

WORKERS' COMPENSATION INFORMATION FOR INJURED WORKERS

How the Workers' Compensation System Works

- **Immediately** – The worker notifies his/her supervisor about the accident and how it occurred, and obtains medical treatment, if necessary. An Incident Report needs to be completed by a security guard on duty or a member of the Facilities Office staff. This must be completed as soon as possible after the injury, ideally within 24 hours. Once completed, a copy of the incident report will be forwarded to Human Resources. The Benefits Coordinator will follow up with the injured employee and/or supervisor to confirm whether or not medical attention was/is/will be sought.
- **Within 48 hours of the accident** – If the injured employee sought medical attention, the medical care provider completes a preliminary medical report on Form C-4 and mails this to the appropriate District Office. Copies must also be sent to PMA and to the injured worker.
- **Within 10 days of notification of the accident** – Juilliard reports the injury to PMA on Form C-2, Employer's Report of Work-Related Accident/Occupational Disease. PMA then forwards the C-2 on to the Workers' Compensation Board.
- **Within 14 days of the receipt of Form C-2** – PMA provides the injured worker with a written statement of his/her rights under the law.

If the worker does not lose time from work as a result of this injury, the process will end with the filing of the C-2 form. All medical bills will be paid to the provider(s) by PMA.

If the worker is unable to work as a result of this injury, the process continues as follows:

- **Within 15 days of initial treatment** – The provider completes a 15-day report of injury and treatment on a new Form C-4 and mails this to the District Office.
- **Within 18 days of receipt of Form C-2** – PMA begins payment of benefits if lost time exceeds seven days. If the claim is being disputed, PMA must inform the Workers' Compensation Board and the claimant (and his/her representative, if any). PMA files a form with the Board indicating either that payment has begun or the reasons why payments are not being made.
- **Every 2 weeks** – PMA continues to make payments of benefits to the injured employee. These are payable at 2/3 of your average weekly salary up to a maximum of \$803.21 per week (as of July 1, 2013). PMA must notify the Board when compensation is stopped or modified. The claimant is required to see the medical provider every 90 days or less. If the medical provider doesn't send in proof of disability, the claimant's payments may be stopped.
- **Every 45 days** – The provider submits progress reports to the Board. Depending on the type of injury the claimant sustained, the provider may need to supply copies of the progress reports on an ongoing basis to PMA as well.

- **After 8 weeks** – PMA considers the necessity of rehabilitation services for the injured worker.
 - ❖ If a work related injury causes the employee to lose time from work, s/he must use any accrued sick time to cover the first five days (waiting period). After the waiting period, the employee continues to use any remaining accrued sick time until it is exhausted, at which point the employee will receive only the workers' compensation payments from PMA. Juilliard requests reimbursement from PMA and, upon the employee's return to work, credits back the equivalent amount of sick time to the employee's account. If the employee is absent for more than 11 days, Juilliard will also be reimbursed for the waiting period (or the employee will receive workers' comp if s/he had no sick time accrued) and will credit the employee with any sick time s/he used during the waiting period, again equivalent to the workers' comp payment we receive.
 - ❖ All medical/dental/vision, life insurance and disability benefits continue while the employee is out of work **and** receiving payment from workers' compensation for lost time. The employee is still responsible for their normal benefits contributions while out, and can submit payments directly to Juilliard. **Pension contributions will not be made during any period when the employee does not receive a paycheck from Juilliard.**

PMA Group's Roles and Responsibilities

Prompt and immediate reporting of an injury to PMA enables better claim management.

PMA will do the following once they receive notification of an injury or lost time event:

1. Conduct a 3-point contact with the worker, employer and provider within 48 hours of receipt of the loss information.
2. Investigate the claim based on the jurisdictional guidelines.
3. File the appropriate forms and letters.
4. Initiate payment for provider services and lost time injuries.
5. Inform the injured worker of her/his rights and responsibilities.
6. Maintain contact with all parties to keep apprised of the worker's medical condition, capabilities, and return to work process.
7. Advise the employer and the employee when medical management is assigned based on the length of disability and severity of the injury.
8. Coordinate return to work with the employee, employer, and physician.
9. Participate in meetings via telephone as scheduled to discuss work status and plans of injured employees.

Employee Rights and Responsibilities

1. To report all accidents and injuries to the employer within 24 hours where possible but in any event as soon as practical after the occurrence.
2. To participate in the incident and accident investigation process.
3. To provide the employer with prescribed medical documents throughout the duration of any incapacity for work. Your physician must submit documentation supporting your claim directly to PMA. **You are not responsible for paying any bills related to your injury.** To the extent possible, have all bills sent to PMA.
4. To undertake appropriate treatment from medical experts to facilitate a safe and suitable return to work.
5. To arrange appointments as to avoid disruption to any rehabilitation and return to work plan.
6. To actively participate in the planning and implementation of the rehabilitation return to work plan.
7. To actively participate in a vocational rehabilitation and return to work plan with the agreed primary goal being return to work.
8. To accept the provision of safe and suitable alternative duties where they form part of an agreed rehabilitation and return to work plan.
9. To undertake safe and suitable work that has been offered and which you are capable of performing.
10. To comply with agreed medical direction and functional capabilities.
11. To notify your supervisor of your availability for work at either the time of the accident or within 24 hours after each medical visit.
12. To provide the following information to PMA after each medical appointment:
 - Anticipated return to work date;
 - Current prognosis;
 - Next MD appointment;
 - Current capabilities and expected length of time with restrictions.
13. To attend all appointments and give reasonable notice and reasons prior to cancellation.
14. To avoid unnecessary litigation and adversarial contests with the employer.

Contact Information

- Juilliard
 - Dylan Flynn, Benefits Coordinator, Human Resources
212-799-5000, ext. 356
dflynn@juilliard.edu
- PMA
 - Mailing Address for Providers:

PMA Customer Service Center
P.O. Box 5231
Janesville, WI 53547-5231

- Bonnie Kreis, Senior Account Claims Representative
800-329-6185 x 7206
Bonnie_Kreis@pmagroup.com

- If Bonnie is not available:
Lynn Springer, Senior Account Claims Representative
800-329-6185 x 6256
Lynn_Springer@pmagroup.com

- Pharmacy Program
 - Express Scripts Patient Care Contact Center
800-945-5951

- Provider Network
 - First Health Network
www.pmagroup.com
Link to providers in your geographic region. While not mandated by New York State, this network is provided as a service to injured workers who wish to obtain the names of providers who can manage injuries.