

Note: Terms in *bold and italics* throughout this policy are defined below.

## **PURPOSE:**

To provide City benefits to eligible employees with accepted workers' compensation claims. This administrative regulation touches on but is not intended to explain an employee's rights under workers' compensation law.

## SCOPE:

This regulation applies to all employees and some volunteers as defined by City resolution, unless otherwise specified in a labor agreement, hereafter referred to as employees.

#### **POLICY:**

The City provides workers' compensation benefits in accordance with state law for all employees for injuries and illnesses arising out of, and during, employment with the City of Springfield.

Benefits, including *time-loss*, will be administered in accordance with Workers' Compensation Law and Administrative Rules of the Workers' Compensation Division or its successor. Complaints arising under the provisions of Workers' Compensation Law or Rule are not subject to the grievance process but are to be addressed through procedures established by the Workers' Compensation Division, State of Oregon, or its successor.

Employees must conduct their work in compliance with all safety rules, and injuries must be reported immediately to their supervisor. Claims resulting from horseplay, scuffling, practical jokes, or other similar activities may be denied.

The City's supplemental workers' compensation pay in addition to time-loss will be governed by this administrative regulation as outlined in the Procedure section below.

#### **PROCEDURE:**

#### 1. Incident and Claim Reporting

1.1. In the event of a hospitalization or death of an employee contact the Risk Manager immediately at (541) 726-3724.

- 1.2. The employee or the department supervisor shall submit the incident analysis and supplemental medical information to Risk Management. Reports must be completed within:
  - 1.2.1. 24-hours for *near misses* and non-emergency/non-hospitalization.
  - 1.2.2. Within 12 hours for any hospitalization or employee death.
- 1.3. If an employee wishes to file a workers' compensation claim, the employee should complete an 801 form "Report of Job Injury or Illness" and turn it in to Risk Management.
  - 1.3.1. The 801 form is available on Springboard, on the City web site, or can be requested by calling Human Resources.
  - 1.3.2. The City will submit the claim within five business days of receiving notice.
- 1.4. If the employee goes to the doctor after injury, they should let the doctor know it is a work-related injury (Employees may not use the Springfield Wellness Center for treatment of work-related injuries.). The doctor should complete and submit form 827 "Worker's and Health Care Provider's Report for Workers' Compensation Claims." The employee will need to provide a copy of this along with the 801 form and any work status notices to Risk Management.
- 1.5. A complete claim packet will consist of:
  - 1.5.1. Incident Analysis Form,
  - 1.5.2. Supplemental Medical Form,
  - 1.5.3. 801, and
  - 1.5.4. Copy of 827 with notes from the treating physician regarding the employee's ability to return to work.

#### 2. Payment of Workers' Compensation and Time-Loss

2.1. "When an employee is absent from work due to an on-the-job injury or illness that is compensable under workers' compensation and results in eligibility for Temporary Total Disability (TTD) or Temporary Partial Disability (TPD) benefits (also known as 'time-loss'), the employee will retain their time-loss check and continue to receive their *regular paycheck* and benefits for up to 365 calendar days from the *date of disability*, unless otherwise specified in a labor agreement..

- 2.2. However, any time-loss payments will be deducted from the employee's paycheck and adjusted in the next available payroll cycle, or in subsequent paychecks if the paycheck is insufficient to cover the deduction.
- 2.3. No sick leave will be deducted from the employee's accruals during the 365 calendar days following the date of disability, or until claim closure, whichever comes first. No sick leave or other leave will be deducted from the employee's accruals for any Workers' Comp benefit waiting period as defined by Workers' Comp law.

#### 3. <u>Alternative Deductions</u>

3.1. If an employee is off work beyond the three-hundred-sixty-five (365) calendar days from the date of injury due to an accepted on-the-job injury or occupational illness, the employee must use accrued leave at the default level or higher, as outlined in the table below and may elect which type of accrued leave to use (i.e. vacation, paid time off, floating holiday, compensatory time, and sick leave), in addition to the amount of workers' compensation time-loss payments, up to the amount of their regular paycheck. Employees must use paid leave before taking unpaid leave.

	Default Leave Use	<b>Option 1</b>	Option 2	
Shift Length	(Per Shift)	(20%)	(30%)	Maximum Option
12-hour shift	1.25 Hours	2.5 hours	3.75 hours	Up to 33.36% of shift
10-hour shift	1 hour	2 hours	3 hours	Up to 33.36% of shift
8-hour shift	1 hour	1.75 hours	2.5 hours	Up to 33.36% of shift

## 4. Employment Status and Benefits during Leave

- 4.1. During the period of disability and as long as the employee is receiving workers' compensation time-loss payments or is using accrued leave, the employee shall continue to receive all forms of compensation (base wages, step increases, incentive pay, premium pay, all insurance, etc.) and shall accrue time in their leave banks. The employee will continue to qualify for health insurance and will be responsible for the employee portion of insurance benefit premiums.
- 4.2. In the event an employee's time-loss benefits end during the period of disability, but the employee is unable to return to work, the employee may use all accrued leave benefits to receive their regular paycheck.

#### 5. Denial of Claim

5.1. If an employee's compensation claim is denied by the worker's compensation carrier, the employee's injury or illness will be treated as non-work related.

5.2. In the event the denial is reversed by the Workers' Compensation Board or Oregon courts, the employee's sick leave and other paid leave accounts will be retroactively adjusted to reflect the approval.

## 6. Modified Duty

- 6.1. Upon release to modified or full duty, the employee must submit a doctor's note to Human Resources stating whether the employee is released with or without restrictions. If restrictions exist, the note must specify the nature of the restrictions and provide an estimated date when the employee can return to full duty without restrictions.
- 6.2. In the event of a work- related injury or illness, the City may offer reasonable modified duty consistent with the employee's medical restrictions as determined by their health care provider. If an employee refuses modified duty, they will become ineligible for City *supplemental pay* and must use accrued leave balances.

## **DEFINITIONS:**

- "Regular Paycheck" means base wage (including applicable step increases and cost of living adjustments) plus non-worked incentives (certification, education, language, etc.). Overtime and worked on-call pays are excluded.
- 2. "Healthcare Provider" is a professional who meets the definition of attending physician, as provided in Oregon Workers Compensation laws.
- 3. *"Time-loss"* is statutory pay from the workers' compensation carrier. Examples include Temporary Total Disability (TTD) and Temporary Partial Disability (TPD) as defined by Workers Compensation law.
- 4. "Supplemental Pay" is pay from the City in addition to workers' compensation time-loss.
- 5. **"Salary Continuation"** is the ability for a self-insured government employer as defined by state law to offer continuation of a workers' regular wages in lieu of receiving time-loss. The City is currently fully insured and not eligible to offer salary continuation.
- 6. *"Date of Disability"* is the date the workers' compensation carrier designates the claim as disabling.
- 7. *"Near Miss"* is an incident that did not result in property damage or employee injury or sickness.

## **RESOURCES:**

<u>Forms</u>:

- 1. <u>Bloodborne Pathogen Exposure Form</u>
- 2. Form 801 Report of Job Injury or Illness
- 3. Incident Analysis Form (IAF)
- 4. <u>Supplemental Medical Form</u>
- 5. <u>Works Status Report</u>

# Online Resources:

1. Oregon Occupational Safety and Health Division Rule 437-001-0774