

# Workers Compensation

## Claims Handbook for Your Credit Union

---

Keep this handbook with your  
"ExPRSCall" Claims Kit



CUNA Mutual Group and Liberty Mutual are proud to bring Workers Compensation coverage to you and your credit union.

We sincerely appreciate the trust you have placed in us to do what is right for your employees when they are injured.

When one of your employees suffers an injury on the job, their care is important to you. You can count on Liberty Mutual to ensure your employees have access to the care they need, while at the same time, managing the overall cost to your credit union.

This handbook provides the information you need to know to file a claim. It walks you through the claims process step-by-step and provides key points for you and your employee to keep in mind.

**This handbook provides the information you need to know when you file a claim. It walks you through the claims process step-by-step and provides key points for you and for your employee to keep in mind.**

Knowing how Liberty Mutual manages the Workers Compensation process for your injured employee helps you understand what to expect each step of the way.

Please review this handbook carefully and keep it handy so that you can locate it quickly when an employee is injured.

Thank you for your business and trust in CUNA Mutual Group and Liberty Mutual.

**How the Claims Process Works**

**One of my employees was injured on the job. What happens now?**

Liberty Mutual is committed to high-quality claims management that delivers the care your employees need while keeping your overall costs under control.

When you need to file a Workers Compensation claim, here's what you should expect from Liberty Mutual during the process.

Liberty Mutual's claims process has five steps:



Each step in the process, as well as key actions for you and your injured employee, are described in the following pages.

**Injury Occurs**

When an injury occurs, your employee's safety is your primary concern. Seek immediate treatment for emergency situations.

Keep the following key points in mind when an employee is injured on the job:

For You	For the Injured Employee
<ul style="list-style-type: none"> <li>• Review state-specific rules on selecting medical providers (see table on the following page)</li> <li>• If your state requires or allows that the employer directs care, review your worksite poster or access the Liberty Mutual Provider Referral Services (PRS) website <a href="http://www.talispoint.com/liberty/ext">www.talispoint.com/liberty/ext</a> and locate an available physician or clinic</li> <li>• If your worksite poster does not list a provider your employee wishes to use, access the PRS site to determine if this provider is available. If available, you can update and print a new worksite poster from this website by selecting "create provider listing"</li> <li>• Communicate to your employee what they need to tell their medical provider (see detail on right) to ensure the Workers Compensation claim process is as efficient as possible</li> <li>• Give your employee a copy of the Authorization for the Release of Medical Information (sample below) so they can sign and give it to their medical provider. This will streamline the flow of information between the provider and Liberty Mutual</li> </ul>	<ul style="list-style-type: none"> <li>• Ask the employee which provider they would like to use and if this provider is available based on state-specific rules</li> <li>• Alert the treating medical provider that the injury is employment-related and may result in a Workers Compensation claim</li> <li>• Employees should NOT pay out-of-pocket expenses for employment-related treatment, as this will:               <ul style="list-style-type: none"> <li>• Slow the claims payment process</li> <li>• Limit Liberty Mutual's ability to manage your credit union's overall claims costs</li> </ul> </li> <li>• Employees should NOT submit medical provider bills through their own medical insurance</li> <li>• Ensure the medical provider sends bills directly to Liberty Mutual</li> <li>• Ensure the employee gives a signed copy of the Authorization for the Release of Medical Information (sample below) to their provider</li> </ul>

Sample Medical Authorization Form:



EMPLOYEE NAME (Please Print) \_\_\_\_\_

CLAIM NUMBER \_\_\_\_\_

**AUTHORIZATION FOR THE RELEASE OF PROTECTED HEALTH INFORMATION**

**I HEREBY AUTHORIZE THE USE OR DISCLOSURE OF HEALTH INFORMATION ABOUT ME AS DESCRIBED BELOW:**

- 1) **Person(s) or group(s) of persons authorized to use or disclose the information:** Any physicians, medical practitioners, hospitals, clinics, HMO, long-term care facilities, medical or medically-related facilities, pharmacies, insurance companies, Plan Sponsor/Administrator and insurance support organizations such as the Medical Information Bureau.
- 2) **Person(s) or group(s) of persons authorized to collect or otherwise receive the information:** The particular Company in the Liberty Mutual Group to which I am submitting a claim and its authorized representatives, including organizations providing claims management services.

