

**UNIVERSITY OF MINNESOTA**

## Reporting Workers' Compensation Related Injuries

### UMD Department of Human Resources

Policy 4.4.1.2

Effective April 2000

The following are responsible for the accuracy of the information contained in this document

**Responsible University Officer**  
Controller

**Responsible Office**  
Workers' Compensation Administration  
(Office of Risk Management and Insurance)

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## Referring an Employee for Medical Care

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If an injury is a potential life-threatening emergency call 911.

### Initial Referral

#### Authorize Care

When an injury requiring medical attention occurs, injured employees are encouraged to seek the initial evaluation and ongoing treatment with the designated medical providers listed in the Contacts section of the policy entitled Reporting Work Related Injuries, policy 4.4.1. Under Minnesota law, an injured employee has the right to choose his/her own treating physician. The University also has the right to request, periodically, that the employee be seen by a clinic of the University's choice.

You may encourage and request that the employee go to the "designated" provider. You may also inform the employee that the first visit with the "designated" provider will be paid for by Workers' Compensation, even if they choose to see their own medical provider.

#### Provide Report to Employer Form

In addition, *outstate campus and facility supervisors* are required to provide the employee with Work Status Report to be taken to the medical provider. The treating physician will complete this form, will list any period of disability or restrictions and give it back to the employee. The completed **Work Status Report** is to be given to the UMD Workers' Compensation Coordinator upon the employee's return. A sample of this form is enclosed and may be copied as needed.

#### Receive Employees' Medical Report

The employee is to be directed to return the Work Status Report to the UMD Workers' Compensation Coordinator after being seen at the medical center. If the employee is medically unable to return to

work, the employee must notify the supervisor by phone as soon as possible. The supervisor shall notify the UMD Workers' Compensation Coordinator.

If Total Disability is not indicated on the **Work Status Report**, and/or restrictions do not appear complete or clear, the UMD Workers' Compensation Coordinator shall contact the medical provider for clarification of restrictions.

When there are work restrictions indicated on the **Work Status Report**, every effort is to be made to accommodate the employee's restrictions as listed. If restrictions cannot be accommodated or the department cannot continue the accommodation, phone contact with the UMD Department of Human Resources shall be made prior to the employee's next scheduled shift.

### **Report to University's Workers' Compensation Department**

The UMD Workers' Compensation Coordinator shall forward by FAX and mail the original of any completed **Work Status Report** to the University's Workers' Compensation Department. Any forms or "al disability" must promptly be sent by fax to the University's Workers' Compensation Department at 612-627-1855 as soon as possible.

### **Additional Referral**

Employees complaining of aggravations of a pre-existing condition or any re-injury are to be directed for medical attention in the same manner as specified in the Initial Referral procedure above.

The University of Minnesota is an equal opportunity educator and employer

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