

MPS Work-Related Injury /Illness Program

*****REPORT ALL WORK RELATED INJURIES WITHIN 24 HOURS OF INCIDENT*****

Millard Public Schools strives to ensure a safe working environment for all employees. However, occasionally job injuries do occur. If you are injured while at work please follow the directions in this packet. The work injury packet provides steps, requirements, and procedures that you will need to follow throughout the recovery process. A quick flow of the process and your responsibilities is listed here.

- Know and follow safety policies and procedures
- Report any injury immediately to your supervisor so they can start the process within 24 hours of the injury
- Complete and sign the Doctor Choice Form **Part A and Part B** (even if you don't seek medical attention)
- If medical attention is necessary, give your treating doctor the Work Injury Treatment Authorization Form
- If you leave work for the day, you MUST meet with supervisor/safety or HR BEFORE returning to work
- If you are treated by a doctor (initial visit AND follow-up visits) you MUST complete the Employee Follow-Up Report for each visit and return it to supervisor/safety or HR. *This form requires documentation from the doctor.*
- Notify your supervisor/safety AND HR if physical condition, restrictions or status changes for any reason
- Follow the doctor's orders and restrictions at home and at work
- Employees: keep this form for future reference

If you are injured at work and need medical attention please visit one the following:

<p>Your Doctor NE law states "you may choose a doctor who has previously treated you or an immediate family member. The doctor you chose must have records to show that past treatment was provided"</p>	<p>Concentra Medical Center <i>Occupational Medicine Clinic</i> 9602 M St Omaha, NE 68127 402-331-8555 Hours: 8am-5pm M-F</p>	<p>CompChoice Inc <i>Occupational Medicine Clinic</i> 8630 F St Omaha, NE 68127 402-898-5600 Hours: 8am-5pm M-F</p>	<p>Nebraska Methodist Hospital <i>Occupational Medicine Clinic</i> 8303 Dodge St Omaha, NE 68114 402-354-4000 24 hours 7 days a week</p>
<p>Nebraska Orthopaedic Hospital 2808 S 143rd Plz Omaha, NE 68144 402-609-1600 Hours: Clinic 8am-5pm ER: 24 hours</p>	<p>Urgent Care of Omaha Maple 2921 S 168th St (off Center) Omaha, NE 68130 402-334-2300 Hours: 8am-9pm M-F 8am-8pm Sat; 10am-8pm Sun</p>	<p>Physicians Urgent Care Millard 5908 S 142nd Street Omaha, NE 68137 402-354-1925 Hours: Appts 8am-5pm Urgent: 6pm-10pm M-F 12pm-6pm Sat/Sun</p>	<p>Alegent Creighton Clinic Urgent Care (CHI) <i>*Please call Aetna for in-network information 1-888-751-4027</i> 8248 South 96th Street, Suite 100, La Vista, NE 68128 Phone: (402) 717-9580 Specialties: Urgent Care Center Hours: 8 a.m. – 8 p.m. Mon-Sun</p>

Be sure to let the clinic or hospital know you have a work related injury and it should NOT be billed to your personal health insurance. Do not provide any personal health insurance information to the clinic or hospital.

Let the clinic or hospital know that we have a return to work program and that almost any restriction can be accommodated within the doctor's instructions. We will strive to ensure that you can work within the limitations.

Please give the **MPS Work Injury Treatment Authorization Letter and Sentry's Treatment Authorization Form** to the clinic or hospital staff, collect paperwork and discharge instructions upon release and send to fmla-wc@mpsomaha.org or fax 402-715-1097.

Nebraska law states that compensation benefits begin on the eighth calendar day of disability due to the injury. An employee must use sick or vacation pay for lost time until the eighth calendar day. For more information, please see *Rights & Obligations under the Nebraska Worker's Compensation Law* document on the MPS website.

**If 5 or more days of work are missed or surgery is scheduled, employees must request and complete the required FMLA paperwork from Human Resources at fmla-wc@mpsomaha.org



Human Resources
Don Stroh Administration Center
5606 S. 147 Street, Omaha, NE 68137

Phone 402-715-8200
FAX 402-715-1097
email: fmla-wc@mpsomaha.org

MPS/Sentry Work Injury Treatment Authorization Form

(Date of Report)

To Doctor _____

INSERT NAME

SUBJECT: MPS Employee work related injury medical treatment. Our employee has claimed an on-the-job injury or work-related illness and selected you as the Health Care Provider. Please note that he or she is an employee of the Millard Public Schools and all paperwork and processing should be handled accordingly. The district's Work Comp Provider is Sentry Insurance.

Our Employee _____

claims an

NAME OF INJURED

injury while in our employment on _____

(Date of Injury)

Please provide medical attention and report condition to Sentry Insurance at once. If the injury is not the result of employment, this authorization shall apply only as a request for an examination and report at the expense of Sentry Claims Service.

NOTICE TO DOCTOR

ATTACH THIS AUTHORIZATION
TO YOUR FIRST REPORT AND
FORWARD OR FAX PROMPTLY TO

SENTRY CLAIMS SERVICE

PO BOX 8032
STEVENS POINT, WISCONSIN 54481
FAX # 800-999-4642

EMPLOYER CONTACT INFORMATION

MILLARD PUBLIC SCHOOLS, WORKER'S COMPENSATION
Don Stroh Administration Center Att. Human Resources
5606 S. 147th Street
Omaha, NE 68137

All claim information should be given to the employee to carry to back to the employer. Please fax a Return to Work Form within 24 hours of the appointment to 402-715-1097 or email to fmla-wc@mpsomaha.org

Please make a copy of this form and provide to the injured employee.

Millard is able to provide a wide variety of light duty or sedentary work for employees who are unable to return to their regular duties. This light duty will be in accordance with your written recommendations and can be as light as answering telephones. In view of this policy, we would appreciate your response as to what light duty this employee can perform. We make every effort to accommodate ALL employee work restrictions. If you feel the employee cannot perform any type of work, please send us a prognosis of when return to work may be possible in either a limited or full capacity.