Angelo State University
Operating Policy and Procedure

OP 52.58: Workers’ Compensation Insurance

DATE: June 4, 2019

PURPOSE: The purpose of this Operating Policy/Procedure (OP) is to establish policy and procedure for administration of the Workers’ Compensation Insurance in coordination with the investigation and analysis programs that are needed to promote prevention of work-related accidents, injuries, and illnesses. This OP and its implementation will be in conformance with the policies and guidelines of the State Office of Risk Management, the Texas Department of Insurance/Division of Workers’ Compensation (TDI/DWC), and collaborating policies of Angelo State University.

REVIEW: This OP will be reviewed in September every three years, or as needed, by the director of human resources with recommended revisions forwarded through the vice president for finance and administration to the president by October 15 of the same year.

POLICY/PROCEDURE

1. General

a. Workers’ Compensation Insurance (WCI) is regulated by the state of Texas and provides medical benefits and income indemnity for injuries and occupational illnesses that arise within the course and scope of employment. This program covers all university employees whose names appear on the payroll, including student employees. The State Office of Risk Management (SORM) is the agency directly responsible for administering the program for state employees. The TDI/DWC promulgates rules and regulations governing WCI.

b. The incident investigation program provides for investigation and analysis of all reported accidents that arise within the course and scope of employment that resulted or could have resulted in an injury or illness and includes accidents involving employees that occur in or on Angelo State University facilities. All employees are included in the incident investigation program.

2. Program Administration

a. Workers’ Compensation

Personnel in the Office of Human Resources will inform all employees of this program, of their responsibilities in connection with it, and about accessing benefits properly. This subject will be covered during new employee orientations.
b. Administrator’s/Supervisor’s Responsibilities

All administrators/supervisors with managerial authority over employees’ job duties shall provide the following assistance, as appropriate, when work-related accidents, injuries, or occupational illnesses occur.

(1) Assist injured employees in obtaining medical care, if necessary.

   **NOTE:** To qualify for Workers’ Compensation if the incident involves a blood borne pathogen exposure and the employee claims a possible work-related exposure to HIV infection, the employee must:

   (a) Have a test performed within 10 days of the exposure to HIV that indicates the absence of HIV infection;

   (b) Provide the employer with a written statement of the date and circumstances of the exposure to HIV and a copy of the results of the test. (28 TAC, Part 2, Chapter 122, Rule 122.4, and Texas Health and Safety Code 85.116); and

   (c) Complete the Bloodborne Pathogens Exposure Incident Report and send it to Environmental Health, Safety, and Risk Management (EHSRM).

   See [OP 34.22 Bloodborne Pathogens Protection Program](#) for more information.

(2) Call the Office of Human Resources and verbally report the injury or incident as soon as possible. **Human Resources must be notified before the close of business the next working day following the injury or illness.**

(3) Ensure that the employee completes the **Employee’s Report of Injury (SORM-29)** (Attachment B), which is the employee’s perspective of the injury, and submits the form to the Office of Human Resources.

(4) Submit a completed **Authorization for Release of Information form (SORM-16)** (Attachment C) to the Office of Human Resources. This form must be completed by the employee.

(5) If necessary, assist human resources in obtaining the **Witness Statement form (SORM-74)** (Attachment D).

(6) Review [OP 52.57 Early Return-to-Work, Alternate, and Light Duty Assignments](#), and take appropriate action. Note that this operating policy prescribes specific procedures that **MUST** be followed.

(7) Submit to the Office of Human Resources the appropriate forms, in accordance with [OP 52.42 Staff Sick Leave](#), if the employee uses accrued sick leave or is placed on leave without pay.

(8) If lost time is involved (more than one workday), assist the employee in completing an **Employee’s Election Regarding Utilization of Sick and Annual Leave Form (SORM-80)**. Submit the completed form to the Office of Human Resources.
(9) Complete the Employee Accident/Incident Report and/or Student Accident/Incident Report, as appropriate, and submit them to EHSRM.

(10) Submit a Workers Compensation Network Acknowledgement Form (Attachment G) to the Office of Human Resources. This form must be completed by the employee.

