

GUIDE TO REPORTING WORKERS' COMPENSATION CLAIMS

Report Worker's Compensation Claims by:

Fax: 704-752-4854

E-mail: claims@firstbenefits.org (copies available on our website, firstbenefits.org) Phone: 800-360-7867

- Promptly reporting the claim provides the opportunity to quickly initiate an investigation.
- Early intervention utilizing a Designated Medical Provider and timely claims-filing results in a less costly resolution for all concerned.

Claims Reporting Instructions by Fax or E-mail

- First Benefits Insurance encourages the employer to report any injury within 24 hours
- As an employer, the law requires that you report an employee injury within five days of notification; failure to do so could result in a fine.
- Proper reporting will expedite payment. Use Claim Form 19, Employer's Report of Injury to Employee.

Claims Reporting Instructions by Phone

- When reporting by phone, review the enclosed Claim Form 19 and gather the facts, including the employee's name, social security number, and a description of the accident. Don't worry if you do not have the answer to each and every question on the form.
- You will be greeted on the telephone by a Claims Reporting Representative, who will complete the report of injury form by asking key questions.
- The questions on Claim Form 19 are grouped into <u>six sections</u>: Employer information; Employee information, time and place of injury, cause of injury, nature of injury and fatal cases.

When an employee is injured, secure medical treatment first

- Arrange transportation to your Designated Medical Provider or in an emergency, dial 911
- After appropriate medical treatment has been secured, file Claim Form 19
- Work-related injury/illness not requiring emergency services (i.e. back pain, sprained ankle, etc.) give Claim Form 18 to the employee to complete and submit directly to the NCIC and file Form 19 to First Benefits Insurance
- The employer should file a Form 19 even if the employee prefers not to see a physician
- Provide the employee with a copy of the Form 18 (copy in this file)

Employers Please Note: The filing of Form 19 is not an admission of employer liability, report objective information as it was reported to you, subjective opinions can be reported in a separate coversheet. Whether a Form 19 is sent by the employer (by e-mail or fax), or is communicated by phone to an FBIM Claims Representative, please note that the employee will receive a copy of the form as required by law.