

Benefits

Medical Care

Your claims administrator will pay all reasonable and necessary medical care for your work injury or illness. Medical benefits may include treatment by your doctor, hospital services, physical therapy, lab tests, x-rays, and medicines. Your claims administrator will pay the costs directly, so you should never see a bill. For injuries occurring on or after 1/1/04, there is a limit on some medical services.

How to Obtain Medical Care

FIRST AID:

Seek first-aid immediately.

EMERGENCY CARE:

Get help immediately.

See the emergency telephone numbers in this pamphlet, which should also be posted in your workplace. Call an ambulance or go to the nearest emergency room.

ACUTE AND FOLLOW-UP CARE:

- A. If you predesignated your personal M.D. or D.O. (see form in this pamphlet):

Contact your physician as soon as possible and make arrangements for treatment.

- B. If you did not predesignate your personal M.D. or D.O.:

Call Employee Health Services at (415) 885-7580 as soon as possible and make arrangements for treatment.

Temporary Disability Payments

If you are disabled for more than three (3) calendar days, temporary disability payments will partially replace your lost wages. The first three calendar days are not paid unless you are disabled for more than 14 days, or are hospitalized overnight. You should receive your first payment within two weeks of reporting your injury. Every two weeks after that, you will receive another payment.

Temporary Disability pays two-thirds of your average wage, subject to minimum and maximum amounts set by state law. The payments are tax-free and there are no deductions.

TD payments stop when your doctor says you can return to work, or your condition has become Permanent and Stationary (your medical recovery has reached maximum foreseeable improvement). Also, for injuries occurring on or after April 19, 2004, TD payments stop after 104 payable weeks within two years from the date of the first TD payment; or after 240 payable weeks within five years from the date of injury for specific long-term conditions such as amputations, severe burns, and certain chronic diseases.

Benefits (continued)

Permanent Disability Payments

If a doctor says your injury or illness will always leave you somewhat limited in your ability to work, you may be eligible for permanent disability payments. The amount will depend on the type of injury, your age, occupation, date of injury, and how much of the permanent disability was caused by the work injury. There are minimum and maximum amounts set by state law. Payments are made at a regular rate and are spread out over a fixed number of weeks until the total amount has been paid. If you received temporary disability payments, the first permanent disability payment is due within 14 days after the TD payments stopped. If you did not receive TD payments (many people with permanent disability keep working), the first permanent disability payment is due within 14 days after your doctor says your condition is permanent and stationary (your medical recovery has reached maximum foreseeable improvement). Subsequent payments are made every 14 days until the total amount is paid.

Death Benefits

If the injury or illness causes death, payments may be made to relatives or household members who are financially dependent on you. The amount is set by state law and depends on the number of your financial dependents. Payments are made at the same rate as temporary disability. A burial allowance is also provided.

Supplemental Job Displacement Benefits

If you have permanent disability, and you do not return to work within 60 days after your temporary disability ends, and the University does not offer modified or alternative work, you may qualify for a non-transferable voucher payable to a school for retraining and/or skill enhancement. If you qualify, the claims administrator will pay the costs up to the maximum set by state law based on your percentage of permanent disability. SJDB is a benefit for injuries occurring on or after 1/1/04.

If Benefits Are Denied

You have the right to disagree with any decision affecting your claim. Call your claims administrator first to see if you can resolve any disagreement. For free assistance, you can contact an information and assistance officer at the Division of Workers' Compensation (see the section of this pamphlet captioned "If You Have Other Questions"). You can also file with the Workers' Compensation Appeals Board (WCAB). There are deadlines for filing the necessary WCAB paperwork, so you should not delay. You can also consult with an attorney. Most attorneys offer one free consultation. If you decide to hire an attorney, his or her fee will be taken out of your benefits. For names of W/C attorneys, call the State Bar of California at (415) 538-2120 or go to their web site at www.californiaspecialist.org

Your Treating Physician

Quality medical care is crucial to making the best recovery from your work injury or illness.

Primary Treating Physician (PTP)

Your primary treating physician (PTP) is the doctor with overall responsibility for treating your work injury or illness and for coordinating care with other providers. The PTP decides what type of medical care you need; whether there are temporary or permanent medical limitations or restrictions on your ability to perform work; and when you are able to return to work. If the injury results in some degree of permanent disability, the PTP will measure the disability and report the findings to your claims administrator. The PTP will also report whether you will need medical care in the future.

As part of your Workers' Compensation benefits, the University will provide you with a PTP.

Personal Physician (M.D. or D.O.)

If you have a personal M.D. or D.O. and you wish to designate this physician to be your PTP, you must do so in writing before the injury occurs. In addition, before the injury occurs, the physician must agree to treat you for a work related injury or illness.

One-Time Right to Change PTP

You have the right to change your PTP one time. You can request this change at any time.

Change of PTP: First 30 Days

If you make your request to change PTP during the first 30 days after reporting your injury, you can change to your personal chiropractor or acupuncturist if you have predesignated this physician.

Change of PTP: After 30 Days

If you have not already used your one-time change of PTP, then thirty (30) days after reporting your injury, you may change to the PTP of your own choice. This can be your personal M.D. or D.O., your personal chiropractor, personal acupuncturist, or any physician of your choice within a reasonable geographic area.

Physician Predesignation Form

You may use the Physician Predesignation Form in this pamphlet to predesignate your personal physician, chiropractor, or acupuncturist. After the form is completed, mail it HR DMS at UCSF Box 0964, SF, CA 94143-0964. If you have questions about the form, or how to complete it, call HR DMS at (415) 476-2621.

Physician Predesignation Form

Your personal medical physician (M.D. or D.O.), chiropractor (D.C.), or acupuncturist (L.A.C.):

- Is your regular treatment provider;
- Has directed your treatment in the past;
- Retains your treatment records and history.

If you give your employer the name and address of your physician in writing before the injury, then:

- You can treat with your personal M.D. or D.O. immediately after the injury.
- You can change to your personal D.C. or L.A.C. if you exercise your right to one change of treating physician.

Your personal M.D. or D.O. must agree to treat you for work injuries or illnesses before one occurs.

EMPLOYEE COMPLETES THIS SECTION

For a work-related injury or illness, I designate:

Doctor's Name: _____

Circle one: M.D., D.O., D.C., L.A.C.

Doctor's Address: _____

Doctor's Phone: _____

Employee Name (Print): _____

Employee Signature: _____

Date: _____

M.D. or D.O. COMPLETES THIS SECTION

I agree to treat the above individual for future work-related injuries or illnesses.

Physician Name (Print): _____

Physician Signature: _____

Date: _____