

## Guidance for Work-Related Injury or Illnesses on or after July 1, 2020

If you have suffered a work-related injury/illness, please follow the guidelines provided below. Our goal is to care of your work-related injury/illness and to expedite your recovery to return you back to work as soon as possible. Your work-related injury/illness is considered confidential. Only those on the "need to know" will have access to information related to your work-related injury/illness.

### Applicable RCUH Policies:

1. [RCUH Policy 3.580 RCUH Workers' Compensation Policy](#)
2. [RCUH Policy 3.930 RCUH Safety & Accident Prevention Policy](#)

### **I. Report Any Work-Related Injury/Illness to Your Principal Investigator/Designee:**

Any work-related injury/illness must be reported to your Principal Investigator/Designee immediately after its occurrence. The RCUH [Supervisor's Report of Industrial Injury Form](#) must be completed by your Principal Investigator/Designee, reviewed/signed by you (injured employee), and submitted to RCUH Human Resources (HR).

You should seek immediate medical attention depending on the seriousness of your injury/illness. You must obtain a physician's note for any lost time from work or if your injury/illness affects your ability to return to work, and/or your ability to perform your essential job duties. You must submit your physician's note to your Principal Investigator/Designee, who will forward the note to the RCUH HR Employee Benefits Section.

1. **Information you need to provide to your treating physician:** Inform the physician you are an employee of the RESEARCH CORPORATION OF THE UNIVERSITY OF HAWAII (RCUH) seeking medical care for a work-related injury/illness (i.e., industrial accident). If you have any questions, have the doctor's office contact the RCUH HR Employee Benefits Section at (808) 956-2326 or (808) 956-6979. Please make sure you identify RCUH as your employer to avoid bills or reports from being sent to you or the wrong office, which may cause delays.
2. **Where does the doctor's office send the bills and reports?** The physician should call HEMIC directly if they have any questions relating to their claims processing. All billings and medical reports relating to your work injury should be sent to:

**HEMIC**  
**P.O. Box 3376**  
**Honolulu, HI 96801**  
**Phone: (808) 524-3642 (HEMIC Main Line)**  
**Fax: (808) 522-5855**

3. **Lost Time from Work:** All "lost time" from work due to your work-related injury/illness must be certified by a treating physician from the date of disability.
4. **Scheduling Doctor appointments or other treatment appointments:** You and your doctor should try to schedule all appointments (including therapy) during your "off hours." Contact your Claims Adjuster if you and/or your physician cannot schedule the appointments, treatment, or therapy outside of your work schedule.
5. **Light or Modified Duty or Work Schedule:** Your Principal Investigator will determine and inform RCUH HR if they can accommodate any modified work duties, work schedule, or provide other accommodations (based on your job's essential job functions). These

accommodations are generally considered temporary and subject to operations considerations and other factors.

6. **Report any Changes in Your Condition:** Communication is key! You must inform your Principal Investigator/Designee and your Claims Adjuster if your Physician requires you to modify your job duties, work schedule, etc. Any changes in your work schedule due to disabilities, treatments, etc. must be coordinated with your Principal Investigator/Designee and your Claims Adjuster.
7. **Return to Work (With or Without Restrictions):** You must submit a written clearance to return to work from your treating physician to your Principal Investigator/Designee. A return to work "without restrictions" means you are able to perform your usual and customary job duties. A return to work "with restrictions" means you are able to return to work, but require a job accommodation to perform your job's essential job functions. As needed, the RCUH HR may require you to complete our Job/Physical Analysis (JPA) process to determine your job accommodation needs. If a JPA is needed, you will be contacted by the RCUH HR Employee Benefits Section.

## II. **Workers' Compensation Benefits:**

If your Workers' Compensation claim is accepted, you will be entitled to no-cost medical coverage of all accident-related medical expenses and a partial wage replacement for lost work time due to disability from your work-related injury/illness.

