



COUNTY OF CURRITUCK

Date: _____

RE: Information included for assistance to an injured worker

Dear _____,

We regret that you have suffered an injury on the job that may cause you to miss work and need medical care. Enclosed for your convenience is information on Currituck County's Worker's Compensation program.

Worker's Compensation laws allow medical treatment to be directed by your employer. Please consult with either your supervisor or Human Resources prior to seeking any medical treatment for your worker's compensation injury or illness.

If you find that your injury or illness results in the need for prescription medication, please find the PMSI Pharmacy Management's "first fill" form enclosed. Please use this form to get your prescribed medication to treat your injury. Once the first fill has been processed, PMSI will provide you with a pharmacy benefit card to use for subsequent refills. A letter will be sent to you along with your pharmacy card. Please be sure that you only use the card for medication specifically prescribed for your worker's compensation illness or injury.

Lastly, we want to make sure that you are clear about your rights as it relates to the continuation/termination of your employee benefits, pay and leave time while you are out on Worker's Compensation.

The County will continue to pay the employees' medical/ dental premium while you are out on Workman's Comp. Workman's Comp will begin on the 8th day after your initial first day out. You will need to use your sick leave for the first seven days. Workman's Comp may go back and pay you for this period if you are out more than twenty-one days.

Other payroll deductions will be the employee's responsibility on the 8th day when the County stops regular payroll checks. Please contact Personnel with any questions regarding amounts and payment dates.

NOTE: contributions to the LGRS must cease while an employee is on WC.

You must provide a return to work note from your physician before you can report for duty.

You must maintain contact with your Claims Management Adjustor at all times when you are scheduled for follow up appointments or when you need to cancel them. Failure to notify your Claims Management Adjustor of changes in treatment, physicians, or appointment schedules may result in the loss of some benefits on your Workman's Comp claim.

Your department head or direct supervisor from the County will be contacting you once a month to check on your condition and to answer any questions or concerns you may have about getting well and returning to work. If you have any questions about the information contained in this packet, please contact your supervisor or feel free to call Human Resources

Sincerely,

Derinda Leary
Risk Manager
County of Currituck
252-232-7746
252-232-0015 fax

MOST FREQUENTLY ASKED QUESTIONS

1. **Who is required to provide workers' compensation coverage?**
Any employer who employs three or more employees.
2. **Who is the TPA for the Employer's Worker's Compensation program?**
Sedgwick Claims Management Services
5260 Parkway Plaza Blvd., Suite 190
Charlotte, NC 28217
(800) 822-4469
3. **What must I do when an injury occurs on the job?**
Report the injury to your employer, orally and in writing, **as soon as possible**, and in any event within 30 days.
4. **Who provides and directs medical treatment?**
The employer or its insurance company, subject to any Industrial Commission orders, provides and directs medical treatment. The Commission may permit the employee to change physicians or approve a physician of employee's selection when good grounds are shown. However, payment by the employer or carrier is not guaranteed unless written permission to change physicians is obtained from the employer, carrier or Commission before the treatment is rendered.
5. **When can reimbursement for sick travel be collected?**
Employees are entitled to collect for mileage for medical treatment in workers' compensation cases if they travel more than 20 miles. This rate can be adjusted annual by the IC.
NOTE: The Industrial Commission has given the self-insurers and insurance carriers permission to pay drug and travel expenses directly to the employee without approval from the Commission.
6. **What happens if, in an emergency, my employer fails or refuses to provide medical treatment?**
The employee may obtain the necessary treatment from a physician or hospital of his own choice, but must promptly request the Commission's approval.
7. **When do I become eligible for lost wage compensation?**
No compensation is due for the first seven (7) days of lost time unless the disability exceeds 21 days. Therefore, the first check will not include payment for days 1-7. Payment for those days will be made should the disability continue beyond 21 days.
8. **How often are compensation payments made?**
Weekly.
9. **At what rate of pay?**
Claimants receive two-thirds (66 2/3%) of their average weekly wage, not to exceed \$730 per week (2006 maximum). The maximum weekly benefit is adjusted annually.
10. **How long am I eligible to receive lost-time weekly benefits?**
Until you are able to return to work.
11. **What is permanent partial disability?**
Total loss or partial loss of use of a member of the body or inability to earn the same wages in any employment as earned at the time of injury.
12. **Who determines permanent partial disability?**
The Commission, based on the impairment ratings of physicians or evidence of consideration of wage earning capacity.