Workers’ Compensation

Procedures for Submitting a Claim
Introduction

Workers’ Compensation laws are enacted to protect employees against loss of earning power due to an injury sustained at the place of employment. Workers’ Compensation is insurance that provides cash benefits and/or medical care to workers who are injured or become ill as a direct result of a work related injury.

The NYC DOE Workers’ Compensation Unit serves as a liaison between the insurance carrier and the employee while providing assistance to the employer to ensure that claims are submitted expeditiously and accurately.

The New York City Law Department Workers’ Compensation Division determines the validity of claims based on the documentation submitted by the employer.
Important Facts about Workers’ Compensation

• All non-pedagogical titles are covered by WC.
  Some of the titles covered by WC are however, not limited to are: Paraprofessionals (including Subs), School Aides, Therapists, Nurses, SAPIS and Administrative titles. All pedagogical titles file for LODI and are handled by HR Connect. When in doubt, contact the WC Unit for assistance.

• All injuries/accidents must be reported to the employer and documented immediately.
  As soon as you are notified of an injury on the job you must provide the employee with forms to complete and must be returned to you immediately. By law, all work related injuries must be reported within six (6) days of the injury in order to avoid fines.

• Employer cannot approve/disapprove a WC claim.
  If the employer is of the opinion that the WC claim is fraudulent and should be controverted, it is advised that a C2 Addendum be completed along with the C2 Form and be mailed to the insurance carrier for review.
Rights & Responsibilities of the Employee

- It is important that the employees are made aware that, should they have an accident at the workplace, they are to notify their employer within 24 hours of the injury and, if necessary, seek the proper medical attention from a workers’ compensation physician.
- The C3 form is the “Employee’s Report of Injury” claim and it is their responsibility to submit and mail this form to the NY State Workers’ Compensation Board.
- The New York City Law Department is the insurance carrier for Workers’ Compensation recipients. The carrier case number will be mailed to the employee once they have reviewed the C2 form. All bills, authorizations, surgeries, therapies and prescriptions are to be mailed to the Law Dept for approval, payment and reimbursement. The employee should not be using their personal insurance. Should they incur out of pocket expenses, the receipts should be mailed to the NYC Law Department for reimbursement.
- Reimbursement of wages and sick time are to be determined by the Law Dept. based on the degree of disability and the wages of the employee. All restorations of time are processed by the DOE WC Unit. Notification of restorations are emailed to the payroll secretary/supervisor. Reimbursement of wages are mailed from the Law Dept. to the employee.
- It is now required that when an employee is absent due to workers’ compensation, all their absences must documented in SOLAS-even non chargeable absences.
Responsibility of the Employer

• Notice of Compliance
  By law, these notices (C-105 and DB-120) must be posted at the workplace where the employee can view them, preferably by the time clock, or on a bulletin board. These notices informs the employee who their insurance carrier is should they have a work related injury at the workplace.

• Claimant Information Packet
  The NY State WC Board has compiled a packet that consist of reading materials and forms that the employee is responsible for submitting to them. It is to be provided to the employee every time they have an accident on the job. This packet contains the C3 form.

• C2 form
  It is the responsibility of the employer to submit the C2 form within six (6) days from the date of injury in the Payroll portal. Failure to do so will result in fines of up to $2,500. The C2 form is different from the OORS report.

• Timekeeping
  It is extremely important that all timekeeping entries related to WC are accurate and timely as to avoid overpayments.
Documents to Print

- **Notice of Compliance**: Post in the workplace. C-105 & DB-120
- **Claimant Information Packet**: Provide to the injured employee *every time* they have an accident at the workplace.
- **Comprehensive Injury Report** for administrative employees. School based employees may provide a copy of the OORS report.
- **Employee Notice of Injury (WCD23)**
- **Election of Rate of Charge Against Annual and or Sick Leave Balance (DP2002)** Only if absences are beyond the first five days.
- **Employees FAQ’s**
Timekeeping

• **Date of the accident**
  In the event that the employee has to leave work to seek medical attention, the date of the accident is a paid day.

