WORKERS' COMPENSATION #190

- **1.0 ELIGIBILITY.** Davis County provides Workers' Compensation benefits to all County employees and volunteers who become injured on the job and cannot perform their normal duties or who contract occupational diseases as covered under The Workers' Compensation Act. Employees as defined in 34A-2-104 Utah Code Annotated are entitled to Workers' Compensation benefits. After an accident, Workers' Compensation benefits continue even though the employee may have been fired or quit the job.
- **2.0 REPORTING.** Any injury occurring on the job must be reported immediately to the employee's supervisor no matter how slight the injury may seem. Failure to report may result in benefits being lost or reduced. Administrative Officers must notify the Office of Personnel Management immediately (as soon as it is possible), so that the Office of Personnel Management can complete the Employer's First Report of Injury form and submit it to the Workers' Compensation Fund of Utah. Administrative Officers notify the Office of Personnel of the incident by entering the necessary information into the computer and submitting a Davis County Report of Employee Injury to the Personnel Office. Departments must also notify the Office of Personnel Management when an employee is placed on or returns to work from Injury Leave.
- **3.0 DESIGNATED PREFERRED PROVIDER PHYSICIANS.** Employees injured while on the job shall visit a physician designated as a Preferred Provider when medical attention is necessary. After the initial visit to a Preferred Provider, the employee may switch to a physician of their choice. Employees failing to use a Preferred Provider may be responsible for payment of medical bills. Employees switching from a Preferred Provider to a private physician are advised to notify the Workers' Compensation Fund. Administrative Officers shall make a list of Preferred Providers available to employees.
- **4.0 INJURY LEAVE.** Employees who are injured while on the job shall comply with all regulations of the Workers' Compensation Act as amended in the Utah State Code. Employees on Injury Leave without pay (for the complete pay period) shall not be required to pay any portion of the cost of medical, dental, or life insurance premiums provided by the County while on Workers' Compensation until they return to work. Employees on Injury Leave without pay shall not accrue sick and vacation leave. The Eligibility Date of an injured employee will not be adjusted because of an on-the-job injury.
- **4.1 FAMILY AND MEDICAL LEAVE (FML).** Employees who miss or are expected to miss five or more work days shall be placed on FML. FML aspects such as maximum amounts of leave, payment of premiums, physician certifications, etc., will apply. See Policy #140, Leave for further information of FML.

- **5.0 USE OF LEAVE.** Employees injured while on the job shall use sick leave, if available, for the remaining work hours of the day of the injury and the first three calendar days following the day of the injury. Employees with insufficient sick leave balances may use vacation leave or compensatory (comp) time. Utah State law requires that no compensation from the Workers' Compensation Fund shall be paid for the first three days following the day of the injury. Beginning the fourth day, Workers' Compensation benefits shall be utilized.
- **5.1 LEAVE.** Workers' Compensation benefits may be coordinated with available sick, comp time and vacation leave hours to maintain an employee's base gross pay level. Gross pay may be maintained by allowing the employee to utilize leave hours according to the following formula: "Base Gross Pay" minus "Workers' Compensation Benefits" equals "Compensation subject to leave utilization." "Compensation subject to sick leave utilization" divided by "the employee's hourly rate" equals "the number of hours the employee may use to maintain gross pay". Employees shall use sick leave, if there is a balance. If an employee has no sick leave to use, they may elect to take vacation leave or comp time to maintain gross pay. Employees without comp time, or sick or vacation leave balances shall be placed on injury leave without pay. Following an employee's return to work, partial absences from work which relate to the original injury shall be charged to sick leave, vacation leave or compensatory balances. Subsequent absences of a full day or more shall be treated in accordance with paragraph 9.2, Compensation Payments.
- 6.0 RETURN TO WORK. Employees on Workers' Compensation shall resume the same or comparable position of the same grade and classification. If the employee, in the opinion of a doctor, cannot perform the duties of the position from which leave was taken, the Administrative Officer is not required to accept the employee for work. The Administrative Officer may at their discretion request a second opinion to verify the physician's findings. A list of duties should be sent to the verifying physician. If the employee does not return when released from the doctor's care, the Administrative Officer shall notify the employee by certified mail that they are on unapproved leave and expected to return to work immediately. An employee who does not report as directed by certified mail, and makes no contact with the Administrative Officer within three (3) days following the receipt of certified mail or signed receipt of delivery, shall be considered to have resigned and be terminated. An employee who returns to work from Workers' Compensation and whose performance is subsequently found to be unsatisfactory may be discharged according to the provisions of the Davis County Merit Ordinance.
- **6.1** The County requires employees to present medical certification from their doctor of fitness to continue or resume work, or of physical inability to resume work.
- **7.0 MEDICAL EXPENSES.** All medical expenses including prescription drugs incurred while treating on-the-job injuries shall be submitted by the employee to the Workers' Compensation Fund and not through County health insurance programs.

- **8.0 CORRESPONDENCE.** After Davis County files the initial report of injury, any subsequent correspondence, or request for reimbursement should be handled directly between the injured employee and the Workers' Compensation Fund much the same as any other type of insurance claim. When the Workers' Compensation Fund receives an employee's report of injury, they assign a claim number and an adjuster to handle the claim. This claim number can be obtained from Workers' Compensation Fund, by calling and advising them of the social security number and the date of the injury.
- **9.0 NOTE:** The following paragraphs are descriptive of the benefits available under the Workers' Compensation Act and are included here as a convenience to County employees. In all cases, the rules of this act shall apply and Davis County hereby gives notice that it is the County's intent to comply with such act.
 - **9.1 COVERAGE.** Workers' Compensation covers and pays the following:
 - A. Hospital and medical bills.
 - B. Time lost from work.
 - C. Permanent loss of body function.
 - D. Prosthetic devices.
 - E. Death and burial benefits.

