PURPOSE: RWJBarnabas Health (RWJBH) employees, who are injured or become ill due to their work, are eligible for benefits under the New Jersey Workers Compensation Law.

POLICY: All RWJBH employees, who are injured or become ill due to their work, are eligible for benefits under the New Jersey Workers Compensation Law.

The benefits and responsibility associated with workers’ compensation is regulated under New Jersey State Statute and provides certain benefits to employees who experience an injury or illness that is considered “work related.”

Workers’ compensation at RWJBH is administered through a third party administrator responsible for investigating claims and determining compensability.

Compensability follows the OSHA guidelines that a claim will be recordable if it is directly work related and leads to days away from work and/or medical treatment beyond first aid.

Employees who have a work place injury or illness must enter a VERGE immediately following the incident and/or report the incident to the supervisor. If the employee requires medical assessment or treatment, they must report to Corporate Care/Employee Health Services immediately or the first business day after an evening or weekend incident, complete all forms accurately and follow all instructions for medical treatment provided. Once reported to Corporate Care/Employee Health Services a claim will be opened with the third party administrator and an investigation will be conducted. In extreme cases involving hospitalizations, notification would be accepted as soon as possible from the employee or a family member.

Claims which meets the criteria outlined by OSHA and regulated by NJ Statute, will be reviewed, investigated, and if accepted, processed for temporary disability benefits if the seven (7) day waiting period has expired. While awaiting an investigation and compensability determination (made by the third party administrator) and possible payments under workers’ compensation, an employee has the right to use their PTO or sick time since payment for a claim could take a few weeks. It is also acceptable for the employee to choose “no pay” during the waiting period.

Once a claim is paid (claims are compensable at 70% of the employee’s weekly wage), the employees’ PTO time can be restored if PTO was used during the absence from work and the employee would have to reimburse the hospital with for the double pay.
BENEFITS:

1. **Medical** – Payments will be made for all authorized hospitalization and medical costs.
2. **Lost Time** – Payments according to law will be made for all authorized lost time commencing with the eighth (8th) day of absence. These payments will be retroactive to the first day of lost time.

PROCEDURE:

1. All employees injured on the job must immediately report the incident to their supervisor and complete an employee incident report in Verge if accessible. If Verge is not accessible, then a paper incident report must be completed.
2. You must report to the Corporate Care/Employee Health Department immediately for medical evaluation. The hours of operation for Corporate Care at SBMC, CMMC, JCMC MMC, MMC-SC, CMC, RWJ-NB and RWJ-SMC are 7:30 am to 5:00 pm Monday thru Friday; for other affiliates please check with your local Employee Health Services Department for hours of operation. When the Corporate Care/Employee Health Department is closed, please report to the Emergency Department for medical evaluation. When you are treated in the Emergency Department, you are required to report to the Corporate Care/Employee Health Department for follow-up on the next day the department is open.
3. Your medical care will be managed by the Occupational Health Physician/Nurse Practitioner. Since New Jersey Workers Compensation Law states the employer directs all care and does not have to pay for unauthorized medical treatment, you will be financially responsible for the cost of any unauthorized medical treatment, tests or procedures. Please be sure you have authorization for treatment outside the Corporate Care/Employee Health Department.
4. If you develop an issue requiring immediate care you must contact Corporate Care/Employee Health for direction. For emergent care after hours, proceed to the Emergency Department and notify Corporate Care/Employee Health immediately during business hours.
5. You must contact the Human Resources Department to review all benefits including FMLA, EIB, and to understand your obligations for accessing these benefits if applicable.
6. In the event you are referred to an authorized physician, it is your responsibility to notify the Corporate Care/Employee Health Department of each visit, your progress and the expected length of treatment.
of your incapacity. We will also keep in contact with your physician to be sure you are receiving all of the services you need. All rehabilitative therapy and imaging ordered by your treating physician must be authorized.

7. You are required to swipe the time clock when leaving the office for all medical treatments and appointments related to your work injury. These activities are not considered work related; therefore, personal time must be used.

8. In order to make sure all parties with an interest in your well-being and capability to work are fully informed, it will be your responsibility to notify your supervisor of your absence from work as well as your expected return date. You can obtain any documentation they may request from the Corporate Care/Employee Health Department.

9. If your authorized treating clinician places you on modified duty with restrictions every effort will be made to accommodate you either in your department or in a temporary transitional duty position. If you are placed in a transitional duty position, it is your responsibility to coordinate your hours, PTO requests, call-outs or other payroll responsibilities with your Director and your transitional duty supervisor and copy/notify Human Resources.

10. If you are placed out of work, you will be paid 70% of your gross wages up to the allowable Maximum State Workers’ Compensation rate. Your Workers’ Compensation check may be supplemented using EIB/PTO time if applicable.

11. If, for whatever reason, your claim is denied you may be entitled to collect short term Temporary Disability benefits for that period of time you are out of work, subject to the expiration of accumulated paid sick time. The required form can be obtained from the Human Resources Department. A copy of the Letter of Denial from the RWJBH Third Party Administrator should be attached to that form when you file for Temporary Disability.

12. When you are released by the treating physician, you must be cleared to return to work through the Corporate Care/Employee Health Department. In some instances, you may have limitations and your position can be accommodated. You will be returned to work in a temporary limited duty position until you can return to full duty. When returning to work either full or limited duty, it is your responsibility to obtain a note from your treating physician to this effect. You must make arrangements to be seen by the Corporate Care/Employee Health, Physician/Nurse Practitioner, prior to returning to work. During this time the Time and Attendance Policies remain in effect.
13. If you are unable to work at your facility because of this injury, you must not continue to work or begin work for a different employer. Workers’ Compensation regulations provide that if you are deemed unable to work in the capacity of the position in which you were injured, you cannot continue working or begin working at any other job until you have been cleared to return to your position here. Failure to comply with this provision may result in disciplinary action to recover any benefits paid to you.

14. Employees are expected to meet all scheduled appointments including those with the Corporate Care/Employee Health Department, assigned specialists, testing and therapists. Participation to the employee’s fullest ability in all treatments as prescribed is expected. If unable to attend a scheduled appointment, prior approval must be obtained to reschedule or cancel.

NOTE: The employee must be attended by a Physician authorized by the Corporate Care/Employee Health Service or the Workers’ Compensation Third Party Claims Administrator. Before any treatment other than that of an emergency nature is obtained, the employee must receive authorization from Corporate Care/Employee Health Services.

RETURN TO WORK WITH RESTRICTIONS

In the event that the employee’s authorized treating physician indicates that the employee is capable of returning to work with restrictions, e.g., light lifting, no standing, etc., or in the opinion of the Corporate Care/Employee Health Services clinician and the Third Party Claims Administrator, that a change in job duties would permit the employee to return to work at an earlier date that he/she would normally be allowed, the employee would be required to accept placement in a position for which they may be qualified.

1. The occupational medicine clinician in Corporate Care/EHS will review the prospective job duties and may require a written evaluation and authorization from the treating specialist before the employee can be placed in the new position.
2. Failure of the employee to accept interim employment will result in the use of Sick Time or PTO and temporary disability benefits will not be paid for this time out of work.
3. An employee may remain on this status for a maximum of six (6) months at which time discussion of probable Maximum Medical Improvement (MMI) will be conducted between Corporate Care/EHS and HR.

RWJBH STANDARDIZED ORIGINAL DATE: December 2020
REVISED: