

WORKERS' COMPENSATION

I. REFERENCES

- A. California Workers' Compensation Act
- B. Personnel Policies for Staff Members (PPSM)
 - [42](#) Sick Leave
 - [43](#) Leave of Absence
 - [44](#) Work-Incurred Injury or Illness
 - [66](#) Medical Separation
 - [81](#) Reasonable Accommodation
- C. UCSD Implementing Procedures
 - [3 HR-S-3](#) Volunteer Staff Employment
 - [42 HR-S-1](#) Sick Leave
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 - [66 HR-S-1](#) Medical Separation
 - [81 HR-S-1](#) Reasonable Accommodation
- D. UCSD Policy and Procedure Manual (PPM)
 - [516-19](#) Injury and Illness Prevention Program
 - [516-22](#) Occupational Health
- E. Medical Center Policy and Procedure Manual (MCP)
 - 611.8E Employee Workers' Compensation

II. IN CASE OF INJURY

- A. Make certain that the injured employee has proper medical care. Employees should seek treatment at the Thornton Hospital Emergency Room/Urgent Care or at the UCSD Medical Center Emergency Room in Hillcrest.
- B. The injured employee should notify the [Workers' Compensation Office](#) immediately by telephone at 858-534-4785 or 858-534-0136. Each phone number has voice mail to accept calls after business hours and on weekends and holidays. If the injured employee is unable to report the injury to the Workers' Compensation Office, the injured employee's supervisor should report the injury for the employee.
- C. Any incident that creates a hazard to personnel should be reported immediately to [Environment, Health & Safety](#) at 858-534-3660.

III. BACKGROUND

A. General

The University's self-insured Workers' Compensation Program was established in accordance with the Workers' Compensation Laws of California. This Program provides benefits to employees who are injured as a result of work related activities. The benefits may include payment of a portion of the employee's salary and payment of all expenses for necessary medical care. The amount and type of benefits available vary depending upon the specifics of each situation.

B. The following offices have available staff to provide information and assistance:

1. [Risk Management/Workers' Compensation Office](#) (858-534-4785 or 858-534-0136, Mail Code 0925, 10280 No. Torrey Pines Center South, Suite 330)

Risk Management is a division of Environment, Health & Safety. This office coordinates all Workers' Compensation activities for campus-funded employees and volunteers. Please call Risk Management to report work-related injuries and exposures and to obtain assistance regarding Workers' Compensation policies and procedures.

2. Professional Risk Management - PRM (619-294-2178, 409 Camino Del Rio South, Suite 202, San Diego)

PRM is under contract with the University to manage all claims. In this capacity PRM, acting on behalf of the University, determines the validity of each claim and ensures that an injured employee receives the benefits due as a result of the work related injury.

3. [Employee Rehabilitation Office](#) (858-534-6743, Mail Code 0944, 10280 No. Torrey Pines Center South, Suite 348)

Employee Rehabilitation Office provides consultation when an injured employee finds it difficult or is unable to return to usual and customary work as a result of a work incurred injury.

4. [Environment, Health and Safety - EH&S](#) (858-534-3660, Mail Code 0920, 10280 No. Torrey Pines Center South, Suite 450)

EH&S is responsible for the Workers' Compensation program elements which relate to providing information and advice regarding safe work practices, observing and advising the establishment and maintenance of safe work places, and presenting accident prevention information on a continuing basis. Any incident which creates a hazard to personnel should be immediately reported to EH&S.

C. Coverage

All persons serving the University as employees or registered volunteers qualify for coverage. Students (other than student employees) and employees of outside agencies are not covered, even though the claimed injury may have occurred at UCSD. The validity of each claim and coverage is determined in accordance with California Law.

D. Claim Acceptance

The Workers' Compensation Office and Professional Risk Management will make every effort to ensure that all claims are quickly reviewed. The submission of an "Employee's Claim for Workers' Compensation Benefits" form does not imply that a claim will be automatically accepted. If there is a delay in a decision on a claim, other University benefits may be available. Contact the [Campus Benefits Office](#) at 858-534-2816 for further information.

IV. REPORTING PROCEDURES

A. Initial Injury

1. Any occurrence, which results in injury, illness, exposure or death arising out of or in the course of employment, should be reported to the Workers' Compensation Office immediately. The injured employee should call 858-534-4785 or 858-534-0136 to report the details of the incident. Each phone number has voice mail to accept calls after business hours and on weekends and holidays.
2. When required, the Workers' Compensation Office will provide a claim form to the injured employee and will be responsible for completing the employer's section of the form. The Workers' Compensation Office will provide a copy of the injury report to the employee and the employee's supervisor.
3. Injured employees should seek medical treatment at the Thornton Hospital Emergency Room/Urgent Care or the UCSD Medical Center Emergency Room in Hillcrest.
4. The injured employee should advise the supervisor of a work-related injury and keep the department updated with the latest medical status.
5. If the injured employee is unable to report the injury to the Workers' Compensation Office, the supervisor should report the injury for the employee.

