

BEST PRACTICES CHECKLIST **for Controlling Workers' Compensation Costs**

The following best practices can help control the overall costs of workers' compensation claims.

Pre-Placement Physicals

- ADA approved job descriptions are on file at the District.
- Medical clinics have copies of the District's ADA approved job descriptions.

Training

- Supervisors train new employees in proper procedures, equipment usage, reporting "near-misses."
- Supervisors receive training how to conduct safety meetings.
- Supervisors learn how to conduct accident investigations to evaluate "near-misses" and change procedures, processes or equipment.
- Supervisors learn the importance of offering claim forms in a timely manner.
- New employees receive training when hired.
- Employees receive training when equipment, procedures or work assignments change.

Investigation:

- Supervisors offer a claim form immediately upon notice of an injury.
- Supervisors identify the cause of the injury and write the report.
- District reports the claim immediately to the claims administrator.
- The claims administrator conducts an investigation to evaluate any subrogation.
- The claims administrator may delay claims when there is reasonable suspicion that the injury did not arise out of employment.
- The claims administrator keeps track of yearly subrogation recoveries.

Medical Control – select a clinic that:

- Treats your injured workers promptly and respectfully.
- Is mindful of your return to work program.
- Always addresses work restrictions.
- Reports timely to the administrator.
- Holds annual reviews with the claims administrator to ensure compliance.

Return to Work:

- Establish a return to work policy that is accepted by the bargaining units.
- Establish a published version of modified positions.
- Consider a time limit for modified duty.

Litigation Avoidance:

- Explain the workers' compensation claims process to the injured worker upon the initial reporting.
- Be responsive to the injured worker's needs.
- Start injured workers on the correct path by referring to a quality occupational medicine practitioner.
- Refer the file timely to the administrator so that an early rapport can be established.
- Keep the lines of communication open.**

Annually review:

- Medical treatment with the clinic.
- Claims with the claims administrator.
- The number of claims that were subrogated.
- The number of claims that could have been handled as first aid only.