All related forms and attachments are available online on the Office of Human Resources website at http://www.angelo.edu/dept/human_resources/

c. Employee Responsibilities

(1) Employees are required to report immediately to a departmental administrator/supervisor all on-the-job accidents, injuries, or occupational illnesses, regardless of whether medical expenses were incurred or time away from work was involved.

(2) Employees should call the Office of Human Resources and verbally report the injury or incident as soon as possible.

(3) Employees must complete the following forms and submit them to the Office of Human Resources:

   (a) Employee’s Report of Injury (SORM-29)

   (b) Authorization for Release of Information (SORM-16)

   (c) Workers’ Compensation Network Acknowledgement

   (d) Employee’s Election Regarding Utilization of Sick or Annual Leave (SORM-80)

   **NOTE:** Failure to complete this form is deemed an election for UNPAID leave (Texas Labor Code, Section 501.044). The employee’s departmental administrator will need to submit appropriate Personnel forms in accordance with OP 52.59 Miscellaneous Time Away From Work, to place the employee immediately on leave without pay.

   (e) If an attending physician reports that an employee is unable to return to work following the occupational injury, the employee must choose one of the elections on the Employee’s Election Regarding Utilization of Sick and Annual Leave form (SORM-80) (Attachment E).

(4) Notify the Office of Human Resources of any sick leave, vacation leave, or leave without pay used due to a workers’ compensation injury or illness. This includes leave time used for doctor’s appointments associated with the reported injury or illness.

(5) Submit a Workers Compensation Network Acknowledgement form (Attachment G) to the Office of Human Resources.
d. The Workers’ Compensation Claims Coordinator’s Responsibilities:

The Workers’ Compensation claims coordinator is the point of contact for all workers’ compensation claims and is the interface between the employee, supervisor, administrator, and the SORM. The claims coordinator assists employees in properly applying for benefits and coordinates reporting to the SORM as outlined below.

1. Within one working day following notification, complete and submit the Employer’s First Report of Injury of Illness (DWC-1S), if necessary, to the SORM.

2. Meet with the employee and ensure that all necessary forms have been completed and signed.

3. Submit to the SORM the various forms required to complete the WCI claim as described in the SORM Workers’ Compensation Claims Coordinator Handbook.

4. Establish and maintain an incident or injury file on each case.

3. Benefits

WCI benefits are legislated by the Texas Workers’ Compensation Act. The TDI/DWC promulgates rules and regulations governing WCI, and the SORM adjudicates claims for benefits made by state employees, including employees of Angelo State University.

Specific information about WCI benefits and eligibility can be found on the State Office of Risk Management Web site at https://www.sorm.state.tx.us/claims-operations.

4. Leave Without Pay

Refer to OP 52.59 Miscellaneous Time Away from Work for specific information concerning the proper reporting and administration of leave without pay.

5. Funding of WCI Costs

Fines of up to $500 may be levied for the late reporting to the SORM. If a department fails to furnish documents to the Office of Human Resources within the time specified in 2(b)(3) above, any resulting fines will be charged back to the department.

Leaves without pay shall be reported on a Personnel Action form through normal administrative channels. They shall be dated from the first workday through the last workday the employee is absent without pay and should indicate the number of work hours missed. Failure to submit a Personnel Action Form in a timely manner may result in large additional Workers’ Compensation claim expenses to the institution for terminated employees or employees on leave without pay.

6. Forms

All related forms and procedures are available on the Office of Human Resources website at http://www.angelo.edu/dept/human_resources/

Environmental Health Safety and Risk Management (EHRSM) has additional information
regarding employee accidents on its Accident and Incidents page and forms are available on its Resource page at http://www.angelo.edu/services/risk_management/accidents-and-incidents.php

Attachment A: Workers Compensation Employee Information Sheet

Attachment B: Employee’s Report of Injury (SORM-29)

Attachment C: Authorization of Release of Information (SORM-16)

Attachment D: Witness Statement (SORM-74)

Attachment E: Election Regarding Utilization of Sick and Annual Leave (SORM-80)

Attachment F: Return to Work Letter

Attachment G: Workers Compensation Network Acknowledgement form