Frequently Asked Questions (FAQ)

Who is covered by Workers Compensation Insurance?

Anyone who receives a paycheck from the University is covered by WCI. This includes faculty, staff, GTA/GRA and student workers.

Who will be handling my Workers' Compensation Insurance claim?

In collaboration with Environmental Health & Safety (EH&S)- WC Program, your claim will be managed by a workers' compensation claims adjuster at Cannon Cochran Management Services, Inc. (CCMSI). Upon notice of your injury, the adjuster will conduct a thorough investigation which will include obtaining a statement from the injured employee, supervisor, and any witnesses.

What is Injury Management Organization (IMO)?

IMO is a certified Utilization Review Agent and the parent company to the IMO Med-Select Network®. IMO provides case management, pre-authorization, medical bill review, industry care programs, along with other healthcare management services.

The UT System has contracted with IMO Med-Select Health Care Network to assist employees with obtaining appropriate medical treatment for work-related injuries.

What is the process of choosing a doctor?

If you require medical treatment for a work-related injury, you should immediately choose a treating doctor from the network provider MO Med Select list to coordinate your care. Tell your treating doctor that any bills for your work-related injury should be sent directly to CCMSI. Bills for services unrelated to a reported on-the-job injury should be sent to your regular health insurer or should be paid by you.

You can call the IMO Customer Care Line: (214) 217-5936 or (877) 870-0638 for assistance with selecting a doctor.

What payments are expected of employees?

There is no out-of-pocket expense to the employee. Unless the injured employee has received medical treatment from an unauthorized physician, the employee should not be billed directly for health care intended to treat a work-related injury. If the employee receives a bill from a health care provider, the employee must send the invoice to the WCI Program immediately.

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Except in an emergency, if you receive medical care for a work-related injury which is not by or at the direction of your treating doctor, you **may** become responsible for payment of any charges associated with that care.

What is the process of changing the treating doctor?

You are limited to the changes you can make. These limits are set to ensure that you have quality and continuity in your care.

If it becomes necessary to change doctors for treatment of a work-related injury, you must contact the network at 888-466-6381 to notify them of your alternate selection, which is change #1. When you contact the IMO Med-Select network, you will be asked to complete the Request for Alternate Treating Doctor Form. The network will not deny your first request of an alternate doctor. Any subsequent change, which is change #2, you must request and receive permission from the network.

Will medical services need prior approval?

Some medical services must be approved in advance. Unless there is an emergency need, your treating doctor must contact the IMO Med-Select Network for approval prior to providing health care services such as hospital stays, surgical care, physical therapy, certain diagnostic testing, and rehabilitation programs.

What is the process of purchasing prescription medication?

When purchasing prescription drugs for treatment of the work-related injury, the employee will use the <u>Workers' Compensation Pharmacy Information form</u> or the mobile app <u>Text2Fill</u> process. Most pharmacies will submit bills to RX Bridge upon verification of coverage. Only prescriptions related to your compensable injury will be covered.

When do medical benefits become available to an employee who sustains an on-the-job injury?

Medical benefits are available immediately to a worker who is injured in the course and scope of employment. [NOTE: An employee should not use his or her health insurance card to obtain medical treatment for a compensable on-the-job injury.]

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Is time taken off for appointments with the doctor or physical therapist considered lost time?

No. Lost time is that period of time during which the injured employee is physically unable to work due to a compensable injury. Sick leave, or another form of leave that is available, must be used for this activity.

Can an employee who is receiving workers' compensation benefits also be eligible for Long Term Disability, Unemployment Compensation, and/or Social Security Disability benefits?

Yes. Receipt of workers' compensation income benefits does not automatically make a person ineligible for the benefits listed above. However, the amount of benefits due under other programs may be affected by receipt of workers' compensation income benefits. The Human Resources (HR) <u>benefits</u> area should be contacted for specific information regarding eligibility for Long Term Disability

Are workers' compensation benefits taxable?

Workers' compensation benefits are currently not subject to federal income taxation. If an employee has specific questions about this matter, we recommend the employee contact the Internal Revenue Service or his or her legal advisor.

What is the definition of Injury?

Damage or harm to the physical structure of the body and those diseases or infections naturally resulting from the damage or harm. Also includes occupational diseases.

What is the definition of a compensable injury?

An injury that arises out of and in the course and scope of employment for which compensation is payable under The Texas Workers' Compensation Act.

What is the definition of course and scope of employment?

An activity of any kind or character that has to do with and originates in the work, business, trade, or profession of the employer and that is performed by an employee while engaged in or about the furtherance of the affairs or business of the employer.

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What is the definition of disability as it relates to Workers' Compensation Insurance?

The inability to obtain and retain employment as a result of a compensable injury.

The insurance carrier is denying my claim, what should I do?

Call your CCMSI adjuster to talk about your claim. Very often, talking with the adjuster can clear up your concerns quickly and easily.

If that does not solve the problem, contact the Division of Workers' Compensation (DWC) customer service at 1-800-252-7031 to see if they can help you. If the issue is still unresolved you can ask them to provide you with information on how to request a benefit review conference. During this meeting, DWC staff will work with you and the insurance carrier to try and resolve the dispute.

What is a Return-to-Work program?

It is a program set up by UTA so injured workers may return to work more quickly and safely while they heal, either with changes to their regular job or in a temporary, alternate work assignment. Return to Work Procedure for Work-Related Injury or Illness CO-CS-PR14

Is there a time frame within the RTW Program?

Yes, eligibility is initially limited to 90 calendar days. Extensions are dependent on medical documentation.

Why would my employer want me back at work before I am released to full duty?

In most cases, some work is better than no work. UTA will benefit from your being able to help the University in some way, even if it is not in your regular job. Studies show that an injured employee requires less medical care and experiences fewer long-term disabilities when they are able to return to productive work as soon as possible following a work-related injury.

My doctor filled out a form DWC Form-073 at my last appointment. What is that?

The DWC 73, also called the Work Status Report, is the form your doctor fills out to communicate any work restrictions and/or the parts of your job you can safely do, such as lifting, standing, and driving.



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What happens to my income benefits if my doctor releases me to work with restrictions, but my employer does not have any modified or alternate work for me?

- A. You will continue receiving <u>Temporary Income Benefits (TIBs)</u> as long as you are qualified and it was your initial designation.
- B. If you elected to use paid accrued leave time, in lieu of TIBs, you would continue using your leave time until it is exhausted.

What if my doctor says I can go back to work, but I don't think I can?

If your employer makes you a bona fide offer of employment, and you choose not to accept the offer, you may lose your Temporary Income Benefits.

What exactly is a bona fide offer of employment/work agreement?

It is a written agreement offering modified or alternate work to an employee within his/her medical restrictions.

If an employee is receiving weekly workers' compensation income benefits for loss of wages, how does it affect the State contribution toward benefits?

An employee who is off work and receiving weekly workers' compensation income benefits is in a "Leave Without Pay" status. If the leave without pay covers a period of one month or more in which no paycheck is to be received, the employee is not entitled to the State contribution toward his or her insurance premiums. The employee may retain insurance coverage by paying his/her premiums. If your unpaid leave qualifies under the Family Medical Leave Act (FMLA) then an employee would still be eligible for premium share. Questions regarding continuation of insurance coverage should be directed to the hR-Benefits-Office.