

NOTICE TO NEW EMPLOYEES

WORKERS' COMPENSATION

This form complies with Division 4, Chapter 2, Article 4, Section 3550 and 3551 of the California Labor Code.

If a work related injury or illness occurs, you are automatically entitled to Workers' Compensation benefits.

In the event of a work related injury or illness, you must notify your supervisor immediately!

You have a right to receive medical care at any of the facilities listed on the attached information sheet, and to receive temporary disability indemnity, permanent disability indemnity, vocational rehabilitation services, and death benefits (as appropriate). You may use a designated personal physician if you file the "Predesignation of Personal Physician" form prior to any injury.

The District is self-insured, and work related injuries are administered by York Insurance Services, P.O. Box 619058, Roseville, CA 95661-9058; telephone number (916) 960-0928.

Name of Employee: _____

Employee ID: _____

Signature: _____

Date: _____

Date of Hire: _____

Signature of Interviewer: _____

Original: Employee's Personnel File

CALIFORNIA WORKERS' COMPENSATION WHAT EVERY WORKER SHOULD KNOW

What is workers' compensation?

If you get hurt on the job, your employer is required by law to provide workers' compensation benefits. You could get hurt by:

- One event at work. Examples: hurting your back in a fall, getting burned by a chemical that splashes on your skin, getting hurt in a car accident while making deliveries,
-or-
- Repeated exposures at work. Examples: hurting your wrist from doing the same motion over and over, losing your hearing because of constant loud noise.

What are the benefits? They can include:

Medical Care. The right to receive regular medical care, paid for by your employer, to help you recover from an injury or illness caused by work. In case of injury or illness, a list of employer Designated Medical Facilities and Hospitals are available to you at your Dean's, Director's and Vice President of Administration offices.

Temporary Disability Benefits. Payments if you lose wages because you can't do your usual job while recovering.

Permanent Disability Benefits. Payments if you don't recover completely and will always be somewhat limited in your ability to work.

Death Benefits. Payment to the spouse, children or other dependents of a worker who dies from a job injury or illness.

Can I choose the Doctor that will treat me?

It depends. If you want to choose the doctor who will treat you for a job injury or illness, you must tell your employer the name and address of your personal physician before you are injured. You must do it in *writing*. This is called **predesignating your personal physician**.

- **If you predesignate:** you will be allowed to see your personal physician right after you are injured. You may switch doctors later, if necessary.
- **If you don't predesignate:** Your employer usually will have the right to choose the doctor who treats you during the first 30 days after your employer learns about your injury or illness. A list of employer Designated Medical Facility and Hospitals are available to you at your Dean's, Director's and Vice President of Administration offices. Under Section 4600 and 4601 of the California Labor Code, you have the right to request a change of treating physician if the original treating physician was selected by the employer. Thirty (30) days after reporting an injury you can be treated by a physician of your own choice. Upon selecting a physician thirty (30) days after reporting the injury, you should immediately notify the District's Workers' Compensation Administrator of the name and address of the physician you selected.

How do I predesignate?

You can predestinate a doctor of medicine (**M.D.**), or a doctor of osteopathy (**D.O.**) who treated you in the past and has your medical records. Or you can predesignate the office, clinic, or hospital where the doctor treated you.

Notify your employer in *writing*. Predesignation of Personal Physical Forms are available at the District Office Human Resources Department and General Services Department.

CALIFORNIA WORKERS' COMPENSATION WHAT EVERY WORKER SHOULD KNOW

Did you Know?

- Medical care must be paid for by your employer if you get hurt on the job, whether or not you miss time from work.
- You may be eligible to receive benefits even if you are a temporary or part-time worker.
- You don't have to be a U.S. citizen to receive workers' compensation benefits.
- You receive benefits no matter who was at fault for your job injury.
- You can't sue your employer for a job injury (in most cases).
- Under Labor Code Section 132(a), it's illegal for your employer to punish or fire you for having a job injury or for requesting workers' compensation benefits when hurt on the job.

Why is the choice of doctor important?

Your treating doctor will:

- Decide what type of medical care you will receive.
- Help identify the kinds of work you can do safely while recovering.
- Determine when you can return to work.
- Write medical reports that will affect the benefits you receive.