• **Non Chargeable Days**
  The employee may apply for up to the next five (5) consecutive working days as non chargeable days pending supervisory approval of the OP198 / PD19 form. A doctor’s note is required and must indicate the date of injury and that the absences are due to an injury on the job. Absences beyond the first five work days should not be coded as non chargeable. The employee has an option on how the remainder of the days are to be coded. These absences must be recorded in SOLAS. **Code 56/66B00**

**Option 1**
The employee notifies payroll secretary that they are opting to use their accruals for the duration of their absences related to WC. The employee has to contact their examiner at the NYC Law Department to initiate the process of restoring their time. An employee can also utilize Option 2 when they have exhausted their accruals. *It is not permissible for employees to borrow time for workers’ compensation absences.* These absences must be recorded in SOLAS. **Code 51/61BWC**

**Option 2**
The employee notifies the payroll secretary that they do not want to use their accruals or may not have any and as a consequence will have to apply for a Leave Of Absence Without Pay For Workers’ Compensation. The employee must submit the leave application through SOLAS. The maximum time allowed to be absent due to workers compensation is one year. If the employee chooses Option 2, enrollment in direct deposit must be cancelled. For that reason, be cautious of those employees that are on “positive pay”. The employee will receive a reimbursement of lost wages, at a weekly rate determined by the Law Dept.
Example of timekeeping for a Paraprofessional (in EIS) due to Workers’ Compensation:

**Date of accident:** June 17, 2019

*First five days:* June 18-24, 2019

**Option #1:** June 25-26, 2019

*Subject to approval*

<table>
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<th>EFFECT DATE</th>
<th>END DATE</th>
<th>TITLE</th>
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<th>POS ID</th>
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<td>2WC</td>
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</table>
Submitting the C2 form

- Proceed to the Payroll Portal
- Enter your Outlook/Network ID, password and Log On
Submitting the C2 form

- Network/Employee ID
- Password
- EMP/EIS ID number
Submitting the C2 form

- DOE Applications
- C2 Form
Creating C2 Form

- **Create Form**: Once you have logged in, the system will prompt you to start creating a C2 form. You may create a new C2 form by entering the Employee’s ID, EIS or SSN. The system will retrieve the employee’s personal information and self populate certain fields on the form.

Continue to proceed to next page.
Retrieving Employee’s Data

Make sure the employee’s name is correct then click on “Details”. An employee may have multiple lines if they worked in different FMC’s, locations or were part of different payroll banks. Make certain that the correct record is selected.

**Employee Details**: The system will display the employee’s personal information. Verify accuracy then click “Next” at the bottom of the screen.
Entering Data

- **Date of accident**: Use the pop-up calendar or enter the date manually.
- **Employer**: Enter the name of the school/site/office, not “Dept of Ed”.
- **Nature of Business**: Enter “Education”.
- **Sections B & C**: Fields are already populated with requested information. Once completed, click “Save & Continue”.
Asterisks: Mandatory fields are marked with an asterisk (*) and must be completed.

Missing Data: If data is missing the incomplete C2 form will be stored in the “Draft List” until it is completed in its entirety.
Section 2

- **Field D**: Enter description
- **Back**: The option to return to previous
Entering Data (cont’d)

Time Field

The drop down menu must be used to select the desired time. The time is provided in increments of five (5) minutes. Therefore, if the specific time is not displayed, round off the time to the nearest one provided.
Claimant Information Packet

- This packet can be found on the DOE WC website and is to be provided to the employee every time they have an accident on the job. This is the date (must be entered) when the Claimant Information Packet was given to the employee.
• List only the body parts that were injured. For example, when a limb has been injured, indicate whether it is the “left” or “right”.
Entering Data (cont’d)

- **Field H**: Indicate if the employee is a full time employee.
- **Additional Information**: Include any other information that is relevant to the claim.
- **Signature**: The employee cannot submit *and* sign their own C2 form. It must be submitted by the employer.
Entering Data (cont’d)

Once the completed C2 form is ready for submission to the DOE WC Unit, click “Continue”. If there are any required fields that are incomplete, a message will be displayed and the fields in question will be indicated. If the fields are not completed, the form will be stored in the “Draft List”.

![Image of C2 form interface](image_url)
Draft List

If there are required fields missing data, the C2 form will be placed on the “Draft List” until the data is complete. A message will be displayed stating as such.

