

VSCC Work-Related Injury Reporting Procedures & Treatment Guide

These procedures are intended to emphasize the importance of reporting all work-related incidents, injuries, and/or illnesses. It is imperative for an injured employee to follow up with his/her supervisor to make sure all documentation of the incident is filled out correctly and submitted to the Manager of Environmental, Health & Safety (EH&S) for record keeping purposes. Even if the injury is minor, and you do not receive initial medical treatment, having a record of the incident protects you if any physical ailments or illnesses become issues in the future.

For workers' compensation purposes, an incident is any illness or injury that occurs while actively carrying out the roles and responsibilities of your job.

Following these guidelines will help minimize the potential for denial of a workers' compensation claim.

ALL WORK-RELATED INJURIES MUST BE REPORTED IMMEDIATELY

Call 911, or Campus Police, to report serious or life threatening injuries

For Non-Life Threatening Injuries:

1. Notify your supervisor immediately.
 - Your supervisor must complete a Supervisor Injury/Incident Report. If you witness a work-related incident where a fellow employee is injured and is unable to notify their supervisor, you should notify their supervisor and/or Campus Police for them.
2. You must call the Workplace Injury & First Notice of Loss Call Center at **866-245-8588**, immediately after the occurrence of an incident.
 - When calling the Workplace Injury & First Notice of Loss Call Center you will speak with a registered nurse. Nurses are available 24/7 to evaluate the nature of your injury and determine immediate care or treatment options.
 - If no medical treatment is recommended, the nurse will document the call for you and enter an incident report into the CareMC reporting system. No other action will be needed from you.
 - If the nurse recommends that you seek medical treatment, he/she will verbally provide you an approved list of physicians. From this list you must choose one provider who will then be the only physician authorized to treat you for your compensable injury. The State will not pay any medical expenses incurred from a physician other than your approved treating physician or a network physician you are referred to by your treating physician.
 - Follow up doctor and/or specialist appointments must be arranged by CorVel and NOT by the injured employee or the employee's supervisor. Note: This does not apply in situations requiring immediate emergency room treatment for serious or life-threatening injuries.
 - If you are seen in an emergency room or a minor medical clinic and you were advised to see a specialist, or your "regular/normal" physician for follow-up care, you must call the Manager of EH&S or CorVel prior to any follow up treatment. You will be provided a list of approved providers. From this list you must choose one provider who will then be the only physician authorized to treat you for your compensable injury. All doctors must be on the approved physicians list prior to follow-up treatment.

3. When seeking medical treatment

- You must notify the doctor's office that you were injured while at work and that you have filed, or will be filing, a claim for workers' compensation benefits with the state.
- Do not present your primary health insurance card for workers' compensation medical treatment. Your health insurance and workers' compensation coverage are two separate plans that do not overlap. Instead, CorVel will assign you a workers' compensation claim number that will be used to authorize/track all treatment associated with your work-related injury.
- After each office visit, the treating physician must provide a current work status to either clear you to return to regular duty, or define any work limitations you may have. You must present this work status to your supervisor and the Manager of EH&S prior to returning to work.
- If the treating physician determines that you need to work light/modified duty, your supervisor and the Manager of EH&S will review the work status to identify appropriate work within your limitations.
- If the treating physician determines that you need to be completely off work due to your injury/illness, it is your responsibility to communicate with your supervisor and the Manager of EH&S on a regular basis regarding your work status.
- You must provide copies of all related office notes to the Manager of EH&S. Due to HIPPA compliance, ONLY the Manager of EH&S/Human Resources will store medical records related to an employee's injury on the job.

4. If you are prescribed medication

- DO NOT fill the prescription using your personal health insurance provider information. Tell the pharmacist the prescription is for a workers' compensation injury/illness and that you are employed by the STATE of TN – VOLUNTEER STATE COMMUNITY COLLEGE. If available, provide your workers' comp. claim number and advise them that our workers' compensation insurance provider is CorVel. CorVel's phone number (888-726-7835) can be provided for verification.

The State of Tennessee and the State's TPA, CorVel, reserves the right to review claims for compensability and may assign a case manager to assist an employee. Certain outpatient procedures must be pre-certified by state processes before occurring. Providers of these services know they should contact the adjuster before diagnostic testing, physical therapy, injections, surgeries, referrals, etc.