B. Change in Status

Any change in the injured employee's status should be reported to the Workers' Compensation Office immediately. A change in status would be a change in doctors or any lost time from work. Copies of any medical documentation received by the department should be forwarded to the Workers' Compensation Office.

V. PAYMENT OF BENEFITS

A. General

Upon acceptance of the claim, Professional Risk Management will pay all medical expenses related to the injury and a portion of the employee's lost wages. When there is time lost from work due to injury, the employee may supplement the Workers' Compensation payments with accrued sick leave and vacation leave to receive 100% salary. When selected leave accruals are exhausted, the employee may then be eligible to receive extended sick leave. Extended sick leave is paid by the employee's department and supplements the Workers' Compensation payments to provide the employee with pay equal to 80% of normal salary.

B. Payment of Medical Bills

Usually the hospital or physician will bill PRM directly. However, if the injured employee receives a bill, it should be forwarded directly to the Workers' Compensation Office at mail code 0925.

C. Payment of Temporary Disability

1. Any absence on the day of injury is Administrative Leave with Pay for the injured worker.
2. After the day of injury, eligibility for temporary disability begins on the fourth calendar day the employee cannot work as authorized by the employee's treating doctor. Lost time from work on the three days before temporary disability begins may be covered by the employee's sick leave, accrued vacation, comp time accruals, or extended sick leave. The three-day waiting period is waived if the injury results in immediate hospitalization or the employee is off work for more than fourteen days.
3. Temporary disability provides two-thirds of the employee's normal salary up to a maximum amount of \$490 per week. Since the employee's weekly salary is more than the amount paid by Workers' Compensation, the remainder of the employee's salary is paid through the UCSD payroll system using the employee's accrued sick leave. The Payroll Office will issue a full paycheck minus the amount already paid to the employee by Professional Risk Management.
4. After sick leave has been exhausted, the injured employee may choose to supplement the Workers' Compensation payments by using accrued vacation and/or comp time balances to receive 100% salary. The Workers' Compensation Office will provide the employee with an opportunity to make this choice via a written notice that is filed with the Payroll Office.

D. Payment of Extended Sick Leave

1. When sick leave and other chosen accruals are exhausted, the injured employee will be eligible to receive extended sick leave for up to 26 weeks. Funds from the employee's department will be utilized to supplement the difference between the Workers' Compensation payment and 80% of the employee's actual salary.
2. An eligible employee who does not have sufficient accrued sick leave to cover any lost time on the three (3) calendar days before Workers' Compensation payments begin shall receive extended sick leave payments to cover any part of the waiting period not covered by sick leave.
3. While on extended sick leave, vacation and sick leave hours will be accrued at 100% regular rate. However, the employee must return to work before this accrued vacation and sick leave can be used. If an employee separates without returning to work, the employee shall be paid for vacation for the period the employee received extended sick leave payments (refer to PPSM [42](#)).
4. Extended sick leave will continue for 26 weeks or until the employee returns to work. If the employee continues to be off work beyond the 26 weeks of extended sick leave, the employee will then be placed on leave without pay and receives only the Workers' Compensation payment from Professional Risk Management. The employee will be instructed by the Workers' Compensation Office to contact the Benefits Office and apply for additional disability payments that may supplement the Workers' Compensation payments.
5. An employee who elects not to use all sick leave is not eligible for extended sick leave benefits.
6. Extended sick leave benefits shall not apply to safety members who qualify for leave with full salary for a work-incurred disability under State law.

VI. RESPONSIBILITIES

- A.** It is the responsibility of each employee to report all injuries as required under this policy and to keep the department updated with the latest medical status.
- B.** It is the responsibility of each supervisor to advise the injured employee to report the injury to the Workers' Compensation Office and to advise the injured employee to seek medical treatment. If the injured employee is unable to report the injury to the Workers' Compensation Office, the employee's supervisor should report the injury. The supervisor is responsible for ensuring the cause of the injury is investigated and preventive action initiated. The Environment, Health & Safety Office (858-534-3660) is available to assist in recommending safety measures and necessary corrective action.
- C.** As required under California Workers' Compensation Law, it is the responsibility of each department administrative unit to retain the injured employee's position until such time as a physician states otherwise.
- D.** It is the responsibility of each department timekeeper to ensure that the injured employee's payroll records are maintained in accordance with this policy. The department timekeeper should coordinate with the Campus Payroll Office and the Workers' Compensation Office to ensure the injured employee receives proper payment.
- E.** It is the responsibility of the Workers' Compensation Office to ensure that all claim forms and reported injuries are processed in a timely manner and all questions concerning the Campus Workers' Compensation Program are answered promptly.
- F.** It is the responsibility of Professional Risk Management, acting on behalf of the University, to investigate and ensure that all necessary benefits are provided within the framework provided by the California Workers' Compensation Law.