

Workers' Compensation Frequently Asked Questions

What is Workers' Compensation Insurance?

Workers' compensation insurance covers work-related injuries and diseases. Benefits include: medical – all bills paid, no deductible, or co-pay – wage loss – replacement wages for time lost from injury, 66% of employee's average weekly wage not to exceed a maximum amount annually set by the Division of Workers' Compensation – death benefits to dependent family.

What Happens When I File a Claim?

Workers injured on the job, within the course and scope of their job duties, must report the injury or illness within four days of occurrence, in writing, to their supervisor. For an illness, such as a repetitive motion injury, the date of decision (the day you decide you need to see a doctor) or the date of diagnosis is the date the injury regardless of the length of time passed.

The "Employers' First Report of injury" is then filled out by your immediate supervisor, using your written statement. Because the State is self-insured for workers compensation, the First Report and your statement are sent to Pinnacle Assurance and State Risk Management (SRM).

Why do I have to go to a "Designated Provider"?

By statute, the employer can designate medical providers for workers' compensation. Reasons to designate providers:

- To provide employees with appropriate medical care for on-the-job injuries from occupational/industrial medicine doctors.
- To give the employer a working relationship with the medical provider to help employees get back to work on modified duty.

I want to see my own doctor, Why can't I?

You must see your designated providers first. If you want to visit your own doctor you must contact your adjuster. Note: You may be liable for all medical bills if you choose your own doctor. Regular health insurance will not pay for work related injuries.

Can I see a chiropractor instead of an MD?

Generally, chiropractors are not designated providers. There is a list of preferred chiropractors. There must be a significant reason for a change in treating physician but it is possible. Please contact your claims adjuster for the further information.

How am I paid for time lost from work for an injury?

All permanent State of Colorado employees who suffer a compensable work related illness or injury shall be granted Injury leave up to ninety (90) working days, once they have missed three working shifts or 24 hours from work. The first three working shifts missed will be changed to sick leave, and if that doesn't apply, or runs out, then annual leave. Restoration of sick leave is only made if you are off work for more than two weeks. During the 90-day Injury leave period you are entitled to 100 % of your pay from the agency. Any amount of time missed during the

working shift equals one occurrence from the ninety. Injury Leave is assessed in terms of occurrences, not in terms of hours. Thus, you are changed one occurrence of injury leave even if you are only absent from work for one hour or less for a doctor or therapy appointment.

What exactly is “Make Whole” and how does it work?

After exhaustion of Injury Leave, Make Whole applies. The Make Whole policy means that your agency will use your sick leave to make up the difference between the 66% temporary total disability benefits paid for lost time and your full take home policy.

What are my other worker’s compensation benefits?

Permanente Partial Disability – occurs when a person suffers permanent limitations. A weekly payment is made to the injured employee from the insurance carrier for a specified amount and period of time.

Permanent Total Disability - paid to a person unable to earn wages in the same or other employment due to a work related injury. Payments are made at 66% of the average weekly wage, to the cap at the time of the injury, per week, until age 65.

Fatalities – funeral expenses up to \$7,000. Employee’s dependent spouse receives benefits for their lifetime or until remarriage occurs. Dependent children may be eligible for benefits until age 18 or 21 if a full-time student.

Can I lose or forfeit my workers’ compensation benefits?

You cannot forfeit your workers’ compensation benefits. However, you can jeopardize them. You can lose 50% of your lost-time compensation benefits if your injury is caused or results from:

- the willful failure of the employee to use employment provided/required safety devices
- the employee’s willful failure to obey a reasonable safety rule adopted and enforced by the employer for the safety of employees
- employee alcohol intoxication (.10% BAC)

If the 50% rule is enforced ALL medical benefits continue to be paid until the employee reaches maximum medical improvement.

Your Workers’ Compensation benefits may be denied if the claims adjuster determines that your injury did not occur in the course and scope of your job.

What is Maximum Medical Improvement (MMI)?

MMI is the point at which the treating physician determines that no further medical treatment can be recommended for the injury. Employee is released from treatment.

What do I do with any medical bills I get?

Hold any bills until you receive your claim number from Pinnacol Assurance. Write you claim number on the bill and mail it to Pinnacol Assurance.

If my department offers me a modified duty position, should I accept it?

YES. If the modified work duties meet your doctor’s restriction, you should take the position. If you refuse, lost-time benefits will end.

What if my claim is closed and I need further medical treatment?

Pinnacol Assurance automatically closes a claim after 60 days of no activity. If you find you need to see a doctor after this time, call your adjuster first.

If my claim is denied and I don't agree, what do I do?

If you feel your claim has been incorrectly denied, a hearing may be requested. Note and follow the strict time limits placed on this process.

I think that my employer or another person is responsible for my injury and want to sue them. What are my rights?

Workers' Compensation benefits are your sole remedy under Colorado Law. You cannot sue your employer if you get injured on the job.

If your accident was caused by a third party (someone other than your employer or co-worker), you may be able to file a subrogation lawsuit. Contact your claims adjuster for details.

If I have problems or questions with my claim, who do I call?

You can call the following for help and information on your claim:

- your immediate supervisor.
- your department worker's compensation liaison.
- your claims adjuster, name and number will be listed on the letter from the Pinnacol Assurance with your claim number. The main phone numbers for Pinnacol Assurance are (303) 361-4000 or (800) 873-7242.
- your Safety & Loss Control Specialist at the State Risk Management Office (303) 866-3448.
- the Colorado Department of Labor and Employment, Division of Workers' Compensation (303) 318-8700 or toll-free 888-390-7936