Once you file a workers' comp. claim, you are required to follow the procedures outlined in this document. All instruction from physicians, case managers, and EH&S must be adhered to completely.

For questions regarding these procedures contact the Manager of EH&S, Michelle Boyd, at 615-230-3617 or Michelle.Boyd@volstate.edu.



Your Location of Employment is

STATE TN- VOLUNTEER STATE COMMUNITY COLLEGE

Employee Injury Call Center

866.245.8588

Call to speak with a registered nurse
in the event of a workplace incident or injury.

Call 911 for Medical Emergencies



Volunteer State Community College

SUPERVISOR INCIDENT / INJURY REPORT

Supervisors must complete this report following all work-related injuries sustained by their employees. All sections must be completed as this information will be used to initiate a Workers' Comp. claim.

IMPORTANT: Remind Employee that medical treatment for work-related injuries must be authorized by the Workers' Comp. Third Party Administrator (TPA), Corvel, in order for medical expenses and/or lost time to be paid.

Return Completed Report to The Manager Of Environmental, Health & Safety - Wood Campus Office 106J

Name of Injured Employee:		Date of Report:		Time of Report:	
Employee Address:			City:	State:	Zip Code:
Employee Home Phone:		Employee Work Phone:		DOB:	Gender:
Department/Job Title:		Hire Date:	Date of Injury:	Time of Injury:	
Time Employee Began Work on Date of Incident:		Marital Status:	Employee V-Number		
Employment Status (full time, part time, etc.):		If Part Time, Number of Days Worked Per Week:			
Supervisor's Name & Title:				Supervisor's Work Number:	
Were Medical Services Provided?		Medical Services Provided by:			
Exact location of Incident:					
Witness Name:		Address:		Phone:	
In the box Below, Describe What The Employee Was Doing Right Before The Incident Occurred:					
Please Describe, In Detail, How the Incident Occurred (Continue on Supplementary Report If Necessary):					
Describe The Incident/Injury - Be Specific and Include All Body Parts Affected:					
What Object or Substance Directly Harmed The Employee?					

SUPERVISOR INCIDENT / INJURY REPORT CONTINUED

Describe unsafe actions/conditions that may have contributed to the incident:

Describe actions that will be taken to prevent future accidents/incidents:

Additional Comments:

Additional Workers' Comp. Reporting Instructions

FOR LIFE THREATENING EMERGENCIES CALL CAMPUS POLICE AT 3595 OR 911 IMMEDIATELY.

For non-life-threatening work-related injuries: Call Campus Police to report the injury. Instruct the employee to call 866-245-8588 to speak with a Corvel triage nurse. **This call must be made within 24 hours of incident.** The nurse, available 24/7, will assess the situation and provide treatment recommendations. **Employee must obtain a WC claim number on this call.**

If the nurse does NOT recommend medical treatment at this time: Complete the Supervisor Incident/Injury Report (WC Claim number must be noted on the top of the report). Advise the employee to contact the Manager of EH&S, Michelle Boyd, at ext. 3617 if his/her condition worsens or treatment is requested at a later date.

If medical treatment IS necessary: Complete the Supervisor Incident/Injury Report (WC claim number must be noted on the top of report) and notify the Manager of EH&S, Michelle Boyd, via email or phone (ext. 3617). **The Corvel triage nurse will assist the employee in obtaining an appointment with an authorized WC physician. Please advise employee that he/she must obtain written work status instructions from the treating physician prior to returning to work.** The work status form must state that the employee can either return to work without restrictions or, if restrictions are recommended, it must contain detailed information regarding all limitations. All restrictions must be evaluated by the Manager of EH&S and the employee's supervisor to determine appropriate work assignments. Please remind the employee to communicate with the Manager of EH&S regarding follow-up appointments or additional medical treatment. **All appointments must be authorized by Corvel to ensure payment of medical expenses and/or lost time.** Questions regarding Workers' Comp. benefits should be directed to Michelle Boyd, Manager of EH&S at ext. 3617.

NOTE: The Supervisor Incident/Injury Report must be completed and forwarded to the Manager of EH&S. Completed report can be sent by email to Michelle.Boyd@volstate.edu or sent via interoffice mail to Wood Campus, Office 106J.

Employee Signature:

Date:

Supervisor Signature:

Date:

Manager of Environmental, Health & Safety Signature:

Date: