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Workers' Compensation Insurance and Accommodations for Injured/Impaired Employees

The following procedure, in accordance with applicable law and rule, provides for the administration of employment benefits due to a work related injury and establishes the parameters for the return to work or continuing employment of employees with either work or non-work related injuries or impairments. (2-CO-1C-01, 4-4041, 4-4054, 4-ACRS-7E-03, 4-APPFS-3E-03)

For the purpose of this procedure, injury means any injury or occupational disease/illness sustained in, or arising out of, the course of employment.

Workers' compensation rights and benefits are provided to all agency employees whether in the classified (probationary and permanent) or unclassified service (including temporary employees) due to the filing of a valid workers' compensation claim. (4-4041)

The agency will pursue available administrative and criminal sanctions in the event an employee files a fraudulent claim.

Safety National is the workers' compensation insurer for agency employees.

Gallagher Bassett is the workers' compensation claims management provider for agency employees.

I. Responding to Work Related Injuries

Following an employee's report of injury; the facility/district/unit head will ensure the employee receives prompt medical attention, a claim is filed with central Human Resources Benefits Unit and a thorough investigation is completed.

A. Report of Injury/Accident (2-CO-1C-05)

1. Any employee who sustains an injury will report the injury to his or her supervisor as soon as possible, and in all instances, prior to the end of the work shift. If the site of the accident is other than the employee's regular work location, the employee will also report the injury to the local supervisor or person with responsibility for the activity in which the employee was participating. In the event the employee is injured while in travel status, the HRMS assigned to the employee's work location will be responsible for the filing of the claim. Failure to timely report may be cause for denying a workers' compensation claim.
2. Supervisors will immediately notify the affected facility/district/unit HRMS and the facility/district/unit head.
3. The employee and all witnesses will document the injury on an incident report as soon as possible and submit the report to his or her supervisor or facility/district/unit Human Resources Management Specialist (HRMS). In the event the employee's assigned work location is different than the site of the accident, the facility/district/unit HRMS at the accident site will provide the assigned employee's work location a copy of the incident report.
4. (Revision-01 09/15/2016) The facility/district/unit head of the work location where the accident occurred will report the accident to the Safety Administration Unit and assign local staff with responsibilities for safety to investigate the accident. The facility/district/unit HRMS will document the accident on the OSHA Form 300. All workplace

accidents will be investigated and reported by the designated safety officer as specified in [OP-100401](#) entitled "Safety Awareness and Training."

5. Copies of accident investigation reports will be provided to the Safety Administration Unit and the central Human Resources Benefits Unit.
6. In the event an employee is injured but denies medical treatment, the employee will be required to complete an incident report and submit the report to his or her supervisor before the end of his or her assigned shift. The employee will indicate they are denying offered medical treatment.

B. Medical Assistance

1. The facility/district/unit head at the work location where the need for medical assistance arises will ensure that prompt medical treatment is authorized when an employee requires more than the first aid available at the facility/district/unit.
2. The employee will be referred to a network provider and provided the Certified Medical Plan, "Authorization for Initial Treatment" form, "Authorization for Release of Information" form, "First Script" (certified medical plan forms are available at the facility's Human Resources office), "Notice of Return to Work" form ([Attachment G](#), attached) and a "Memo to Treatment Provider" form ([Attachment A](#), attached).
3. The initial medical appointment will be made by the facility HRMS or supervisory staff, an occupational medicine clinic, an urgent care facility or an emergency room. The decision for an employee to see a specialist will be made by Gallagher Bassett. The employee will also be provided a Gallagher Bassett "First Script" provided by the field HRMS or the shift supervisor allowing the employee to obtain any prescribed medication within the [Coventry](#) Pharmacy Network.
4. However, in the event of a life or limb threatening situation, the employee may be taken to the nearest medical facility whether or not the facility is part of the provider network.

C. Filing the Claim

1. The facility/district/unit HRMS at the employee's assigned work location or the site of the accident will file a "Workers' Compensation Incident Investigation Report" prior to the end of the work day on which the injury/accident was reported and provide a copy to the central Human Resources Benefits Unit. The document provided to the central Human Resources Benefits Unit must contain the employee's regular days off.

2. If more than 30 days has elapsed between the accident/injury and reporting of the accident/injury or no medical attention was received in the first 30 days (85A O.S. § 68, §302), the facility/district/unit HRMS will notify the employee that the authenticity of the claim will be questioned and the claim may be denied by Gallagher Bassett. In the event the claim is denied, the employee will be responsible for all medical costs accrued and his or her state insurance plan may not cover the medical claim.

D. Questioning the Validity of the Claim

The facility/district/unit will question the validity of the claim for reasons including, but not limited to:

1. Information arising out of an investigation or statements made in connection with the claim, such as inconsistencies in an employee's account or conflicting witness statements;
2. An employee's history of prior disputed or questionable claims;
3. Lack of witnesses to the accident/injury;
4. Knowledge that the employee engages in off duty activities which may have caused the injury;
5. The employee's known medical history which may account for the injury;
6. If more than 30 days has elapsed between the accident/injury and reporting of the accident/injury or no medical attention was received in the first 30 days (85A O.S. § 68, §302);
7. The employee reports an injury immediately following a proposed or completed disciplinary action or other personnel or supervisory action which the employee opposed; or
8. The employee's current activities are inconsistent with the reported physical limitations.

The facility/district/unit will forward [Attachment B](#) entitled "Validity of Claim in Question" (attached) to the central Human Resources Benefits Unit.

E. Workers' Compensation Investigations

Workers' Compensation investigations will be conducted in accordance with [OP-100401](#) entitled "Safety Awareness and Training."

II. Workers' Compensation Benefits

Employee Workers' Compensation Benefits listed in these sections are provided by state statute and may change with legislative changes.

A. Title 85A Benefits

1. Medical Expenses (85A O.S. § 51)
 - a. An eligible employee will be provided with reasonable and necessary medical care and hospitalization in accordance with the law.
 - b. Benefits include fees for medical, surgical, nursing, and hospital services, medicines, crutches, and prosthetic devices, as well as documented travel expenses, to include meals, lodging, mileage and transportation outside the employee's city of residence. However, employees seeking such travel reimbursement must keep accurate records and submit these records when filing for reimbursement.
 - c. Injured employees will be covered for only those medical expenses authorized by the Certified Workplace Medical Plan and the services will only be provided by a network member of the Certified Workplace Medical Plan.
 - d. Upon the employee's return to work, all continuing workers' compensation medical will be covered by Safety National; however, time utilized for these appointments or court appearances will be personal time or leave through an approved leave program in accordance with [OP-110355](#) entitled "Procedures for Employee Attendance and Leave."
2. Compensation
 - a. Temporary Total Disability (TTD)
 - (1) Compensation will not be paid for the first three consecutive calendar days an employee is absent from work and will commence on the fourth calendar day of absence unless a Workers' Compensation Counselor determines the employee will be disabled for more than 21 days. In this case, TTD is paid from the first day of the injury. (85A O.S. § 45)
 - (2) Payments for TTD are equal to seventy percent (70%) of the average weekly wage not to exceed the weekly amount determined by the workers' compensation act (85A O.S. § 45).
 - (3) Employees may elect to supplement TTD payments

with amounts of available sick or annual leave to receive full wages during their absence. (85A O.S. § 45) Available sick and annual leave includes any donated in accordance with the State Leave Sharing Program. Employees are required to complete a "Work Related Injury/Illness Leave Election Form" ([Attachment C](#), attached) and return it to the central Human Resources Benefits Unit in order to exercise a leave supplement option.

- (4) In the event of an injury occurring "in the line of duty" in accordance with [OP-110355](#) entitled "Procedures for Employee Attendance and Leave," Section III. item E.), the director may advance the employee up to 45 days of additional sick leave provided all available sick leave has been used (57 O.S. § 528.1).
- (5) Employees will receive partial paychecks for leave supplements on supplemental payroll.
- (6) An employee using paid leave to supplement TTD payments is considered to be on leave without pay status [Merit Rule 260:25-15-10(e)].
- (7) Any person receiving TTD payments will promptly report in writing, to the agency and Gallagher Bassett, any change in a material fact, the amount of income being received, or any change in employment status occurring during the period of receipt of such TTD payments.

b. Temporary Partial Disability

As in the case of employees who return to work at fewer than 40 hours per week, payments are available to employees who return to work at a wage less than that which they were earning prior to the injury (85A O.S. § 45).

c. Permanent Disability

Determination of disability is the responsibility of the Workers' Compensation Court (85A O.S. § 45).