To complete a form that has been placed in the Draft List you first must enter the employee’s SS, EIS/Emplid. Once the C2 appears, click on “Edit Form”. There’s also an option to delete the C2 form.
Completing and Printing the C2 Form

Once the C2 form has been submitted, an electronic copy will be sent to the DOE WC Unit and the Law Dept. for review.

If the DOE WC Unit determines that there is missing information, an email will be sent advising that the form has been placed in the “Awaiting Correction List”. The user has the ability to “View Comment” to see why the form was returned, along with “edit” and/or “delete” the form.
Once completed you will get a message that reads, “Form is completed”. Please click to continue and to save changes made in the form and finalize.
C2 Form has been successfully submitted
Print C2 Form
“Awaiting Correction List” can be found under “C2 Form List”. If there is data missing or incorrect on the C2 form, the DOE WC unit will return the C2 form for your appropriate action.

- **SSN**: May search by employee’s social security number.
- **Email Address**: The person who submitted C2 form.
- **Report Date**: Date C2 form was first created.
- **Status Date**: Reflects date action was taken.
- **Date of Accident**: Date of injury.
- **Employee’s SS#**
- **Employee’s Name**
Awaiting Correction List (cont’d)

- **View Comment:** The reason why the C2 form was returned.
- **Edit Form:** Open C2 form to correct/add missing data.
- **Delete Form:** Delete C2 form.
Awaiting Correction List (cont’d)

An email will be sent alerting the user that a C2 Form is in the “Awaiting Correction List”. This list should be reviewed periodically in the event that additional action is required on forms previously submitted.
Confirmation

- Once the C2 form has been successfully submitted and reviewed by the DOE WC Unit, an email will be sent to the employer.
- From: Employee at the WC Unit assigned to the C2 form.
- To: Employer that submitted C2 form. The message will confirm receipt of C2 form displaying the following information:
  - Employee’s name
  - Date of Accident
  - Social Security number (last 4 digits only)

The email contains instructions regarding steps to be taken in the event that the employee returns to work, etc.

- From: C2 Form Application <payroll.noreply@schools.nyc.gov> On Behalf Of WC UNIT STAFF
Sent: DATE ACCEPTED
To: PAYROLL SECRETARY
Subject: Workers Compensation C2Form Accepted

The C2 form for DOE, JANE, (with last 4 digits of SSN (0000) ; 01/01/2000 has been reviewed and has been found acceptable, therefore, it has been sent electronically to the City of New York Law Dept. It is no longer necessary to mail the C2 form to the Law Dept. Mail a copy of the C3, WCD23 and OORS Report/Comprehensive Injury Report to the New York City Department of Education, Workers’ Compensation Unit, 65 Court Street, Room 1400, Brooklyn, NY 11201. All doctor’s notes are to be mailed to the New York City Law Department, Workers Compensation Division, 350 Jay Street, 9th floor, Brooklyn, NY 11201.

To obtain a copy of the C2 form:
- Log into the Payroll Portal
- DOE Applications
- C2 Form
- From drop menu select 'Print Form'

Please take note of Worker Compensation codes for timekeeping entries in order as follows:
- 56/66B00 Non-Chargeable codes - used only up to the first 5 days of absence immediately following the date of injury
- 51/61BWC Medically Certified Sick - If employee selects to use their accruals (CAR), after Non-Chargeable days are applied
- 2WC/2WE Leave without Pay - If employee does not have or chooses not to use their accruals

It is pertinent that you notify me when this employee has returned to work and/or absent again due to this injury. When doing so, include the employee’s name, empl id/EIS and date of injury.
You may contact me if you have any questions or concerns regarding Workers’ Compensation at 718-935-2213.
Employee notifies employer that accident occurred.

Employer gives the injured employee a “Claimant Information Packet” and other forms to complete and return immediately.

Payroll Secretary submits C2 form in the Payroll Portal then mails WCD23, Injury/OORS Report and C3 to DOE and doctor’s notes to the Law Dept.

WC Unit’s Role

A copy of the C2 form is sent electronically to the DOE WC Unit and assigned to staff based on employee’s last name. The C2 will be reviewed.