Doctors are not allowed to bill for any unpaid amounts. Bills for unpaid amounts should be sent to the Workers' Compensation Fund.

9.2 COMPENSATION PAYMENTS. The doctor's report predicts the length of time you will be off work. The employer's report indicates the employee's average gross weekly wage. This information is used by the Workers' Compensation Fund to figure the time and rate of compensation.

TIME	
TIME OFF WORK REPORTED BY DOCTOR	PAYMENTS BY WORKERS' COMPENSATION
Less than 3 days	None
1 to 14 days	All days except first 3
More than 14 days	All days including first 3

In computing days, add the number of weekend days or holidays. Time off does not need to be consecutive days, but must be confirmed by a doctor's report.

Workers' Compensation rates are computed by multiplying the employee's gross weekly wage by 66 2/3% and adding \$5 for dependent spouse and \$5 for each dependent child under eighteen (18) years of age. Contact Workers Compensation Fund to obtain current minimum and maximum benefit amounts.

- **9.3 LUMP SUM SETTLEMENT.** After the doctor's rating has been received by the Workers' Compensation Fund, permanent partial compensation payments will be made in the same manner that temporary total payments were made, usually every other week. Lump sum payments of the permanent partial award are not ordinarily made. However, in special cases of extreme hardship, consideration will be given to lump sum settlements. An 8% per annum discount can be deducted on all un-accrued amounts paid in a lump sum.
- **9.4 TEMPORARY TOTAL DISABILITY COMPENSATION.** Temporary Total Disability Compensation is paid according to the dates that the doctor certifies the employee is totally unable to work. During the time that the employee is receiving medical care, the doctor must send medical reports to the Workers' Compensation Fund to document the medical progress of the employee and to establish the dates for which temporary total compensation will be paid.
- 9.5 LIGHT DUTY WORK RELEASE TEMPORARY PARTIAL. Where the doctor certifies that the injured employee can do "light duty work" for a period of time (with the expectation that the employee will be able to return to full duty within a reasonably short time), the injured party will be paid 66 2/3 of the difference between the pay prior to the accident and the light duty" salary, provided the employer at the time of the injury provides such work. If the employer at the time of the injury cannot supply such work, the injured employee is to remain on temporary total disability until released to return to work by the physician. This pertains only to accidents having occurred on or after May 12, 1981.
- **9.6 PERMANENT PARTIAL DISABILITY COMPENSATION.** Permanent Partial Disability Compensation is given to an employee who suffers a permanent loss of body function because of a job injury. This rating may occur at the time the employee was released for work or it might be somewhat later when the employee had reached a state of recovery. It is a partial disability inasmuch as the employee is physically able to return to work. Disability ratings and compensation are fixed by law as to the amount of the permanent partial rating or award and are determined by the State Industrial Commission Rating Board.
- **9.7 PERMANENT TOTAL DISABILITY.** Permanent Total Disability begins when one of the following serious conditions exists:
 - A. MAY BE ABLE TO WORK The employee meets the requirements of the Utah Code for permanent total disability for suffering the loss of function or the loss of both hands, or both arms, or both feet, or both eyes, or any combination of these.

- B. UNABLE TO WORK The employee has sustained a permanent disability which is so serious and totally disabling that they would not be able to return to any work whatsoever. For such injuries, the employee would receive compensation over a period of 312 weeks (6 years) from the Workers' Compensation Fund. After that, the employee would receive weekly benefits from the Industrial Commission's special fund.
- **9.8 CHANGE OF DOCTORS.** Employees must first be treated by a Preferred Provider. The employee may make one change of doctor without requesting the permission of the Workers' Compensation Fund, so long as the Fund is promptly notified of the change by the employee. Any changes beyond one doctor made without the permission of the Fund may be at the employee's own expense. It shall be the responsibility of the employee to make the proper filings with the Industrial Commission when changing locale and doctor.
- **9.9 ARTIFICIAL APPLIANCE.** The maximum insurance payment for an artificial prosthesis is \$1,800, although in some few special cases this amount may be increased by the Industrial Commission. Broken appliances, such as eye glasses, may be replaced.
- **9.10 CHANGE OF ADDRESS.** Employees who change address must notify the County and the Workers' Compensation Fund. Employees leaving the state must complete two industrial compensation forms:
 - A. A request for permission to leave the state, and
 - B. An attending physician's certificate. These two forms legally protect you and guarantee the continuation of compensation benefits.
- **9.11 HEARINGS.** Employees who have questions or problems with the Workers' Compensation Fund may request a hearing by completing forms available from the Industrial Commission. Employees may be represented by an attorney at hearings. The attorney's fees will be paid from the award that might be granted. The rate of fee is fixed by the Industrial Commission and usually does not exceed 20% of the award.
- **9.12 SOCIAL SECURITY BENEFITS.** Employees who are eligible for both workers' compensation and social security benefits will receive less social security benefits but will not receive less workers' compensation benefits.
- 9.13 UNEMPLOYMENT INSURANCE. The unemployment insurance program at Workforce Services requires a person to make the declaration that they are physically able to work and would do so if given the appropriate opportunity. Therefore, employees would not be eligible for unemployment insurance if receiving Temporary Total compensation benefits because the doctor believes that the employee is "totally" unable to work. However, when the doctor releases the employee to return to work, the employee may be eligible for unemployment insurance up to the time that the employee is able to find a job. Injured employees must apply for

unemployment benefits within the four week period following the day the doctor releases the employee to return to work.

9.14 DEATH BENEFITS. When the death of an employee is the result of an on-the-job accident or occupational disease, death benefits will be paid by the Workers' Compensation Fund to the spouse and/or dependents. There is also an allowance for burial costs.