

Incident Document Checklist/Action Items

	Did the Associate follow the Incident Reporting Policy? Incident number created
	Copy of First Report of Injury (FROI) in our file & sent to MCO Initial contact with MCO to alert them of the claim & verify the information has been entered in
ш	BWC
	MEDCO 14 on file (Return to work, restrictions, off work, healthcare providers' name, and address of healthcare facility). A new Medco 14 should be requested after the last one on file expires. (Copy MCO)
	Release to Full Duty on file (if not part of the MEDCO 14) (Copy to MCO) Healthcare provider notes which outline the injury or illness, treatment, discharge notes,
	prescriptions, prognosis, etc. (Copy MCO) Verification that drug test was performed Incident Investigation Report completed
	Corrective actions with primary person responsible & estimated completion date (track to completion)
	Coaching, counseling, or disciplinary action (put in Associate Relations folder, not here) Decision was made on certifying or rejecting the claim (TPA if Rejected, MCO if Certified) Initial contact with TPA if any of the following apply:
	 Associate will miss more than 7 calendar days of work Company is considering rejecting the validity of the claim
	The injured worker is not your employee The injured worker is not your employee.
	 The injured worker hasn't been released to full duty Decision was made if LD work is available & sent copy of LD/FD job description to MCO & TPA A LD job offer was sent via certified mail as soon as the Associate is released to return to LD work Decision was made on paying Salary Continuation or having the BWC pay TT compensation If paying Salary Continuation (IW will miss 8 or more days): Wage sheet filled out (wages needed for one year prior to date of injury) & sent to BWC & TPA (TT = Temporary Total)
	 If BWC will pay TT compensation (IW will miss 8 or more days): wages submitted to BWC Keeping the MCO, TPA, & BWC up-to-date on the progress
	Copies of any documents from BWC, MCO, or TPA and decisions on appeals
	Supporting documents such as witness statements & supervisor notes collected (copy to TPA)
	Contact with Associate, Supervisor, MCO, TPA & BWC (see Contact Sheet Log) OSHA Recordability determination (Medical Only, Restricted Activity, Lost Time)
	OSHA 300 log filled out and/or updated

THE BOLDING SIGNIFIES WHO TO CONTACT WITH QUESTIONS OR GIVE INFORMATION TO: MCO = Managed Care Organization, TPA = Third Party Administrator, (LD = Light Duty, FD = Full Duty, IW = Injured Worker)

- ✓ It is critical that we have a complete history of treatment and dates from the beginning of the incident to the release to full duty.
- ✓ During initial contact with the MCO verify that the healthcare provider has entered the information to start the claim. If they have not, we must enter the information.
- ✓ We must follow the treatment plan outlined by the healthcare provider especially in regards to restrictions. If something is not clear then we contact the healthcare provider or MCO for clarification. If the healthcare provider returns the Associate to work then the Associate must return or obtain revised documents from the healthcare provider. They are administratively absent until they do so.
- ✓ Workers Compensation lost time is after 7 days away from work, but OSHA lost time is any day after the date of injury regardless of salary continuation.