- (1) Permanent total disability (85A O.S. § 45) benefit payments are provided for employees who are incapacitated because of accidental on-the-job injury or occupational disease and unable to earn any wages in any employment.
- (2) Permanent partial impairment (85A O.S. § 45)

payments are provided to reimburse an employee for any impairment which is permanent in nature but which is not totally disabling.

3. Death Benefits (85A O.S. § 47)

Death benefits are available to dependents of an employee who dies as a result of an occupational illness or injury.

Payments may be made in a variety of ways, depending on marital status and number of dependents.

4. Rehabilitation (85A O.S. § 45)

Payment for physical or vocational rehabilitation services may be provided by workers' compensation insurance to employees unable to return to their original occupations.

B. Title 74 Benefits

1. Retirement (74 O.S. § 913.A.8)

An employee will receive participating service credit for any period of TTD during which the employee remained employed by the agency, provided the employee:

- a. Notifies the retirement system in writing not later than four months after returning to work, terminating employment, or termination of TTD (whichever is earlier) that the employee wants to receive such credit; and
- b. Pays the contributions for the period of absence in accordance with statute and the retirement system's rules for payment.

2. Leave Accrual/Longevity

- a. No period of leave without pay pursuant to 74 O.S. § 840-2.21 will affect an employee's annual leave accrual rate or longevity date [Merit Rule 260:25-15-10(c)(1)(G)].
- b. Periods of leave without pay which continue past two years after the start of leave without pay will be treated as regular leave without pay for leave accrual and longevity purposes.
- c. If the employee's anniversary date falls within a period of leave without pay for less than 30 days, no longevity payment will be made until the employee returns to pay status. If the period of leave without pay is more than 30 days, no longevity payment

will be made until the employee returns to work [74 O.S. § 840-2.18(H)].

3. Title 74 Section 840-2.21 Benefits

All rights and benefits derived from 74 O.S. § 840-2.21 and Merit Rule 260:25-15-49 will end two years after the start of leave without pay and immediately if the claim for workers' compensation is denied or canceled within the two year period [74 O.S. § 840-2.21 and Merit Rule 260:25-15-49(c)].

a. Leave Without Pay

- (1) All employees absent from work pursuant to a workers' compensation claim will be placed on leave without pay and moved to supplemental payroll. Employees may elect to use any applicable time or leave program to cover the first three consecutive calendar days of absence by completing a "Work Related Injury/Illness Leave Election Form" ([Attachment C](#)) (refer to Section II. A. 2. a. item (3) for leave elections to supplement TTD payments).
- (2) For the purposes of determining the two year limit, one year equals 12 continuous months; however, any time an employee returns to work for less than 30 days it will not be considered an end to a continuous absence.
- (3) The central Human Resources Unit will complete an HCM-14 when an employee begins or ends a period of workers' compensation leave without pay. The initiating HCM-14 will reflect in the comment section "Workers' compensation leave without pay in accordance with 74 O.S. § 840-2.21 and Merit Rule 260:25-15-49(f) begins on (date)." The final HCM-14 prepared by the central Human Resources Unit will indicate "Workers' compensation leave without pay ends on (date)."
- (4) Entries on the time/leave sheet for leave without pay will be completed by the central Human Resources Unit in accordance with the provisions of [OP-110120](#) entitled "Procedures for Time/Leave Sheets and Payroll Processing."
- (5) The first 12 weeks (480 hours) of leave without pay which is not supplemented with sick or annual leave, taken by an employee with at least one year of service with the state and who has worked a minimum of 1250

hours during the preceding 12 month period, will be designated as family and medical leave (FMLA).

b. Insurance

The central Human Resources Benefits Unit will provide the Employees Benefits Division (EBD) with the employee's applicable benefit allowance(s), at the same rate provided while in pay status for up to 24 months so that statutorily required insurance coverage can be maintained. Employees remain responsible for any supplemental insurance and/or dependent insurance amounts not covered by their benefit allowance.

III. Benefits Administration

A. Certified Workplace Medical Plan (4-4041)

Each new hire employee will automatically be enrolled in the certified workplace medical plan.

B. Notice to Employees [Merit Rule 260:25-15-49(e)]

The central Human Resources Unit will ensure that all workers' compensation claims benefits are administered in accordance with this procedure.

1. Initial Contact With Employee

Upon notification that a claim has been filed, the central Human Resources Benefits Unit will provide the employee with copies of the following via certified mail: [Merit Rule 260:25-15-49(e)]

a. Merit Rule 260:25-15-49;

b. 74 O.S. § 840-2.21;

c. This procedure (OP-110345) to include the "Work Related Injury/Illness Leave Election Form" ([Attachment C](#)) and "First Preference Form" ([Attachment D](#), attached);

d. An HCM-4B Form and OPERS 515-172-12 "Notice and Application for Temporary Disability Purchase" form; and

e. A letter explaining the employee's benefits and responsibilities.

2. Leave Election/Supplement to TTD

a. Employee Responsibility

The employee is responsible for completing the "Work Related Injury/Illness Leave Election Form" and returning it to the central Human Resources Benefits Unit.

Employees will be placed on leave without pay without supplement until the employee makes an election to supplement TTD with available leave. The leave election form must be completed and returned to the central Human Resources Benefits Unit within 30 calendar days of the receipt of the certified packet. All chosen leave elections received after the 30 calendar day period will be applied only to the time period that follows its receipt by the agency's central Human Resources Benefits Unit.

b. Supervisor Responsibility

If the employee misses work due to a work related injury/illness, the supervisor will ensure the employee's timesheet is completed accurately, up to the time the work related injury/illness causes the need for leave. The supervisor is responsible for submitting the timesheet to the field HRMS staff within two working days of the notification of the need for leave.

c. Field HRMS Staff Responsibilities

The field HRMS staff will forward the monthly time sheet completed as submitted by the supervisor along with any documents requested by the central Human Resources Benefits Unit.

d. Central Human Resources Benefits Unit Responsibility

The central Human Resources Benefits Unit will complete the appropriate entries on the time/leave sheet and process the supplement (partial paycheck), in accordance with the employee's election(s) made and available leave balances. The audited time/leave sheet will then be forwarded to the central Human Resources Payroll Unit for supplemental payroll processing.

3. Insurance Premium Payments

The central Human Resources Benefits Unit will notify employees of the amount(s), method of payment, dates due, and mailing address for any insurance premium payments required by the employee to maintain benefits coverage.

4. Retirement Service Credit Purchase

The employee is responsible for pursuing any desired purchase of retirement service credit from OPERS (See Section II.B. item 1. of this procedure).

IV. Return to Work

The agency will make reasonable effort to return injured or impaired employees to work. (2-CO-1C-09-1, 4-4054, 4-ACRS-7E-03, 4-APPFS-3E-03) Employees who refuse any reasonable accommodation are not entitled to receive any additional offers of accommodation.

A. Medical Statement

No employee may return to work from a workers' compensation injury without a medical release from the treating physician.

1. This release must indicate whether it is a full release with no restrictions or a release with restrictions. A release with restrictions must indicate whether the restrictions are temporary or permanent. In the event the release is with temporary restrictions an updated medical statement will be required, at a minimum, every 30 days.
2. Any employee who requests an accommodation must provide a medical statement indicating the physical or mental restrictions that are the reason for accommodation and the approximate period of time the accommodation is medically required.
3. The agency will be the sole determiner of whether stated physical or mental restrictions limit or prohibit the employee's ability to perform essential job functions.

B. Agreement to Restrictions

The facility/district/unit HRMS will complete an "Agreement to Restrictions" form ([Attachment E](#), attached) and attach the medical report from the authorized treatment provider which lists all physical and mental restrictions. The completed attachment must be signed and dated by both the employee and supervisor prior to permitting an employee to return to work with physical or mental restrictions. A copy of the signed/dated [Attachment E](#) (with the treatment provider report attached) will be forwarded to the central Human Resources Benefits Unit.

