1.0 INTRODUCTION

Saint Louis University provides worker’s compensation benefits to all employees injured in the course and scope of their employment with the University. The University’s workers’ compensation program includes guidelines and procedures to obtain medical care and income replacement protection as prescribed by the worker’s compensation laws of Missouri or appropriate jurisdiction.

2.0 PURPOSE

The purpose of this policy is to provide Saint Louis University employees with information necessary to obtain workers’ compensation insurance in the event of a work related injury or occupational illness. Compliance with the procedures set out in this policy is essential to ensure timely reporting, treatment, and investigation of work related injuries and occupational illnesses necessary to provide prompt and efficient medical care and workers’ compensation benefits.

3.0 PERSONNEL AFFECTED

All Saint Louis University Employees.

4.0 DEFINITIONS

Employee: Full and Part Time Faculty and Staff, Graduate Assistants, Student Workers, and Housestaff.

5.0 POLICY

Saint Louis University (SLU) endeavors to provide a safe work environment and will provide treatment and case management for employees’ work related accidental injury /occupational illness. All Saint Louis University employees are covered under the provisions of the workers’ compensation laws of Missouri or other appropriate
jurisdictions. The law covers employees’ reasonable and necessary medical expenses and provides them weekly income for lost time from work due to an accident or an illness deemed compensable under the applicable states workers’ compensation laws.

6.0 MEDICAL CARE

Employee Health is the only authorized medical care provider.

Saint Louis University Hospital Emergency Department is the authorized provider for emergency care.

All specialty referral care is coordinated through Employee Health. Saint Louis University Workers Compensation Insurance third-party administrator ("TPA") will cover medical expenses related to authorize care. Saint Louis University will not cover expenses when employees seek treatment from providers not authorized through the TPA.

7.0 PROCEDURES AND RESPONSIBILITIES

I. REPORT
   A. Employee
      1. When an employee is injured while on the job, he/she is to notify his supervisor immediately.
      2. If the direct supervisor is not available, he/she is to notify the supervisor’s designee.
      3. The employee will immediately complete an Employee Report of Injury form
      4. Employee Report of Injury forms are available at Employee Health or on the Risk Management website.
      5. To comply with State of Missouri regulations, ALL blanks must be completed.
      6. The employee must sign the form.
      7. The form is not to be copied.
      8. The original Employee Report of Injury form is provided to Employee Heath at the time of initial treatment. (Medical treatment sections outlined in section II).
      9. Employees may opt to report an incident and not seek medical attention. In these cases, the employee will give the completed Employee Report of Injury form to the supervisor.

   B. Supervisor
      1. All Employee Report of Injury forms will be reviewed for completeness.
      2. The supervisor section must be completed by the supervisor and include an action plan that focuses on prevention of future or
similar incidents.
3. The supervisor must sign the form.
4. The form is not to be copied.
5. The original form is sent with the employee to Employee Health at the time of initial treatment.
6. If the employee opts to report only and not to seek medical attention, the supervisor will forward the form to Employee Health via inter-office mail within 48 hours of the injury/occupational illness.

C. Employee Health
1. Employee Health will complete the Employee Health section of the Employee Report of Injury form.
2. Employee Health will send the original Employee Report of Injury form to Risk Management. If an incident requires immediate action, phone contact with Risk Manager may be made immediately after the patient has been triaged and stabilized.

D. Risk Management
1. If the Employee Report of Injury form has not been reviewed and signed by the supervisor, the supervisor will be notified by Risk Management and be requested to complete the supervisor section which includes actions taken to prevent similar incidents in the future.
2. Risk Management will review all Employees’ Report of Injury forms, analyze and conduct accident investigations as appropriate in an effort to eliminate hazards and reduce injuries.
3. Risk Management will report the claims to Saint Louis University Workers’ Compensation insurance third-party administration (“TPA”).
4. Risk Management will record all OSHA recordable injuries/occupational illnesses as required by law.

