

Seattle Public Schools Workers Compensation Program

CorVel Corporation

PO Box 230608

Portland, OR 98281

Phone: 1-800-275-4463 Fax: 1-866-734-3599

In accordance with the industrial insurance laws of the State of Washington, Seattle Public Schools provides a Self-Insured Workers Compensation program for District employees who are injured on the job or who incur a job-related disease. Claims are administered by CorVel Corporation through the Risk Management Department.

BENEFITS

Benefits for valid claims may include:

1. Medical coverage for job-related injury or illness while receiving professional medical care.
2. Medically authorized time-loss compensation while off duty resulting from job-related injury or illness.
3. Permanent partial disability award if the injury or illness results in a permanent disability.
4. Pension benefits for employees who may become totally disabled by job-related disability or illness, including permanent partial disability awards.
5. Survivor benefits.
6. Vocational assistance if found unemployable.

PAYMENTS

1. Workers Compensation time loss payments are processed in accordance with Washington State industrial insurance laws and contract language. Failure of the employee and/or attending physician to complete required forms will cause delay.
2. "Loss of Earning" wages are paid if the injured worker returns temporarily to light duty or regular duty with restricted hours.
3. Time-loss benefits are nontaxable, under current tax law.
4. Employees are responsible for maintaining their own voluntary deductions.
5. Casual Employees and Work Training Program enrollees are eligible for all statutory Workers Compensation Benefits.
6. Registered volunteers are covered for medical expenses only.
7. Depending on the union contract, employees may be entitled to additional benefits. Consult the appropriate union contract.

PROCEDURE FOR FILING A CLAIM

1. The employee must immediately report an injury or illness to his/her principal/supervisor.

2. The employee must also report the injury to the Employee Injury Call Center at 1-877-764-3574.
3. Within 24 hours of any injury, the employee or supervisor must complete a Seattle School District Accident/Injury or Occupational Illness Report and mail to the Risk Management Department at MS 23-361, 2445 3rd Ave S, Seattle, WA 98134, or fax it to 206-252-0708.
4. In the event of an injury that requires a physician's care, it is compulsory that the employee apply for Workers Compensation (RCW 51.28.010). The Self Insurer Accident Report form (SIF-2) and the Physician's Initial Report form are required in order to apply for Workers Compensation. Please obtain a Workers Compensation claim packet from CorVel at 1-800-275-4463. You have one year from the date of occupational injury to file a claim. You have two years from the date you are first notified in writing by a doctor that you have an occupational exposure to file a claim for an occupational exposure.
5. Contact the Employee Injury Call Center at 1-877-764-3574 to report any incident or accident.
6. The attending physician must complete the Physician's Initial Report form within five days of the first date of treatment. The physician retains the pink copy and mails the white and canary copies to CorVel. You may choose any doctor who is recognized by State regulations as qualified to treat your condition and is reasonably convenient to you. All approved medical costs for a valid claim are paid by CorVel. To transfer from one physician to another, you must request the change in writing. The transfer must be approved by CorVel before a transfer can take place.
7. Supervisory personnel will assist the injured employee in completing the Seattle School District Illness/Occupational Injury Report that is available with School Nurses, Secretaries or on the Risk Management website. This form should be forwarded to the Risk Management Department as soon as possible.
8. In the event medical attention is needed, the SIF-2 will be mailed to the work location or the employee's home for completion of the Workers' Compensation form. The injured employee retains a copy and sends the original to CorVel. Upon receipt and evaluation of the Self Insurer Accident Report form (SIF-2), and the physician's Initial Report form, CorVel claim adjusters determine validity of claims and make payment for physician's services and time-loss compensation to the injured employee when properly authorized by the employee's treating physician.

Employees on time loss must be seen by their attending physician at least once a month. The attending physician should send medical reports monthly to CorVel. Time-loss payments are authorized for the period of time the attending physician has allowed due to the total temporary disability of the patient. The physician's authorization must be submitted in writing to CorVel with the substantiating objective findings of disability. It is imperative that CorVel is notified by the principal/supervisor when the injured employee returns to work in order to avoid overpayment of benefits that are reimbursable by the employee. Injured employees must maintain monthly contact with their principal/supervisor and CorVel.

Employees may be required to attend independent medical exams scheduled by CorVel for clarification of claim issues. Employees are kept on salary for independent medical exams scheduled during work hours. Travel expenses may be reimbursed in accordance with Department of Labor and Industries' allowances.

Your claim is closed when medical opinion indicates your condition is stable, when any covered employability issues are resolved, and when an assessment of any permanent disability has been made. A notice of closure will be sent either by CorVel or by the Department of Labor & Industries. After your claim has been closed, if objective medical evidence shows the *condition caused by your injury or disease* has worsened and requires additional medical attention, you may apply for a reopening of your claim. You have seven years from the date your first claim closure becomes final to request reopening. In the case of an eye injury, you have 10 years. In most cases, CorVel will make a decision on your request within 90 days. A letter will serve as a request to reopen your claim, however, Labor & Industries will not take action until an official reopening application and medical information are submitted. You will be notified if more information is required. Please send additional information requested to

CorVel in a timely manner. If they do not have the information they need within the 90-day limit, your request may be denied.

Reopening application forms are available through your doctor's office. If your doctor doesn't have the form, you can request one by writing or calling CorVel. The reopening application should be completed and sent to the Self-Insurance Section, PO Box 44892, Olympia, WA 98504-4892.

Every claim decision requires the use of judgment, and you may not always agree with those decisions. If you believe a decision is wrong, you may challenge it in one of two ways - you can either protest to Labor & Industries or appeal to the Board of Industrial Insurance Appeals. Before you take formal action, however, it may help to talk with your employer or an adjudicator in Labor & Industries' self-insurance section. If you are still dissatisfied, you should send a formal protest to Labor & Industries within 60 days of receiving the order. Send your protest to the Self-Insurance Section, 724 Quince Street SE, Mail Stop HC-221, Olympia, WA 98504-4401. Explain in detail why you think the decision is unfair, supply any additional information you may have and tell them what you think would be fair.

Your claim will be reviewed, and you will receive another written decision in response to your letter. If you disagree with this decision, you may appeal in writing to the Board of Industrial Insurance Appeals in Olympia. You must send your letter to the board *within 60 days of receiving the Department's decision*. The Board of Industrial Appeals is separate from the Department of Labor & Industries. It is a three-member board that conducts hearings on claims issues that cannot otherwise be settled to the satisfaction of you, your employer, or the Department. The Board issues a written decision about your case after personal arguments and testimony has been taken. This decision may be appealed to the Washington State Superior Court. You can contact the Board by writing to the Board of Industrial Appeals, Mail Stop FL-13, 2430 Chandler Court SW, Olympia, WA 98504-2401. Or call (360) 753-6823. For detailed information, ask them for their pamphlet "Your Right to be Heard".

If you need to inquire about a Workers Compensation claim, you may call CorVel at 1-800-275-4463.

OTHER IMPORTANT ADDRESSES AND TELEPHONE NUMBERS:

Seattle Public Schools
Risk Management Department
Mail Stop 23-361
PO Box 34165.
Seattle, WA 98124-1665
206-252-0710

Office of the Self-Insured Ombudsman
Department of Labor and Industries
7273 Linderson Way SW
PO Box 44001
Olympia, WA 98504-4001
1-888-317-0793
360-902-4202 fax