No employee will be assigned or permitted to perform any job duties that violate the restrictions. Employees who disregard restrictions will be subject to discipline.

C. Notice of Return to Work or Status Change

The facility/district/unit HRMS will notify the central Human Resources Benefits Unit immediately when an employee returns to work from a work related injury or when the employee changes to a status other than workers' compensation leave, such as sick leave, annual leave or separation from the agency, by submitting the "Notice of Return to Work (Form 5)" ([Attachment G](#)).

1. First Preference Placement

The right to a first preference placement in an alternate position will expire one year from the date of the start of leave without pay [Merit Rule 260:25-15-49(c) and (j)(2)].

Provided all procedural guidelines are met, the agency will place employees in appropriate vacant positions on a first come-first served basis. Eligible employees are not required to interview for such placement and such placement is not subject to review by the local appointing authority. The posting of job vacancies and the scheduling of interviews will not prevent eligible employees from appropriate placement. Such job postings and interviews will be cancelled.

Nothing in this procedure prohibits a qualified employee from applying for positions which constitute a promotion through the normal process as outlined in [OP-110235](#) entitled "Hiring and Promotional Procedures." Despite termination of first preference placement rights, an employee may remain eligible to apply for an alternate position under the Americans with Disabilities Act, in accordance with Section IV. E. 1. item c. of this procedure.

2. Employee Eligibility

The employee will be eligible for first preference placement under the following conditions:

- a. The employee is released to return to work by the treating physician, pursuant to a valid workers' compensation claim, with restrictions that preclude a return to the original position (performance of essential job functions) with or without reasonable accommodation;
- b. The agency has a vacant, funded position for which there is an approved HCM-92;
- c. The employee is medically able to perform the essential duties of the vacant position, with or without reasonable accommodation;

- d. The employee meets the minimum qualifications of the position as certified by the Division of Human Capital Management, Office of Management and Enterprise Services;
- e. The position does not constitute a promotion to the employee; and
- f. The employee is within one year after the start of leave without pay, or date of injury in the event the employee never started a period of leave without pay.

3. Employee Responsibility

In order to exercise first preference rights, the employee must notify the Central Human Resources Unit of any position that employee is interested in that does not constitute a promotion, and provide the central Human Resources Benefits Unit with:

- a. Medical documentation that the employee is able to return to work and has restrictions/limitations that prevent the employee from returning to the original position (performing essential job functions) with or without reasonable accommodation;
- b. A completed "First Preference Form ([Attachment D](#));" and
- c. A completed HCM-4B form.

If placement occurs, and the employee does not sign a "waiver" in accordance with Section IV. C. 4. item b. of this procedure, medical statements from the treatment provider must be provided every three months until expiration of the right to return to the original position.

4. Central Human Resources Unit Responsibility

Following receipt of the above referenced documents, the central Human Resources Benefits Unit will:

- a. Notify the affected sending and receiving facilities/districts/units when placements are to occur and whether the employee still has the right to return to the original position;
- b. In the event a placement is made prior to the end of one year after the start of leave without pay, provide the employee with a "Waiver of Right to Return to the Original Position" form ([Attachment F](#), attached). If the employee and the facility/district/unit head for the original position do not sign the waiver, the employee will be returned to the original position, if medically able, within two years after the start of leave without pay;

- c. Coordinate, with affected HRMS(s), the notification to the employee of the placement, the date of return to work, and the completion of the HCM-14; and
- d. Provide the employee and affected facility/district/unit(s) notification when first preference rights expire or end, and when the right to return to the original position ends.

D. Return to Original Position

The following section applies to injured or impaired employees regardless of whether the injury or impairment was work-related or non-work related.

1. Without Reasonable Accommodation

Employees who are released to return to work with no physical or mental restrictions or with restrictions that do not limit their ability to perform the essential job functions of their positions will be immediately returned to their original positions.