What Should I do if I get hurt on the job?

- Report the injury to your employer

Tell your supervisor right away. If your injury or illness developed gradually (like tendonitis or hearing loss), report it as soon as you learn it was caused by your job. Reporting promptly helps prevent problems and delays in receiving your benefits, including necessary medical care. To be eligible for benefits, you have one year from the time that you know you have a work-related injury or illness to report the injury to your supervisor.

- Get emergency treatment if needed

If it's a medical emergency, go to an emergency room right away. Your supervisor may advise you where to go for treatment. Tell the health care provider who treats you that your injury or illness is job-related.

How can I avoid getting hurt on the job?

It's best to *prevent* injuries before they happen. Employers are required to have an Injury and Illness Prevention Program. Learn about and participate in your employer's program. Report unsafe conditions to your supervisor.

How can I find out more about workers' compensation?

- Talk to a supervisor or manager at work. Your employer is required to post information about workers' compensation and give you written materials.
- Contact a state Information and Assistance Officer. The Information and Assistance Officer can answer questions about workers' compensation. Call toll-free 1 (800) 736-7401, or you can get written information about workers' compensation by going to the Division of Workers' Compensation website at www.dwc.ca.gov

Los Rios Community College – Occupational Medical Clinics
(We recommend you call first to verify that the services listed below have not changed since the last update-Rev. 12/2020).

Kaiser Occupational/Folsom

2155 Iron Point Rd.
Folsom, CA 95630
2nd Floor
(916) 817-5667
8:30 a.m. - 4:30 p.m. (M-F)

Kaiser Occupational/Roseville

1600 Eureka Rd.
Roseville, CA 95661
Bldg. 2C
(916) 784-4000
8:30 a.m. - 5:00 p.m. (M-F)

Kaiser Occupational/South Sacramento

6600 Bruceville Rd.
Sacramento, CA 95823
Medical Office Bldg. 3, 2nd Floor Rm. 235
(916) 688-2005
8:30 a.m. - 5:00 p.m. (M-F)

Kaiser Occupational/Sacramento

2025 Morse Ave.
Sacramento, CA 95825
Across from main hospital
(916) 973-5499
8:30 a.m. - 5:00 p.m. (M-F)

Mercy Medical Group

3000 Q Street 4th Floor
Sacramento, CA 95816
(916) 733-3390
7:00 a.m.-5:00 p.m. (M-F)

Urgent Care After Hours (1st Floor)

(916) 733-3377
5:00 p.m.-7:00 p.m. (M-F)
8:00 a.m. - 4:00 p.m. (S&S/Holidays)

Mercy Medical Group

9394 Bighorn Blvd.
Elk Grove, CA 95758
(916) 691-8505
8:00 a.m.-12:30 p.m. (M-F)
1:30 p.m. - 5:00 p.m. (M-F)

Mercy Medical Group

1730 Prairie City Road
Folsom, CA 95630
(916) 351-4801
8:00 a.m. - 4:30 p.m. (M-F)

**Designated Hospitals –
Emergency and after hours:**

Kaiser Hospitals:

Kaiser South Sacramento

6600 Bruceville Road
916-688-2535

Kaiser Sacramento

2025 Morse Ave
916-973-6600

Kaiser Roseville

1600 Eureka Road
916-784-5380

Mercy Hospital

Mercy San Juan Hospital

6501 Coyle Avenue – Carmichael
(844) 335-6063

Mercy Hospital of Folsom

1650 Creekside Drive
(855) 730-2811

Mercy General Hospital

4001 J Street
Sacramento
(844) 239-8383

Marshall Hospital

1100 Marshall Way Placerville
530-622-1441

LOS RIOS COMMUNITY COLLEGE DISTRICT
OPTIONAL
PRE-DESIGNATION OF PERSONAL PHYSICIAN

In the event you sustain an injury or illness related to your employment, you may be treated for such injury or illness by your personal medical doctor (M.D.), doctor of osteopathic medicine (D.O.) or medical group if:

- You have health care insurance for injuries/illnesses that are not work-related;
- The doctor is your regular physician, who shall be either a physician who has limited his or her practice of medicine to general practice or who is a board-certified or board-eligible internist, pediatrician, obstetrician-gynecologist, or family practitioner, and has previously directed your medical treatment, and retains your medical records;
- Your "personal physician" may be a medical group if it is a single corporation or partnership composed of licensed doctors of medicine or osteopathy, which operates an integrated multispecialty medical group providing comprehensive medical services predominantly for nonoccupational illness and injuries;
- Prior to the injury your doctor agrees to treat you for work injuries or illnesses;
- Prior to the injury you provided your employer the following in writing: (1) notice that you want your personal doctor to treat you for work-related injury or illness, and (2) your personal doctor's name and business address.

You may use this form to notify your employer if you wish to have your personal medical doctor or a doctor of osteopathic medicine treat you for a work-related injury or illness and the above requirements are met.

NOTICE OF PRE-DESIGNATION OF PERSONAL PHYSICIAN
(Employee: Complete this section)

To: Los Rios Community College District (name of employer).

If I have a work-related injury or illness, I choose to be treated by: _____
(Name of Physician) (M.D., D.O., or medical group)

_____/_____
(Physician's street address, city, state, ZIP) (Physician's telephone number)

Employee Name: _____ **Employee ID#** _____
(please print)

Employee's Address: _____

Name of insurance company, plan or fund providing health coverage for non-occupational injuries or illnesses:

Employee's Signature: _____ **Dept:** _____ **Location:** _____ **Date:** _____
Status: Faculty Regular Classified Temporary Classified Student Help Manager

Note to Employee: Unless an employee agrees, neither the employer nor the claims administrator shall contact your personal physician to confirm a pre-designation. If your physician does not sign the form, other documentation that they agreed to be pre-designated prior to the injury will be required. If you agree that after receiving this from your employer or claims administrator may contact your physician to confirm the pre-designation, sign below:

Employee's Signature: _____ **Date:** _____

Physician: I agree to this Pre-designation:

Signature: _____ **Date:** _____
(Physician or Designated Employee of the Physician Medical Group)

The physician is not required to sign this form, however, if the physician or designated employee of the Physician or medical group does not sign, other documentation of the physician's agreement to be pre-designated will be required pursuant to Title 8, California Code of Regulations, section 9780.1 (a)(3).

Note to Physician: California workers' compensation medical services are subject to preauthorization of non-emergency services; utilization review; reporting requirements; and the California Official Medical Fee Schedule. The following optional information may assist communication and facilitate the authorization, reporting, recordkeeping and payment process:

Office Manager/Billing Contact: _____
Mailing Address (if different from street address): _____
Phone: _____ **Fax:** _____ **Email:** _____

EMPLOYEES: IF YOU CHOOSE TO COMPLETE THIS FORM, PLEASE RETURN THE COMPLETED FORM TO HUMAN RESOURCES AT THE DISTRICT OFFICE. REMEMBER: ALL work related injuries or illnesses must be reported to your Supervisor promptly.

Original: Employee's Personnel File **Copy:** General Services Insurance file **Copy:** V.P. of Administration

new hire pamphlet

If a work injury occurs

California law guarantees certain benefits to employees who are injured or become ill because of their jobs.

Any job related injury or illness is covered. Types of injuries include, but may not be limited to, strains, sprains, cuts, cumulative or repetitive traumas, fractures, illnesses and aggravations. Some injuries from voluntary, off duty, recreational, social or athletic activity may not be covered. Check with your supervisor or Keenan & Associates if you have any questions.

All work related injuries must be reported to your supervisor immediately. Don't delay. There are time limits. If you wait too long, you may lose your right to benefits. Your employer is required to provide you a claim form within one working day after learning about your injury.

It is a misdemeanor for an employer to discriminate against workers who are injured on the job or who testify in another employee's case. Any such employee may be entitled to compensation, reinstatement and reimbursement for lost wages and benefits.

Workers' compensation benefits include

Medical Care – All medical treatment, without a deductible or dollar limit. For dates of injury on or after 1/1/04 there is a limit of 24

chiropractic, 24 physical therapy and 24 occupational therapy visits. However this limit does not apply for post surgical treatments. Costs are paid directly by Keenan & Associates, through your employer's workers' compensation program, so you should never see a bill.

If emergency treatment is required go to the nearest emergency room or contact 911.

