LACCD WORKERS’ COMPENSATION PROGRAM

WORKERS’ COMPENSATION. The State Legislature passed California’s no-fault compensation in the early 1900s. The system was designed to provide benefits to employees who sustain on-the-job injuries or illnesses. With few exceptions, almost every employee, public and private, in the State is protected by Workers’ Compensation.

The State of California regulates both the amount of benefits available under Workers’ Compensation and the schedule of distribution of all payments.

LOS ANGELES COMMUNITY COLLEGE DISTRICT’S SELF-FUNDED PROGRAM. The District has elected to self-fund its Workers’ Compensation program. This means that all reasonable and necessary workers compensation benefits are paid directly from the District’s funds and administered by the District’s third party administrator (TPA). There is no insurance company involved.

The District wants you to know that its greatest concern is to see that you receive the best medical care and attention available, so your recovery is rapid and complete, and you can return to gainful employment.

HOW TO CLAIM BENEFITS? You must first notify your supervisor immediately, who will complete a supervisor’s report. Tell your supervisor what, when, where and how your injury or illness happened. Enough information should be included to ensure that any other necessary reports can be completed and arrangements can be made for initial medical treatment. Your supervisor will provide you with further direction to complete the filing of your claim. Prompt reporting is the key. Nothing can happen until you inform the District about the injury or illness.

WHAT ARE THE BENEFITS? For those employees whose claim of injury or illness has been accepted, The California’s Workers’ Compensation system provides that the employee is entitled to reasonable medical benefits to cure or relieve the effects of the injury or illness. The employee may also be entitled to additional benefits such as; temporary disability, permanent disability, vocational rehabilitation, and death benefits.

WHAT ARE THE MEDICAL BENEFITS? The District will pay for all reasonable and necessary medical costs needed to cure and relieve the effects of a work-related injury or illness. The employee should never see a medical bill, since all costs related to the workers compensation injury or illness are paid directly by the District. If, however, a bill is sent to you, it should be forwarded to the Business Services Division, Risk Management Department.

If you require treatment in addition to first aid, you will be referred to a doctor. The physician is a designated panel physician and will send bills and reports directly to the District’s third party administrator.

Thirty days after the date that the injury or illness is reported, the employee may be treated by a physician or facility of his or her own choice within a reasonable geographic area; unless the employer has provided a Medical Provider Network to the employees. If a Medical Provider Network is provided, the employee can request to change doctors within the network.

If, however, an employee notifies the Risk Management Department in writing prior to the date of injury that he or she has pre-designated a personal physician, the employee shall have the right to be treated by that physician from the date of injury. Upon request, the District shall provide
an appropriate form on which the employee may indicate the name of his or her physician. “Personal physician” means the employee’s regular physician and surgeon who has previously directed the medical treatment of an employee and who retains the employee’s medical records and history.

NOTE: Special rules apply after 1/1/05 if your employer has a Medical Provider Network in place.

HOW MUCH ARE THE PAYMENTS FOR LOST WAGES? Two-thirds of your average weekly wage, up to a maximum amount set by the State of California. The amount of the payments and when and how they will be paid are part of State Law. Only the State can change the law. Workers’ Compensation payments are tax free. There are no deductions for state or federal taxes, Social Security, union contributions, etc.

If your treating physician has determined that you need time off from work and you report the injury promptly, you should receive your first compensation check within 14 days from the first date of the District’s knowledge of your need to be off work, provided you are disabled for 14 days; otherwise, different rules may apply. After that you will receive a check every 14 days during your approved disability leave. If you are entitled to salary continuation, temporary disability benefits will be included in your regular paycheck.

VOCATIONAL REHABILITATION. If, because of your industrial injury, you are unable to return to your usual job duties, you may be entitled to vocational rehabilitation benefits.

NOTE: Special rules apply for dates of injury after 1/1/03.

PERMANENT DISABILITY. If a physician determines your injury or illness will ultimately result in permanent disability, you may be eligible for permanent disability payments based on the income impairing effects of your particular disability in the open labor market.

The District’s third party administrator will submit all necessary reports to the Disability Evaluation Unit, Division of Workers’ Compensation who will make a determination of the nature and extent of permanent disability.

DEATH BENEFITS. In the event of a work related death, eligible dependents may be entitled to benefits as determined by the Division of Workers’ Compensation.

WHAT IF THERE ARE QUESTIONS? Misunderstandings and even errors sometimes occur, but most can be cleared up by a telephone call. Should you have any questions whatsoever, do not hesitate to call the Business Services Division, Risk Management Department at the District Office at (213) 891-2000, x2397.

For additional information, you may telephone the nearest Department of Industrial Relations, Division of Workers’ Compensation: Information and Assistance Unit. They will inform you of your rights and if necessary provide you with the full review of your worker’s compensation benefits.

NOTE: Disclosure of Medical Records: After you make a claim for workers’ compensation benefits, your medical records will not have the same privacy that you usually expect. If you do not agree to voluntarily release medical records, a workers’ compensation judge may decide what records will be released. If you request privacy, the judge may seal (keep private) certain medical records.