## STATE-SPECIFIC RULES

### State-Specific Rules for Selecting Medical Providers

State	Rule(s)
Alabama	<ul style="list-style-type: none"> <li>• Employer selects the initial treating physician. Employee may change treating physicians. Employee selects second physician from a list of four physicians selected by the employer.</li> <li>• Ala. Code. § 25-5-77(a)</li> </ul>
Alaska	<ul style="list-style-type: none"> <li>• Employee has the right to choose treating/attending physician without restriction. Employee may change treating physicians once without employer's consent.</li> <li>• AK St. § 23.30.095(a). AK Admin. Code 45.082(c)</li> </ul>
Arizona	<ul style="list-style-type: none"> <li>• Employee chooses treating physician. Employee may change physician with approval of insurer, commission, or current physician.</li> <li>• AZ St. §§ 23-908E, 23-1071B. AZ Admin Code R. 20-5-113</li> </ul>
Arkansas	<ul style="list-style-type: none"> <li>• Employer has right to select the initial treating physician associated with managed care entity. Employee has the right to petition the Workers Compensation Commission one time for a change of physician. Alternate physician must either be within the managed care entity or be the employee's regular treating physician.</li> <li>• AR Code § 11-9-508(d). AR Admin. Code. Workers Comp. Rule 33. §§ II, IV</li> </ul>
California	<ul style="list-style-type: none"> <li>• If the insurer or a self-insured employer has a contract with a health care organization (Medical Provider Network), the employer selects the health care provider, unless the employee has previously designated a regular treating physician. Employee has the right to change his physician at least once to another physician affiliated with the health care organization. CA Labor Code §§ 4600.3(a), (e).</li> <li>• If employer or employer's insurer has not established a medical provider network, employee may choose treating physician 30 days after the initial injury. CA Labor Code § 4600(c).</li> <li>• Employee may choose his regular treating physician if (1) employee has given notice to employer prior to the date of injury that he has a regular treating physician and (2) the employer provides a non-occupational group health plan. CA Labor Code § 4600(d).</li> <li>• If employee is not receiving or is not eligible to receive coverage for non-occupational injuries, employee may change physicians 90 days after first reporting injury. If employee is receiving or is eligible to receive coverage for non-occupational injuries, employee may change physicians 180 days after reporting the injury. CA Labor Code § 4600.3(c).</li> </ul>
Colorado	<ul style="list-style-type: none"> <li>• Employer/insurer has right to select initial treating physician. If physician does not provide services at the time of injury, employee may choose physician. Employee may seek permission to have his personal physician treat him.</li> <li>• Col. St. § 8-43-404(5)(a)</li> </ul>
Connecticut	<ul style="list-style-type: none"> <li>• Employer may direct medical treatment through a managed care plan but must instruct employee of his/her right to receive medical treatment outside the plan. C.G.S.A. § 31-279(c). CT ADC § 31-279-10 (required contents of medical care plan)</li> <li>• If no medical care plan, employee chooses physician from a list of physicians approved by the Workmans Compensation Commission. Both employee and employer may request, from the Workers Compensation Commission, a change in the treating physician. C.G.S.A. § 31-294d(b)</li> </ul>
DC	<ul style="list-style-type: none"> <li>• Employee has right to choose attending physician. Employee may change physicians with the authorization of the insurer. DC St. Sec. 32-1507(b)(3); 7 D.C. Admin. Code § 212.13</li> </ul>
Delaware	<ul style="list-style-type: none"> <li>• Employee has right to choose physician. 19 Del. Code § 2323. [Note: State legislature established a health care advisory panel to develop treatment guidelines for the most frequent medical conditions. Treatment within the guidelines will be presumed reasonable. 19 Del. Code §§ 2323A, C]</li> </ul>
Florida	<ul style="list-style-type: none"> <li>• Self-insured employers or insurance carriers - Employer selects initial treating physician. Employee chooses physician from the primary providers in the provider network. Employee may request to change treating physicians one time during treatment for one incident. FSA 44.134(6)(c)(10), (10)(c)</li> <li>• Non-Managed Care Arrangement - Employer provides initial medical treatment. Insurer directs/approves subsequent treatment if necessary. Employee may change physicians once during treatment. Employee must receive approval from insurance carrier (or self-insured employer) before changing physicians. FSA 440.13(a), (e), (f)</li> </ul>
Georgia	<ul style="list-style-type: none"> <li>• Employer must maintain a panel of six physicians who are accessible to employees. Panel must contain at least one orthopedic surgeon and no more than two industrial clinics. Employer selects initial treating physician from panel. Employee may accept employer's choice or choose another physician from the panel. Employee may change the selected physician to another physician on the same panel once without restriction. Self-insured employers or employer's insurers may contract with managed care organizations provide services pursuant to the managed care contract. GA Code § 34-9-201(b).</li> </ul>
Hawaii	<ul style="list-style-type: none"> <li>• Employee chooses any State-licensed physician. Employee may change physicians if employee notifies employer. HI St. Sec. 386-21(c). HI ADC § 12-15-38(a).</li> </ul>
Idaho	<ul style="list-style-type: none"> <li>• Employer chooses/provides treating physician. Employee may petition the employer for a change of physician. Then workers compensation commission resolves disputes as to change of physician. ID St. 72-432(4)(a).</li> </ul>
Illinois	<ul style="list-style-type: none"> <li>• Either (1) the employee may choose his/her own physician or (2) if agreement between employer and employees, the employee chooses a physician from a list provided by the employer. Employee may choose one alternative physician from the panel if he/she is not satisfied with first choice. 820 ILCS 305/8(a).</li> </ul>
Indiana	<ul style="list-style-type: none"> <li>• Employees and employers may enter medical provider agreements.</li> <li>• If no agreement, employer chooses the treating physician. In cases of permanent disability, employee is limited to physicians provided by the employer (if employer continues to provide medical treatment). If employee refuses treatment from employer-provided physicians, employee may be responsible for costs, unless the state determines otherwise. Employer and employee may enter into an agreement binding the parties to receive treatment from specified health care providers. IN ST. § 22-3-3-4(a), (b), (g).</li> </ul>