Keenan & Associates will arrange medical treatment, often by a specialist for the particular injury. Preferred Provider Networks may be utilized for physicians as well as medical care centers.

If you have health care coverage you are eligible to treatment with your personal physician or medical group should you become injured on the job. If you are eligible, **before you are injured**, you must notify your employer **in writing** and provide your employer **written** documentation from your personal physician or medical group that they agree to be predesignated. Your personal physician must be your regular primary care physician who previously directed your medical treatment, who retains your medical history and records. You may only predesignate your primary care physician if they are a family practitioner, general practitioner, board certified or board eligible internist, obstetrician-gynecologist, or pediatrician. Your personal physician may be a multispecialty medical group composed of licensed doctors or osteopathy providing medical services predominantly for non-occupational illness and injuries.

Your employer may be using a Medical Provider Network (MPN), which is a selected group of health care providers to provide treatment to

workers injured on the job. If you have predesignated a personal physician prior to your work injury, then you may receive treatment from your predesignated doctor. If you have not predesignated and your employer is using and MPN, you are free to choose an appropriate provider from the MPN list after the first medical visit directed by your employer or Keenan & Associates. If you are treating with a non-MPN doctor for an existing injury, you may be required to change to a doctor within the MPN. For more information, see the MPN contact information on reverse side.

If your employer **does not** participate in a Medical Provider Network (MPN) you may be able to change your treating physician to your personal chiropractor or acupuncturist. Generally your employer, or Keenan, has the right to select your treating physician within the first 30 days after your employer knows of your injury or illness. After your employer, or Keenan, initiates treatment you may, upon request, have your treatment transferred to your personal chiropractor or acupuncturist. To be eligible you must notify your employer **in writing prior to being injured**. However, a chiropractor cannot be your treating physician after receiving 24 chiropractic office visit.

Your employer will provide you with a form to use an optional method to predesignate your personal physician.

Contact Keenan & Associates if you plan to change physicians at any time.

Payment for Lost Wages - If you're temporarily disabled by a job injury or illness, you'll receive tax-free income until your doctor says you are able to return to work. Payments are two-thirds of your average weekly pay, up to

a maximum set by state law. Payments aren't made for the first three days unless you are hospitalized in an inpatient basis or unable to work more than 14 days.

If the injury or illness results in permanent disability, additional payments will be made after recovery. If the injury results in death, benefits will be paid to surviving, eligible dependents.

Rehabilitation – For dates of injury on or after 1/1/04 - you may be entitled to a **Supplemental Job Displacement Voucher**, which entitles you to a voucher for educational training.

MPN Information

Harbor Health Systems MPN Contact
(888) 626-1737
MPNcontact@harborsys.com

How to obtain additional information

Contact your employer representative or Keenan & Associates if you have questions about workers' compensation benefits. You may also contact an Information and Assistance Officer at the State Division of Workers' Compensation. You can consult an attorney. Most attorneys offer one free consultation. If you decide to hire an attorney, his or her fee will be taken out of some of your benefits. For names of workers' compensation attorneys, call the State Bar of California at 415-538-2120.

Department of Workers' Compensation Information and Assistance Offices

You can get free information from a state Division of Workers' Compensation Information & Assistance Officer. The phone numbers are listed below. Hear recorded information by calling toll-free 800-736-7401 or visit www.dwc.ca.gov.

Anaheim	714-414-1804
Bakersfield	661-395-2514
Eureka	707-441-5723
Fresno	559-445-5355
Goleta	805-968-4158
Long Beach	562-590-5001
Los Angeles	213-576-7389
Marina Del Rey	310-482-3858
Oakland	510-622-2861
Oxnard	805-485-3528
Pomona	909-623-8568
Redding	530-225-2047
Riverside	951-782-4347
Sacramento	916-928-3158
Salinas	831-443-3058
San Bernardino	909-383-4522
San Diego	619-767-2082
San Francisco	415-703-5020
San Jose	408-277-1292
San Luis Obispo	805-596-4159
Santa Ana	714-558-4597
Santa Rosa	707-576-2452
Stockton	209-948-7980
Van Nuys	818-901-5367

Keenan & Associates adjusting locations

**Keenan & Associates
Claims Processing Unit
PO Box 2707
Torrance, CA 90509**

Torrance
800-654-8102

Pleasanton
925-225-0611

Rancho Cordova
800-343-0694

Riverside
800-654-8347

San Jose
800-334-6554

Anyone who knowingly files or assists in the filing of a false workers' compensation claim may be fined up to \$150,000 and sent to prison for up to five years.
[Insurance Code Section 1871.4]

Folleto de información para los nuevos empleados

Si sufre una lesión de trabajo

Las leyes de California garantizan ciertos beneficios a los empleados que resultan lesionados o se enferman a causa de su trabajo.

