

PROCEDURES FOR WORK-RELATED INJURIES SUPERVISOR'S RESPONSIBILITIES

The following procedures are designed to assist you when work-related injuries or illnesses occur to Nebraska Department of Education employees. Failure to follow these procedures may delay or jeopardize the employee's benefits and add unnecessary costs to the Agency. If you have any questions after reviewing these procedures contact Jayne Uher at (402) 471-9234.

I. When a Job Injury Occurs

A. If the injury requires *emergency assistance*:

- **Call 9-1-1 immediately**
- Call your Leaders Council Member or VR Area Administrator as appropriate, or contact Human Resources at (402) 471-4736.
- Also notify the front desk/receptionist and Security that emergency personnel are on their way.

If the employee is unable to complete the *NDE Report of Alleged Occupational Injury/Illness* form immediately, the supervisor completes the report to the extent possible and sends a copy to Human Resources. As soon as possible, the employee completes his/her portion of the original form and gives it to the supervisor to forward to HR. If the immediate supervisor is unavailable, contact the next level supervisor to complete the form, and if that is not possible, contact HR. Forms are available on the Inside NDE website. Click on 'Human Resources' under 'Teams & Sections,' and 'HR Forms.'

B. If the injury requires *medical attention*, the supervisor sends the *Release to Return to Work* form along with the injured employee for the medical provider to complete. The following documents must also be completed within 24 hours of the injury and faxed to Human Resources at (402) 471-6639:

1. *NDE Report of Alleged Occupational Injury/Illness* (Supervisor & Employee jointly complete.)
2. *Employee's Choice or Change of Doctor Form*
3. *Authorization for Disclosure of Protected Health Information Form*

- C. Any workplace injury should be reported, whether or not it requires medical attention. The injured employee should complete the *NDE Report of Alleged Occupational Injury/Illness*.

Note: All employees need to be aware that lost time due to a work place injury or illness may not be covered unless the employee seeks medical attention and/or gets a doctor's note documenting the specific dates missed due to a work-related injury or illness. Our work comp administrator, FARA, with the concurrence of Risk Management, makes the final decision.

II. If Employee is Unable to Drive

- A. Medical personnel should be called to transport injured worker to the appropriate medical facility.
- B. The supervisor or designee, if deemed necessary, may accompany the employee to the appropriate medical facility.

III. If the Employee Should Lose Time From Work

- A. If the supervisor is informed that the employee will be gone from work due to the injury/illness for more than five (5) working days, the supervisor informs HR, HR informs FARA and also contacts Central Accounting. Central Accounting completes a 26-Week Wage History Statement and forwards it to HR and the designated FARA Claims Examiner. In addition, the employee's medical provider must complete the *Release to Return to Work* form **before** he/she returns to work.
- B. After FARA has approved the work comp claim and lost time, NDE picks up the first five (5) units (injury leave). A unit is considered a work day or any part of a work day. FARA starts paying on the eighth day or unit, and is responsible for two-thirds of the remaining lost time submitted. The sixth unit, seventh unit, and remaining one-third that FARA does not pay are charged to employee leave, if available, or unpaid. If the claim is not approved by FARA, the employee must use his/her own leave.
- C. Time Sheets
 - 1. Until FARA approves the claim, the employee should make note of lost time in the comment box at the upper right corner of the time sheet, and enter as sick leave. After FARA has approved the claim, the injured employee records his/her lost time on Form PB each month and forwards the form to Human Resources. HR then submits the Form PB to FARA

for approval. Once the lost time has been approved by FARA, the employee leave will be adjusted by Accounting.

IV. Processing the Claim

After receiving the report, FARA contacts the employee, the supervisor, and the medical provider to investigate the claim. FARA has 30 days to make a final decision.

V. If the Employee Should Require Modified Work (lifting restrictions, restricted work hours, restricted movement, etc. as determined by the treating physician)

Before the employee can return to work on modified duty, the supervisor and the employee will discuss work restrictions and any requests for modifications.

VI. Useful Contact Information

FARA (Work Comp Administrator)
9140 West Dodge Road, Suite 418
Omaha, NE 68114
Phone: (800) 576-8492
Scott Kirshenbaum, Supervisor (scott.kirshenbaum@FARA.com)

DAS Risk Management Division
Executive Building
521 S. 14th Street, Suite 104
Lincoln, NE 68508
Shannon Anderson, Risk Manager (shannon.anderson@nebraska.gov)
Phone: (402) 471-4436
Risk Management Website: <http://www.das.state.ne.us/risk/>

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