2. With Reasonable Accommodation (2-CO-1C-09-1, 4-4054, 4-ACRS-7E-03, 4-APP-3E-03)

- a. When physical or mental restrictions limit an employee's ability to perform essential job functions, the facility/district/unit will provide a reasonable accommodation that will enable the employee to continue to perform the essential functions of the original position. Accommodations include, but are not limited to: modifications to the way in which work is accomplished, the work schedule, or appropriate use of available leave programs in accordance with Section IV. E. 1. item b. regarding correctional security officers.
- b. Reasonable accommodation for restrictions unrelated to a workers' compensation claim will be requested using "Employee Request for Reasonable Accommodation" (Attachment B of [OP-110218](#) entitled "Employee Medical Exams/Inquiries and Records") and processed in accordance with [OP-110218](#).

E. Return to An Alternate Position (Other Than First Preference)

When an employee is unable to perform the essential functions of the original position, with or without reasonable accommodation, the following accommodations will be made in accordance with this section:

1. Assignment of Temporary Duties/Temporary Restrictions

a. Light Duty

- (1) The goal of the light duty assignment is to permit employees to return to work as soon as possible following injury and resume the essential job functions of their original positions when restrictions expire.
- (2) Light duty assignments and/or reasonable accommodations will be made available in every case possible, as a coordinated effort by the facility, central Human Resources Unit and the DOC general counsel. Light duty assignments will require the employee to complete [Attachment E](#). Reasonable accommodations will require the employee to complete an "Employee Request for Reasonable Accommodation" ([OP-110218, Attachment B](#)).
- (3) For periods of temporary restrictions, employees will be provided any assignment of medically appropriate duties at their facility/unit for a period less than 180 days in any 12 month period (Merit Rule 260:25-11-110). The employee will continue to occupy, and be compensated for, the original position.

b. Light Duty for Correctional Security Officers

- (1) The essential job functions of a correctional officer include the ability to rotate through all posts and shifts, the ability to work any assigned shift or day of the week, and the ability to work additional shifts as required. Reasonable accommodation does not include a limit on the type of post or shift that can be worked.
- (2) Correctional officers may be assigned to work light duty. The officer will be required to dress appropriately for the position to which he/she is assigned. Uniforms may be worn if the assignment is a security post.

c. Permanent Placement/Permanent Restrictions

Employees with permanent restrictions which prohibit the performance of the essential job functions of their positions may request, and be granted, transfer or demotion, or apply for promotion, in accordance with applicable Merit Rule and agency procedure [OP-110235](#) entitled "Hiring and Promotional Procedures."

To ensure all possible options are considered, the employee is responsible for submitting a current, thorough HCM 4B to determine qualifications.

V. Failure to Return to Work

A. Discipline [Merit Rule 260:25-15-49(j)(1)]

An employee may be disciplined if:

1. A medical report indicates that the employee is able to do the essential duties of the original position or an alternate position (for which the employee is qualified); and
2. The employee fails to return to work within seven days after the facility/district/unit mails a notice to return to work to the employee's last known address or delivers a notice to the employee.

B. Termination [74 O.S. § 840-2.21D, Merit Rule 260:25-15-49(j)(2) and (3)]

1. An employee who does not return to work in either the original or an alternate position within two years after the start of leave without pay may be terminated under the authority of 74 O.S. § 840-2.21.
2. Termination of a permanent classified employee is subject to the pre-termination hearing requirements of 74 O.S. § 840-6.4. [Merit Rule 260:25-15-49(j)(2)].
3. Any letter of termination that uses 74 O.S. § 840-2.21 as authority to terminate must contain the following notification of the right of reinstatement [Merit Rule 260:25-15-49(j)(2)]:

“A classified employee shall be eligible for reinstatement to either classified or unclassified employment with any state agency for 12 months after the date of separation. An unclassified employee shall be eligible for reinstatement to unclassified employment with any state agency for 12 months after the date of separation. This does not reduce eligibility under other general reinstatement or reemployment laws or rules, such as 260:25-9-102.”

VI. Prohibited Activity

A. Off Duty Activity

Employees who are off work due to a workers' compensation injury will refrain from engaging in any off duty employment or activity that would interfere with recovery or violate any treatment provider's instructions.

