



Employee Injury Action Checklist

1) Before an Incident/Injury Occurs:

- Post the enclosed document entitled "If A Work Injury Occurs" in a conspicuous place within the establishment for employees to reference (English & Spanish).

2) Immediately Upon an Incident/Injury Occurring:

- Give employee a copy of the Medical Provider Network (MPN) Guide (*blue paper*).
- Complete the Medical Authorization Form and send it with the injured employee to the treating medical facility (*orange paper*).

3) After Sending Employee to Medical Facility:

- Keep in touch with the injured employee in order to obtain wellness status.
- Claim Submission (**including** first aid claims):
 - Contact the treating medical facility to inquire if the incident can be treated as first aid; provide billing information if necessary.
 - Complete Form 5020 (*yellow paper*) online at www.crmhc.com (this form may also be requested directly from ACM). Claims can be submitted via phone, fax, email, or the member portal. See enclosed document entitled "How to Submit a Claim Online" for ACM contact information and instructions on how to submit a claim online.
 - Supply employee with the DWC-1 Form (*green paper*). California law requires that the DWC-1 Form be given to the employee within 24 hours of the injury being reported to the employer. The injured employee needs to complete the Employee section, and an authorized person needs to complete the Employer section of the form. This form must be completed and submitted to ACM for all claims other than first aid.
- If applicable, return employee to work performing current job functions or provide modified work duty for employee based on medical provider restrictions. Contact Bob Gardner from Loss Prevention Specialists at 1-800-592-0047 or at bob@lps-safety.com for more information.
- If fraud is suspected, anonymously call the Fraud Hotline (details located on fraud poster).

4) 24 Hours After Incident/Injury Occurs:

- Contact medical provider regarding work status of employee. Offer employee modified positions that follow all work restrictions. Return employee to full duty as soon as possible.
- If you are not contacted by an adjuster within 48 hours please notify ACM (see enclosed document for ACM contact information).
- Request that the injured employee physically submit work status reports to a supervisor after **each** doctor's visit.

***Note:** Remember to keep open communication with the employee throughout the **entire** claims process regarding their wellness and any change in wellness status. Report all updates to the claims adjuster immediately.