Cualquier lesión o enfermedad relacionada con el trabajo está cubierta. Entre los tipos de lesiones se incluyen, sin limitarse, torceduras, esguinces, cortaduras, traumas cumulativos o repetitivos, fracturas, enfermedades y agravamientos. Algunas lesiones de actividades voluntarias, fuera de turno, recreativas, sociales o atléticas puede que no estén cubiertas. Si tiene alguna pregunta consulte con su supervisor o con Keenan & Associates.

Todas las lesiones relacionadas con el trabajo deben ser reportadas a su supervisor inmediatamente. No espere, hay un límite de tiempo para reportarlas. Si espera demasiado, puede perder su derecho a recibir beneficios. Su empleador tiene la obligación de darle un formulario de reclamos dentro de un día laboral desde que se enteró de su lesión.

Es un delito menor que un empleador discrimine a trabajadores que se lesionaron en el trabajo o que testifiquen en el caso de otro empleado. Cualquier empleado en esas circunstancias puede tener derecho a una indemnización, restitución y reembolso por la pérdida de ingresos y beneficios.

Los beneficios de compensación a los trabajadores incluyen

Atención médica – Todo tratamiento médico sin deducible ni cantidad límite. Para lesiones sufridas con fechas de o posteriores al 01/01/04 hay un límite de 24 visitas quiroprácticas, 24 visitas de terapia física y 24 visitas de terapia ocupacional.

Sin embargo, este límite no se aplica a los tratamientos post quirúrgicos. El costo es pagado directamente por Keenan & Associates, a través del programa de compensación de su empleador, de modo que usted nunca tendrá que ver una factura.

Si necesita tratamiento de emergencia vaya a la sala de emergencias más cercana, o llame al 911.

Keenan & Associates hará arreglos para el tratamiento médico con un especialista para la lesión correspondiente. Redes de proveedores preferenciales pueden ser utilizados por médicos como también centros de tratamiento médico.

Si usted tiene cobertura de seguro de salud, es elegible para recibir tratamiento con su médico personal o grupo médico si se lesiona en el trabajo. Si es elegible, deberá notificar a su empleador **por escrito antes de que cualquier lesión ocurra**, y deberá proporcionar a su empleador evidencia **por escrito** de su médico personal o grupo médico que indique que acepta esta designación anticipada. Su médico personal debe ser su médico de atención primaria regular que haya estado a cargo anteriormente de su tratamiento médico, y mantiene su historial y expedientes médicos. Solo puede predesignar a su médico de tratamiento primario si es un médico familiar, médico general, certificado o internista titulado, obstetra-ginecólogo o pediatra. Su médico personal puede ser un grupo médico multi-especial compuesto de médicos licenciados u osteópatas cuya práctica es predominantemente para lesiones y enfermedades no ocupacionales.

Es posible que su empleador use una Red de Proveedores Médicos (por sus siglas en inglés MPN), que es un grupo selecto de proveedores de asistencia médica seleccionados para dar tratamiento a los trabajadores lesionados en el

trabajo. Si usted ha hecho una designación previa de un médico personal antes de lesionarse en el trabajo, entonces puede recibir tratamiento de su médico previamente designado. Si no ha hecho una designación previa y su empleador está usando una MPN, usted puede escoger un proveedor apropiado de la lista de la MPN después de la primera visita médica dirigida por su empleador o por Keenan & Associates. Si está recibiendo tratamiento de parte de un médico que no pertenece a la MPN para una lesión existente, es posible que tenga que cambiar a un médico dentro de la MPN. Para más información, consulte la información de la Red de Proveedores Médicos en el reverso.

