

Worker's Compensation Claims Checklists

Initial Response

The initial period is critical in handling workers' compensation claims. Be sure to:

1. **Immediately:**
 - a. Administer first aid
 - b. Accompany injured worker to a selected medical provider
 - c. Report incident within company
 - d. Notify family
 - e. Assign responsible person to follow claim

2. **First Day:**
 - a. Report to claim handler outside company (insurance company or third party administrator)
 - b. Determine, on a preliminary basis, whether the injury is covered by workers' compensation
 - c. Counsel employee and/or family on claims procedures, available benefits, company's continuing interest in employee's welfare, etc.
 - d. Follow up with the employee or family

3. **First Week**
 - a. Coordinate payment of initial benefits
 - b. Talk to treating physician to learn diagnosis and treatment plan
 - c. Evaluate whether medical rehabilitation is necessary or appropriate
 - d. Develop return to work plan
 - e. Forward mail
 - f. Contact the injured employee and/or the family

4. **First Month**
 - a. Use a "wellness" approach (cards, phone calls, regular visits) to continue to reinforce company's concern
 - b. Consider medical examination by independent physician, if warranted
 - c. Reevaluate treatment plan based on new medical information
 - d. Update return to work plan
 - e. Contact the injured employee and/or the family

5. **Ongoing**
 - a. Continually reevaluate treatment plan
 - b. Update return to work plan
 - c. Refer to vocational rehabilitation
 - d. Refer to pain management evaluation of chronic pain, if appropriate
 - e. Maintain contact with the injured employee and/or the family

Collecting Information

Whether it's the businesses owner, or someone assigned by the business owner to keep track of the claim, here's some advice for the types of information the person overseeing the claim should be gathering:

About the Employee

- Name, nicknames, maiden name, previous names
- Address-current and previous (length of time living at both addresses)
- Phone number, pager number, cellular number
- Social security and driver's license numbers
- Sex
- Date of birth
- Marital status
- Dependents and immediate family contact
- Non-relative contact
- Date of hire (state hired, if applicable)
- Job classification, if applicable (insurance class or company classification)
- Vehicle (type, year, license number)
- Interests or hobbies
- Length of time as a state resident

About the Injury

- Time and date of injury
- Date of death (if applicable)
- State of injury
- Nature of injury (sprain, fracture, etc.)
- Body part(s) affected; any previous injury to the affected body part(s)
- Source of injury (machines, hand tools, buildings, etc.)
- Type of injury (fall, struck by object or vehicle, overexertion, repetitive motion trauma)
- Witnesses
- Work process involved (lifting, carrying, etc.)
- To whom was the injury reported
- Who filled out the first report of injury report
- Plant or location
- Job
- Time and date the injury was reported
- Shift, if applicable

About the Claim

- Date employer first notified
- Who was notified, by whom?
- Date employer was notified of workers' compensation claim
- Date insurance company or service company notified
- Date state agency notified
- State case number
- Average weekly wage
- Benefit rate
- Health care providers
- Health care costs
- Other benefits lost (Did the employer stop paying vacation, health benefits, etc.?)
- Other benefits received
- Offset for other benefits
- Date disability started
- Date of first payment
- Projected return to work date
- Date case closed
- Date of maximum medical improvement
- Impairment rating
- Lost days
- Total benefits paid
- Reserves
- Vocational rehabilitation activity
- Subrogation (Is some third party responsible?)
- Second injury fund potential

Oral Statement from Injured Worker

- Conduct the interview in a non-adversarial setting
- Demonstrate concern and empathy
- Allow the worker to talk
- Do not rush the worker
- Reenact the accident
- Check for photos and/or video of the accident

Written Statement from Injured Worker

- Note the location where the statement is taken
- Let the employee write the statement, if possible
- Statement should be written in ink
- Statement is taken ASAP after the injury
- Describe the worker' pre-injury and post-injury actions
- Request that the worker and any witnesses sign the statement
- Make sure the employee initials any changes
- Give copy of statement to employee
- List the date and time of the statement

Oral Statement from Witness(es)

- Note witness' location at the time of injury
- Record witness' relationship to the injured worker
- Interview witnesses individually
- Do not rush the witness
- Make sure the statement is unrehearsed

Written Statement from Witness(es)

- Make sure the witness writes the statement in ink
- Record the stated ASAP after the injury
- Make sure the witness records his/her actions before, during and after the time of injury
- Request that the witness sign the statement and initial any changes
- Record the date and time of the statement
- Give a copy of the statement to the witness

If Litigation Occurs

- Defense attorney, law firm
- Claimant attorney, law firm
- Judge
- Cost of litigation (spending more than paying?)
- History of dispute
- Settlement