1. **Medical Benefits:** These medical benefits include treatments for your injury, hospital charges, prescription medication, x-rays, physical therapy, and reasonable transportation expense incidental to your treatment (keep track of your expenses and mileage).
2. **Temporary Total Disability (TTD) Benefit:** The [Hawai'i Workers' Compensation Law](#) provides an injured worker a partial wage replacement for loss work time due to injury/illness. This partial wage replacement benefit is known as Temporary Total Disability (TTD). Based on your eligibility, TTD begins after the 3-calendar day waiting period. During the 3-calendar day waiting period, you are allowed to use available sick leave (or vacation leave if you do not have sick leave). If you do not have or are not eligible for sick or vacation leave, you will be placed on a leave without pay status. Your TTD benefit will begin on the fourth calendar day of your disability. TTD is calculated at 66 2/3% of your Average weekly Wage (AWW) up to the applicable maximum benefit rate established annually by the Department of Labor & Industrial Relations. Your TTD rate will remain the same (i.e., based on the AWW value at the date of injury) throughout the duration of the claim. HEMIC is responsible for sending your TTD checks directly to you. Your TTD payment is not a payroll check, therefore to continue your employee benefits please read Section III.

## III. **RCUH Employee Benefits & Continuation of Health Insurance Coverage:**

1. **Continuation of Certain Non-Contributory Employee Benefits:** For employees at 75%-100% FTE, your Non-Contributory employee benefits (i.e., Group Life Insurance, Group Longer Term Care Insurance, and Group Long Term Disability Insurance) continues.
2. **Temporary Suspension of Non-Contributory TIAA Group Retirement Annuity (GRA) Contributions:** Your GRA contribution (Employer Contribution) is based on your payroll earnings. The RCUH will temporarily suspend your GRA contribution until you resume working.

3. **Temporary Suspension of Sick Leave and Vacation Leave Accruals:** If you are unable to work, your sick leave and vacation leave accruals will be temporarily suspended. These accruals are based on your work hours in a pay period. During your WC leave, you are not allowed to use any vacation or sick leave hours.
4. **Temporary Suspension of payroll deduction contributions to your Flexible Spending Account (FSA) Healthcare Expense Account:** Your payroll contributions will be temporarily suspended until you resume working. You may continue to use your FSA for covered non-workers' compensation eligible medical expenses up to your predesignated maximum. Retroactive contributions will be collected when you resume working.
5. **Temporary Suspension of Contributory Employee Benefits:** Continuation of your contributory benefits may also be suspended due to your lack of payroll earnings. This includes any TIAA Supplemental Retirement Annuity (SRA), or any supplemental insurance (i.e., supplemental Long Term Care Insurance).
6. **Continuation of Health Insurance:** If you elected coverage under RCUH's medical and/or dental plans, the Employer's Portion (i.e., 60%) of the cost of your premiums will continue, provided you supply RCUH with the Employee's Portion (i.e., 40%) of the monthly medical and/or dental premium in advance of the month of coverage. You must send a check payable to the "Research Corporation of the University of Hawaii" for the applicable amount. The payment must be received (in hand, not postmarked) by the last Monday of the calendar month. Your medical and/or dental coverage will cease if we do not receive the full payment (in hand) by the last Monday of the month prior to the month of coverage. If your medical and/or dental insurance is cancelled due to non-payment, you will have an opportunity to re-enroll when you return to work within the first thirty (30) days by submitting the RCUH Group Health Enrollment Form to us. If you fail to re-enroll, you will be offered COBRA to continue your medical and/or dental coverage, but you will be responsible for 102% of the premium.

IV. **What Happens if My Claim is Denied?** A determination will be made as soon as possible. You will be notified by your Claims Adjuster if your claim has been accepted or denied. Your claim may be "denied pending investigation" while HEMIC reviews your claim. Any lost time during the denial period should be charged to your available sick leave (or vacation if no sick leave, or leave without pay if not eligible for sick or vacation). HEMIC may request to review all relevant medical information from your physician and/or send you to an independent medical review. If your claim is denied, you may file a form WC-5 (<https://labor.hawaii.gov/dcd/files/2012/11/WC-5.pdf>), which is an appeal process administered by the Hawai'i department of Labor & Industrial Relations.

If you have any questions, please contact RCUH HR Employee Benefits Section at [rcuh\\_benefits@rcuh.com](mailto:rcuh_benefits@rcuh.com) or call (808) 956-2326 or (808) 956-6979.