

Incident / First Aid Reporting Questions and Answers

June 29, 2005

Update: March 30, 2023

1. If the employee reports an incident and indicates they are losing time but does not seek medical treatment, are we required to provide a DWC-1?

Answer: Yes. LC 5400 states that a claim form must be provided within one working day of notice or knowledge that an injury has resulted in lost time beyond the work shift or that medical treatment is rendered beyond first aid.

2. If the employee reports an incident and indicates they are losing time, but we have not received any medical information or the medical information we received indicates the physician has not given TTD are we required to send a DWC-1?

Answer: Yes. Same as question #1 above. This does not mean that lost time is compensable, but the claim will be investigated by Sedgwick. The fact that the claimant has alleged lost time as a result of the injury obligates us as the employer to provide a DWC-1.

3. When medical treatment beyond first aid is provided and a claim form is provided but not completed, please confirm that we do not set up a claim.

Answer: Case law and regulations are conflicting in this area. The fact that a claim form is not returned, does not abrogate our obligation to provide benefits on compensable claims. Therefore, an incident should be set up in VOS as a pending claim for Octagon to investigate and determine claim type and compensability.

4. When we receive an incident report, do we set up in iVOS as First Aid Unpaid only?

Answer: The incident should be set up as pending unless it is already known that first aid treatment has been rendered. Sedgwick will investigate the incident and determine claim type and compensability.

5. If an employee is given work restrictions, which constitutes the potential to lose time from work, are they still considered First Aid?

Answer: These will be determined on a case-by-case basis. Restrictions may be imposed for first aid claims (e.g., "keep finger dry"). If in doubt, set up the claim as a first aid. Again, Sedgwick will investigate the incident and determine claim type and compensability.

6. What about billing issues? UCLAMC Emergency Medicine Center treats WC incidents and bills Sedgwick for treatment provided which is then paid through bill review. If there is 'no claim' and information is not sent to Sedgwick, will EMC bills be paid?

Answer: Yes, as long as a first aid or pending claim has been set up in iVOS.

7. If we have knowledge of an injury, e.g., witnessed, and severe, and have given a claim form, then we are likely liable to provide benefits to the employee, even if the employee has not completed the claim form. Do we have no liability to pay any bills/benefits?

Answer: This is similar to the above questions. The fact that a claim form is not returned, does not abrogate our obligation to provide benefits on compensable claims.

8. Claimant is hurt tomorrow, medical treatment beyond first aid is provided, employee is given disability, treatment is ongoing, but we don't get the claim form back until 7/22/05 (claim is accepted) what benefits will be paid? Retro back to date of injury or as of 7/22/05 forward?

Answer: Similar to above, if the claim is determined by Sedgwick to be compensable, benefits will be provided as of the appropriate date, based on medical authorization.

9. I understand the main criteria for determining whether an incident is first aid, or a claim is the Treatment Not the Diagnosis BUT what effect do tests have in determining whether an incident is a first aid or a claim? Example: X-rays, CT scans, etc., that turn out to be Negative. (I figure if the tests show a problem, then those results will bump the incident to a claim but I'm curious about negative results.) I am wondering about this in order to be sure our doctors are aware of our standards, especially our ER doctors.

Answer: Any number of scenarios may exist, and the determinations will vary for each. The determination as to whether treatment rendered is first aid or medical will be determined by the medical provider. If questionable, Sedgwick may seek clarification from the medical provider.