Si su empleador **no** participa en una Red de Proveedores Médicos, es posible que pueda cambiar su médico a su quiropráctico o acupunturista personal. Generalmente, su empleador o Keenan tienen el derecho a elegir al médico para su tratamiento durante los 30 días posteriores a la fecha en que su empleador supo de la lesión o enfermedad. Después de que su empleador o Keenan inicie su tratamiento, usted puede solicitar que dicho tratamiento sea transferido a su quiropráctico o acupunturista personal. Para que esto sea posible usted deberá notificar a su empleador, **por escrito, antes de la ocurrencia de cualquier lesión**. Sin embargo, un quiropráctico no puede ser su médico personal después de recibir 24 visitas quiroprácticas.

Su empleador le dará un formulario para que usted use como método optativo para predesignar a su médico personal.

Comuníquese con Keenan & Associates si piensa cambiar de médico en cualquier momento.

Pago de ingresos perdidos – Si usted resulta temporalmente incapacitado debido a una lesión o enfermedad relacionada con el trabajo, recibirá ingresos libres de impuestos hasta que su médico indique que puede volver a trabajar. Los pagos serán dos terceras de su pago semanal normal, hasta un máximo establecido por la ley estatal. No se paga por los primeros tres días a no ser que usted sea internado en el hospital o no pueda trabajar por más de 14 días.

Si la lesión o enfermedad resulta en una incapacidad permanente, se le harán pagos adicionales después de recuperarse. Si la lesión resulta en su fallecimiento, se le pagarán los beneficios a sus dependientes sobrevivientes elegibles.

Rehabilitación – Para fechas de lesión del 01/01/04 y posteriores – Podría tener derecho a un *Vale de desplazamiento de trabajo*, el cual le da derecho a un vale para recibir entrenamiento educativo.

Información de MPN

Harbor Health Systems MPN Contact
(888) 626-1737
MPNcontact@harborsys.com

Cómo obtener información adicional

Comuníquese con el representante de su empleador, o en caso de tener alguna pregunta acerca de sus beneficios de compensación a los trabajadores con Keenan & Associates. También puede comunicarse con un Funcionario de Información y Asistencia de la División Estatal de Compensación a los Trabajadores. Puede consultar con un abogado. La mayoría de los abogados ofrecen una primera consulta gratuita.

Si desea contratar a un abogado, los honorarios serán deducidos de algunos de los beneficios que le correspondan. Para obtener los nombres de abogados de compensación a los trabajadores, llame al State Bar of California al teléfono 415-538-2120.

Oficinas de Información y Asistencia del Departamento de Compensación a los Trabajadores

Puede recibir información gratuita de un Funcionario de Información y Asistencia de la División de Compensación a los Trabajadores del estado. A continuación incluimos los números de teléfono. También puede escuchar información grabada llamando gratis al 800-736-7401 o visitando www.dwc.ca.gov.

Anaheim	714-414-1801
Bakersfield	661-395-2514
Eureka	707-441-5723
Fresno	559-445-5355
Goleta	805-968-4158
Long Beach	562-590-5001
Los Angeles	213-576-7389
Marina Del Rey	310-482-3858
Oakland	510-622-2861
Oxnard	805-485-3528
Pomona	909-623-8568
Redding	530-225-2047
Riverside	951-782-4347
Sacramento	916-928-3158
Salinas	831-443-3058
San Bernardino	909-383-4522
San Diego	619-767-2082
San Francisco	415-703-5020
San Jose	408-277-1292
San Luis Obispo	805-596-4159
Santa Ana	714-558-4597
Santa Rosa	707-576-2452

Stockton	209-948-7980
Van Nuys	818-901-5367

Oficinas de los ajustadores de Keenan & Associates

Keenan & Associates
Claims Processing Unit
PO Box 2707
Torrance, CA 90509

Torrance
800-654-8102

Pleasanton
925-225-0611

Rancho Cordova
800-343-0694

Riverside
800-654-8347

San Jose
800-334-6554

Cualquier persona que con conocimiento, presenta o ayuda en la presentación de una demanda falsa de compensación laboral puede ser multada con una suma de hasta \$150,000 y hasta 5 años en prisión.
[Código de seguros sección 1871.4]