B. Fraud

1. Employees will not engage in any fraudulent acts. Workers' compensation fraud is the altering, falsifying, forging, counterfeiting, or otherwise changing any material, statement, form, document, contract, application, certificate, or other writing with the intent to defraud, deceive, or mislead another (21 O.S. § 1663).
2. Information or tips regarding fraudulent claims must be reported to the facility/district/unit head and to the central Human Resources Benefits Unit.

VII. Record Keeping

A. Workers' Compensation Files

Facilities/districts/units and the central Human Resources Benefits Unit will maintain copies of all workers' compensation claims and related materials. Workers' compensation claim information will be kept separate from the personnel file and maintained for a period of two years following the exhaustion of all legal remedies (CGRDS 2-57, 3-27). After two years following the exhaustion of all legal remedies, records will be disposed of in accordance with [OP-020202](#) entitled "Management of Office Records."

B. Department of Labor Reporting

1. (Revision-01 09/15/2016) Facility/district/unit HRMSs will maintain a record of all occupational illness and injury by calendar year using the Department of Labor's Form OK 300, "Log Work-Related Injuries and Illnesses."
2. (Revision-01 09/15/2016) Facility/district/unit HRMSs will ensure completion and annual posting requirements of the OK-300A are met and a copy of the previous calendar year's summary, OK-300A, will be posted from February 1 through April 30. The original will be provided to the Safety Administration Unit for forwarding to the Department of Labor.
3. The Safety Administration Unit will complete all reports required by the Department of Labor in the event a workers' compensation injury/illness results in the death of one or more employees or the hospitalization of five or more employees. The report is made to the Public Employees Occupational Safety and Health (PEOSH). The form is available on the ODOL website (www.okdol.state.ok.us). This report must be made within 48 hours of the occurrence.
4. (Revision-01 09/15/2016) The Safety Administration Unit will complete the OK-301 report.

VIII. References

Policy Statement No. P-110100 entitled "Uniform Personnel Standards"

OP-020202 entitled "Management of Office Records"

OP-100401 entitled "Safety Awareness and Training"

OP-110120 entitled "Procedures for Time/Leave Sheets and Payroll Processing"

OP-110218 entitled "Employee Medical Exams/Inquiries and Records"

OP-110235 entitled "Hiring and Promotional Procedures"

OP-110355 entitled "Procedures for Employee Attendance and Leave"

85 O.S. 2e, 13, 14, 16, 17.A.1, 22.1, 22.1.A, 22.3, 22.4, 22.8, 24.2

85A O.S. § 45, 47, 51, 68, 302

74 O.S. § 840-2,18 (H) and 2.21, § 913.A.8

57 O.S. § 528.1 and 2

21 O.S. § 1663

Merit Rule 260:25-15-49

Merit Rule 260:25-15-47

Merit Rule 260:25-15-10(c)

Merit Rule 260:25-5-11(b)

Consolidated General Records Disposition Schedule (CGRDS) 2-57 and 3-27

Oklahoma Department of Labor Pre-notification and Recordkeeping Booklet

www.okdol.state.ok.us

IX. Action

The division manager/unit head is responsible for compliance with this procedure.

The chief administrator of Employee Services is responsible for the annual review and revisions.

Any exceptions to this procedure will require prior written approval from the director.

This procedure is effective as indicated.

Replaced: Operations Memorandum No. OP-110345 entitled "Workers' Compensation Insurance and Accommodations for Injured/Impaired Employees" dated September 5, 2014

Deleted: OP-110345 Revision-01 dated April 6, 2015

Distribution: Policy and Operations Manual
Agency Website

<u>Referenced Attachments</u>	<u>Title</u>	<u>Location</u>
Attachment B	"Employee Request for Reasonable Accommodation"	OP-110218
Attachment A	"Memo to Treatment Provider"	Attached
Attachment B	"Validity of Claim in Question"	Attached
Attachment C	"Work Related Injury/Illness Leave Election Form"	Attached
Attachment D	"First Preference Form"	Attached
Attachment E	"Agreement to Restrictions"	Attached
Attachment F	"Waiver of Right to Return to Original Position"	Attached
Attachment G	"Notice of Return to Work (Form 5)"	Attached

