WORKER'S COMPENSATION AND JOB-RELATED INJURY LEAVE

A. Generally

The Worker's Compensation law enacted by the legislature of the Commonwealth of Virginia sets the requirement for the employer in the handling of employee illness, injury and disability arising from a job-related accident.

Enforcement and interpretation of the law rests primarily with the Virginia Worker's Compensation Commission.

The law generally states that all necessary medical costs from a job-related accident or illness shall be paid by the employer's Worker's Compensation Insurance provider. Payments for lost time (salary) shall begin the 8th calendar day from the date of the accident and continue until the employee reaches maximum medical improvement, is able to return to work, or returns to work, for a maximum of up to 500 weeks. When the disability exceeds 21 days, the employee is reimbursed for the first 7 days. The law states that the employee shall be paid on the following basis: 2/3 of the employee's gross weekly wage (tax free) with a minimum and maximum dollar amount per week set by law and revised periodically. These payments are subject to a cost of living increase as long as the maximum is not exceeded.

The intent of this law is to provide for the financial needs of the employee and provide incentive for the individual to return to work.

The Regional School Board provides worker's compensation administered by:

The Hanover Insurance Group P.O. Box 15144
Worcester, MA 01615 0144

B. Forms

1. Employer's First Report of Accident

This form shall be completed by the person designated to handle Worker's Compensation within 24 hours of the accident. All sections of the form shall be completed – including the home telephone number of the employee – and the completed form forwarded to Hanover Insurance Group.

2. Incident Report

If this report is required it should be completed with the assistance of the MLWGS Head of Security and/or Clinic Attendant as soon as possible after occurrence of the accident and delivered to the person designated to handle Worker's Compensation.

3. Employee Medical Certification Release Form

If this report is required it should be completed by the person designated within the school to complete this form and the form taken by the employee on the initial visit with the physician. The remainder of the form is to be completed by the physician or medical facility at the time of the initial treatment. The completed form will be returned by the employee to the immediate supervisor and in turn promptly delivered to the person designated to handle Worker's Compensation.

C. Guidelines

The Regional School Board will provide worker's compensation as provided by the Code of Virginia. The Regional School Board will pay a supplement to worker's compensation. The supplement amount, when added to the worker's compensation benefit, will equal in total the "net before loss take home pay as of the regular paycheck prior to the accident or injury" ("net before loss"). The employee will be eligible for the supplement to the extent of the accumulated sick leave balance at the time of the accident or injury. Sick leave will be charged at 1/3 for each workday the employee is absent. No sick leave will be charged for any injury to any employee caused by a student's use of force (student force injury). Student force injury claims will be investigated and determined by MLWGS Administration. No grievance of MLWGS Administration's determination regarding student force injury will be permitted.

The Regional School Board will issue to the employee semi-monthly payment for the amount equal to "net take home pay" less worker's compensation benefits for that payroll period. Voluntary deductions will be deducted from this check. At such time as the employee is no longer eligible for a paycheck, (accumulated sick leave balance exhausted) he or she will be responsible for payment of voluntary deductions. Continuous payment of these deductions must be made to MLWGS by the first day of the month in which coverage is to be effective. While under contract, the Regional School Board will continue VRS, retirement life insurance, and the employer's share of health insurance.

Depending on the duration of the disability and the nature of manpower needs, the Regional School Board cannot guarantee employment after a long absence. However, all efforts will be made to provide productive work if it is available. Should any employee turn down work offered that he or she is capable of performing, the Regional School Board may cease payments of any supplement. Additionally, the Regional School Board may cease payment of the statutory worker's compensation and contest the worker's compensation claim and the outcome of a hearing before the Worker's Compensation Commission. However, worker's compensation decisions will not be binding upon any supplements provided by the Regional School Board.

D. Procedures

When an injury occurs, the MLWGS Head of Security and/or Clinic Attendant must promptly complete the Incident Report. Because the accurate details of the facts of the accident, the witnesses and other details are then available, they must be recorded for use in later investigation, if needed.

The Employer's First Report of Accident Form is to be completed and signed by the person designated within the school to complete this form. The form will be signed by the designated representative and will include his or her title. The original of this form will be delivered within 24 hours of the occurrence of the accident to the worker's compensation provider.

The person designated to handle Worker's Compensation will ensure that the injured employee is provided an Employee Medical Certification Release Form with the top portion filled in and the remainder to be completed by the attending physician or medical facility. The injured employee will be advised to deliver the form to the facility, have the form completed, and then bring the form back to the same person designated to handle Worker's Compensation. It is requested that the physician's name, medical facility, address, and telephone number be shown on the bottom of the form.

All non-life threatening medical care and all medical care after stabilization of life following a life-threatening emergency must be supplied by one of the Regional School Board approved physicians. This list will be made available to all School Board employees. The Regional School Board is responsible for expenses related to any injury or accident pertinent to this regulation. To insure proper and timely payment of all medical bills, the employee will ensure that the medical facility is aware that all charges associated with the treatment of a job-related injury or disease must be billed to MLWGS and not to the individual employee.

Upon exhaustion of employee-accumulated sick leave, the disabled employee's salary supplement will be discontinued.

E. Additional Benefits

Any employee eligible to receive workers' compensation benefits shall be paid the difference between the indemnity received by the employee pursuant to the workers' compensation statutes and the net take-home weekly wage received by the employee on his or her last regular pay prior to the accident/injury. This benefit shall be for period not to exceed the employee's accumulated sick leave balance.

F. Utilization of Leave Time

Accrued sick, annual, personal or compensatory leave time may not be used by the employee in lieu of workers' compensation. The only utilization of leave time is that which is used for supplemental payments.

G. Subrogation

The Regional School Board's claim for recovery of all monies paid or to be paid (medical, compensation, expenses, all supplements, etc.) is superior to any claim the employee may have against any party responsible for the accident/injury. The Regional School Board will be reimbursed first from any settlement with or judgment against anyone. In all instances, the MLWGS Attorney is the only one to represent the Regional School Board's interest. Additionally, the MLWGS Attorney does not represent the employee.

Adopted: September 18, 2014

Cross Ref:

5065-R1 Sick Leave

Reg No.5062-R Health and Dental Care Benefits (under development)

CCPS 5000 Worker's Compensation and Job-Related Injury Leave