Relays injured employee’s absences (paid or unpaid) to the Law Department.

NYC Law Department’s Role

A copy of the C2 form is sent electronically to the Law Department for review.

The Law Department will mail employee their carrier case number and name of their examiner.
# Workers' Compensation Contact Information

<table>
<thead>
<tr>
<th>DOE Workers' Compensation Unit, Case Worker's Team</th>
<th>Telephone #: (718) 935-2213</th>
<th>Fax #: (718) 935-3329</th>
</tr>
</thead>
<tbody>
<tr>
<td>65 Court Street - Room 1400, Brooklyn, NY 11201</td>
<td><a href="mailto:workerscomp@schools.nyc.gov">workerscomp@schools.nyc.gov</a></td>
<td></td>
</tr>
</tbody>
</table>

If employee's last name begins with ... | Case Manager | Telephone # |
A - E          | Shameka Robinson      | (718) 935-2213 |
F - K          | Chantrea Wright       | (718) 935-2213 |
L - Q          | Gisela Galviz Millan  | (718) 935-2213 |
R - Z          | Annie Hinton          | (718) 935-2213 |

# New York City Law Department, Workers' Compensation Division

350 Jay Street, Brooklyn, NY 11201

Index Unit: Assigns a carrier case # to employees following the submission of their C2 Form

<table>
<thead>
<tr>
<th>Name</th>
<th>Telephone #</th>
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</thead>
<tbody>
<tr>
<td>Annette Santiago (Unit Supervisor)</td>
<td>(718) 724-5453</td>
</tr>
<tr>
<td>Lissette Salgado</td>
<td>(718) 724-5456</td>
</tr>
<tr>
<td>Althea Satenay (school lunch titles only)</td>
<td>(718) 724-5457</td>
</tr>
<tr>
<td>Index Unit Fax #:</td>
<td>(718) 724-5498</td>
</tr>
<tr>
<td>Examiner's Unit (Case Managers)</td>
<td>Case Manager</td>
</tr>
<tr>
<td>----------------------------------</td>
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</tr>
<tr>
<td>If employee's last name begins with ...</td>
<td>Case Manager</td>
</tr>
<tr>
<td>A - I</td>
<td>Elena Poliakov</td>
</tr>
<tr>
<td>J - P</td>
<td>Costa Fikhman</td>
</tr>
<tr>
<td>Q - Z</td>
<td>Alena Taustyka</td>
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<tr>
<th>Additional Support</th>
<th>Case Manager (school lunch titles)</th>
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<tbody>
<tr>
<td>Gennady Shilgold</td>
<td>(718) 724-5470</td>
<td></td>
</tr>
<tr>
<td>Niveene Mikhail</td>
<td>(718) 724-5422</td>
<td></td>
</tr>
<tr>
<td>Irene Dukorsky</td>
<td>(718) 724-5469</td>
<td></td>
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<tr>
<td>(718) 724-5498</td>
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<tr>
<td></td>
<td>(718) 724-5499</td>
<td></td>
</tr>
<tr>
<td>Awards Unit (Restoration of vacation/sick time)</td>
<td>Arlene Aikens</td>
<td>(718) 724-5435</td>
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<tr>
<th>Law Department Managers</th>
<th>Deputy Director</th>
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<tr>
<td>Maria Ziccardi</td>
<td>(718) 724-5416</td>
<td></td>
</tr>
<tr>
<td>Wai Wu</td>
<td>(718) 724-5412</td>
<td></td>
</tr>
</tbody>
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**New York Workers' Compensation Board**

(800) 877-1373
PLEASE NOTE

All non-pedagogical titles are covered by workers’ compensation. All injuries must be documented; regardless of the extent of the injury or whether there is any loss of time.

It is the employer’s responsibility to file a C2 form through the DOE Payroll Portal at:

Fines will be imposed by the New York State Workers’ Compensation Board if the employer fails to submit the C2 form in a timely manner. To avoid penalties, the C2 form must be submitted six (6) days from the date of injury.

To receive access to, or for assistance with submitting the C2 form, call the DOE Workers’ Compensation Unit at 718-935-2213.