II. MEDICAL TREATMENT:
A. For evaluation or treatment of the injury or illness, the employee must take the completed Employee Report of Injury form and report to:
   1. Employee Health 7:30 AM - 3:30 PM (Monday-Friday excluding holidays).
   2. Saint Louis University Hospital Emergency Department 3:30 PM – 7:30 AM.
B. If initial treatment is provided in the Emergency Department, the employee shall follow up at Employee Health on the next business day. The original Employee Report of Injury form must be presented to Employee Health at the time of the follow-up evaluation along with all papers and prescriptions from the Emergency Department.
C. Physical capabilities are determined by Employee Health or the authorized Worker’s Compensation treating physician if the injured employee is referred to a specialist.
D. Employee Heath will produce a Certificate of Fitness which gives duty status including activity restrictions if indicated and return appointment.
   1. The original form is signed by the employee and filed in the Employee Health chart.
   2. The employee is given two copies and keeps one copy for their record and submits Employee Health Certificate of Fitness with outlined activity restrictions to supervisor as soon as possible following their evaluation with the authorized treating physician so staffing may be adjusted accordingly.
E. The employee must comply with scheduled appointments and prescribed treatment.
F. Employee Health and Risk Management will advise the TPA when warranted so Temporary Total Disability (TTD) benefits can be appropriately administered. Benefits for a medical leave for work related disabilities will be coordinated with the TPA according to plan provisions and any other benefits provided to the employee in an effort to minimize the impact of the leave for both the employee and the University. Human Resources will serve as the contact for such information.
G. For treatment provided outside Employee Health by an authorized referral specialist, an employee must report back to Employee Health on the day of the visit or the next business day Employee Health is open with all paperwork. Employee Health will then follow the process listed above in “D” above.
H. An employee may choose their own physician or hospital for treatment, however, at their own expense. Under the Missouri Worker’s Compensation statute, the employer has the right to choose the physician, hospital, medical facilities, pharmacy and services. The employer is not required to pay for any treatment the employee may select on their own without authorization from the TPA.
I. If it is determined that the employee was under the influence of drugs and/or alcohol at the time a work-related injury occurred and if the cause of the accident was directly related to the use of drugs and/or alcohol, the employee will not be eligible to receive workers’ compensation benefits.
J. If it is determined that the employee was under the influence of drugs and/or alcohol at the time a work-related injury occurred, even if the cause of the accident was not directly related to the use of drugs and/or alcohol, the employee will be assessed a 50% reduction in workers’ compensation benefits per RSMO 287.120.
K. The University requires drug and alcohol screening for all accidents or injuries sustained under any of the following circumstances:
   i. While using employer supplied motor vehicles, or
   ii. While using personal vehicles to conduct the employer’s business, or
   iii. During an employment-related accident where there is a fatality of anyone involved in the accident, or
   iv. During an employment-related accident that causes bodily injury to
the employee and/or another person that requires hospitalization

v. During an employment-related accident that causes bodily injury to
the employee and/or another person that requires hospitalization

L. If an employee fails to use a required safety device, or employee fails to
obey any reasonable rule adopted by employer for safety of employee, the
employee’s workers’ compensation benefits may be reduced per RSMO
287.120.

III. DUTY STATUS:
A. Full Duty:
An employee released back to work, full duty (without restrictions of
physical activities) must continue to comply with scheduled follow-up
appointments and prescribed treatments. These employees are
expected to return to their normal assigned job tasks.

B. Temporary Alternative Duty (TAD):
1. Employees released back to work on TAD are responsible for
compliance with TAD restrictions as prescribed by the authorized
treating physician.
2. Employee is responsible for submitting Certificate of Fitness from
Employee Health with outlined restrictions to supervisor as soon as
possible following their evaluation with the authorized treating
physician so staffing may be adjusted accordingly.
3. The Supervisor is responsible for assigning job tasks to the
employee that are in compliance with TAD restrictions as
prescribed by the authorized treating physician.
4. Employee and/or supervisor are to call Employee Health if
clarification of TAD restrictions are needed.
5. Employee Health will notify the TPA of the duty status.
6. The supervisor is responsible for identifying appropriate TAD job
assignment within the employee’s department and notifying their
Human Resource representative of the accommodation being met.
7. If the supervisor is unable to identify appropriate TAD job
assignment within the home department, the employee will NOT
be sent home. The supervisor must notify the Human Resources
department immediately. The supervisor, in cooperation with
Human Resources is responsible for locating a TAD position,
outside the home department.
8. Human Resources will complete a TAD agreement with the
employee (see appendix A).
9. The employee on TAD will be paid by the home department even
if assigned outside the home department.
10. If the supervisor is unable to place the employee in an appropriate
TAD assignment (either inside or outside the home department),
the supervisor will immediately notify their Human Resources
representative.
11. Employees on TAD may not work overtime.
12. TAD assignments are made at the discretion of the supervisor and need not correspond to regular scheduled shifts. This is in accordance with the Missouri Worker’s Compensation law.

13. Every effort will be made to assign the employee to a TAD job, however, no guarantee can be made that such work will be available.

14. The employee may decline TAD assignment. However, Worker’s Compensation benefits may be forfeited. This will be documented on a TAD agreement completed in Human Resources.

C. Unable to Work – per written authorization by the authorized Workers’ Compensation treating physician for work related injuries/occupational illnesses.

1. Payment to the employee for approved lost time, pursuant to the Missouri Workers’ Compensation Act, will not be made for the first three days or less of disability unless the disability lasts longer than 14 calendar days. If the disability lasts longer than 14 calendar days, payment for the first three days is made retroactively to the employee by the TPA.

2. Workers’ Compensation benefits shall be administered in accordance with the Missouri Workers’ Compensation Law by the TPA (Third Party Administrator).

8.0 REFERENCES

http://www.moga.mo.gov/mostatutes/chapters/chapText287.html

Workers Compensation Questions & Answers

9.0 APPROVAL SIGNATURES