPORT OF INJURY/ILLNESS/ACCIDENT" form ([HSCEP OP 70.13a](#)) Human Resource Department. This "FIRST REPORT OF INJURY/ILLNESS/ACCIDENT" form must be in the Human Resource department the close of business the next working day following the accident. **This form must be completed and signed by the administrator/supervisor, not the employee.** Also ensure that the employee completes and submits an "EMPLOYEE'S REPORT OF INJURY" (SORM 29) ([HSCEP OP 70.13b](#)), which is the employee's perspective of the injury, to the Human Resources Department.

(v) Submit completed "AUTHORIZATION FOR RELEASE OF INFORMATION" (SORM 16) form ([HSCEP OP 70.13c](#)) to the Human Resources Department.

(vi) If there were witnesses to the accident, submit "WITNESS STATEMENT" (SORM 74) form(s) ([HSCEP OP 70.13d](#)) to the Human Resources Department.

(vii) If lost time is involved (more than one workday), assist the employee in completing an "EMPLOYEE'S ELECTION REGARDING UTILIZATION OF SICK AND ANNUAL LEAVE" (SORM 80) form ([HSCEP OP 70.13e](#)). Submit completed SORM 80 form to the Human Resources Department. NOTE: Failure to complete this form is deemed an election for unpaid leave. (Texas Labor Code, Section 501.044). The employee's department administrator will need to submit appropriate personnel forms in accordance with TTUHSC El Paso OP 70.01 (Leaves of Absence) to place the employee immediately in Leave Without Pay.

(viii) Submit "SUPERVISOR'S INVESTIGATION OF EMPLOYEE'S ACCIDENT/INCIDENT" ([HSCEP OP 70.13f](#)) to the Human Resources Department after review and signature of Unit Safety Officer and Department Chair/Director.

(ix) Review [HSCEP OP 70.43](#), Early Return to Work (ERTW)/Alternate and Light Duty Assignments, and take appropriate action.

(x) Submit to Human Resources department the appropriate forms in accordance with [HSCEP OP 70.01](#), if the employee uses accrued sick leave or is placed on

leave without pay.

- (xi) Submit a Workers Compensation Network Acknowledgement form ([HSCEP OP 70.13h](#)) to Human Resource department, if applicable.

Attachments A through H are available from the Human Resource department and may be reproduced and used, downloaded/printed from this HSCEP OP.

d. Employee's Responsibilities.

- (i) Employees are required to immediately report all on-the-job accidents, injuries, or occupational illnesses to their supervisor, regardless of whether medical expenses were incurred or time away from work was involved.
- (ii) Employees are responsible for obtaining and completing an "EMPLOYEE'S REPORT OF INJURY" (SORM 29) form ([HSCEP OP 70.13b](#)). The completed form must be sent to the Human Resources Department.
- (iii) Submit a complete "AUTHORIZATION FOR RELEASE OF INFORMATION" (SORM 16) form ([HSCEP OP 70.13c](#)) to the Human Resources Department.
- (iv) If an attending physician reports that an employee is unable to return to work following an occupational injury, the employee must choose one of two elections on the "EMPLOYEE'S ELECTION REGARDING UTILIZATION OF SICK AND ANNUAL LEAVE" (SORM 80) form ([HSCEP OP 70.13e](#)):
 - 1) To use accrued sick leave (with an accompanying annual leave election) until exhausted;
 - 2) To not use accrued sick or annual leave and to be placed on leave without pay immediately.

NOTE: Failure to complete this form is deemed an election for UNPAID Leave, Texas Labor Code, Section 501.044. The employee's departmental administrator will need to submit appropriate personnel forms in accordance with HSCEP OP 70.01 to immediately place the employee on leave without pay.

- (v) Submit a Workers Compensation Network Acknowledgement form ([HSCEP OP 70.13h](#)) to the Human Resources Department, if applicable.

e. Workers' Compensation Claims Coordinator is the point of contact for all Workers' Compensation Claims and is the interface between the employee, supervisor, and administrator, Human Resources Department, TTU Office of Risk Management and the State Office of Risk Management. This individual assists employees in properly applying for benefits and coordinate reporting to the Human Resources Department as follows:

- (i) Within one working day following notification, review the information on the "FIRST REPORT OF INJURY/ILLNESS/INCIDENT" with other available information, contact the supervisor or department to acknowledge receipt of the report and to verify (or complete missing) information to enable accurate reporting of the injury, prior to completing and submitting the "EMPLOYER'S FIRST REPORT OF INJURY OR ILLNESS" (TWCC 1S), if necessary, to the Human Resources Department;
- (ii) May conduct a fact finding interview to discover, to the extent possible, all

applicable direct and indirect causes that contributed to the accident;

- (iii) Maintain records on incident reports and investigations, and provide trend analysis as requested;
 - (iv) Establish and maintain an incident or injury file on each case;
 - (v) Submit to the TTU Office of Risk Management the various forms required to complete the WCI claim and as described in the State Office of Risk Management *Workers' Compensation Claims Coordinator Handbook*;
 - (vi) May request from State Office of Risk Management the services of a Case Manager upon approval from the Managing Director of Risk Management for Texas Tech University System.
- f. Office of Human Resources Department Responsibility. Once the department has submitted the completed Leave Without Pay form to HR, HR enters the leave information into the Banner System.

3. Benefits.

Workers' Compensation Insurance benefits are legislated by the Texas Workers' Compensation Act. The Texas Department of Insurance, Division of Workers' Compensation, promulgates rules and regulations governing Workers' Compensation Insurance and the State Office of Risk Management adjudicates claims for benefits made by State employees, including employees of Texas Tech University System, Texas Tech University, and Texas Tech University Health Sciences Center El Paso.

Specific information about WCI benefits and eligibility may be found on the Texas Department of Insurance, Division of Workers' Compensation website at: <http://www.tdi.state.tx.us/wc>.

4. Leave Without Pay.

- a. Refer to [HSCEP OP 70.01](#) for specific information in the proper reporting and administration of Leave Without Pay.
- b. Leave Without Pay shall be reported on the Leave Without Pay form (LWOP) through normal administrative channels and shall be dated from the first workday through the last workday the employee is absent without pay, and should indicate the number of work hours missed. It is important to report all leaves without pay even on hourly employees. Failure to submit a timely LWOP may result in large additional workers' compensation insurance expenses to the institution for terminated employees or employees on leave without pay.

5. Right to Change Policy.

TTUHSC El Paso reserves the right to interpret, change, modify, amend, or rescind this policy in whole or in part at any time without the consent of employees.

[HSCEP OP 70.13a: First Report of Injury/Illness/Accident](#)

[HSCEP OP 70.13b: Employee's Report of Injury](#)

[HSCEP OP 70.13c: Authorization for Release of Information](#)

[HSCEP OP 70.13d: Witness Statement](#)

[HSCEP OP 70.13e: Employee's Election Regarding Utilization of Sick and Annual Leave](#)

[HSCEP OP 70.13f: Supervisor's Investigation of Employee's Accident/Incident](#)

[HSCEP OP 70.13h: Workers Compensation Network Acknowledgement](#)