State	Rule(s)
Iowa	• Employer has right to choose/direct medical care. Employee must submit request to employer if employee wants to change physicians. Employer may reject request. State resolves dispute over change of physician. IA St. sec. 85.27(4).
Kansas	• Employer directs medical treatment. If initial treatment is unsatisfactory, employee may petition workers compensation director to change physicians. Employee chooses alternate physician from a list of three physicians provided by the employer. Employee may, at any time, receive medical care from a physician whom the employee selects but employer is responsible for only \$500. KS St. Sec. 44-510h.
Kentucky	• Employer has right to direct treatment through managed care organization. If managed care plan, employee may either choose a medical provider from within the plan or choose to continue receiving treatment from physician who administered initial treatment. Employee may change treating physician to another physician within the plan once without showing reasonable cause. If no MCO, employee may choose treating physician. KRS Sec. 342.020(1), (3), (4). 803 KAR 25:096 §§ 3, 4; 803 KAR 25:110 § 2, 9.
Louisiana	• Employee has free choice of initial treating physician. Employee may change physicians within the same field/specialty with the consent of the employer/insurer. Employee may change physicians to one in a different field/specialty without the consent of the employer. LSA-R.S. 23:1121(B)
Maine	• Employer has initial right to direct medical treatment. After 10 days of treatment, the employee may give employer notice of intention to receive treatment from a different provider. Employer has opportunity to object. Employee may change treating physicians once without approval of employer. 39-A M.R.S.A. Sec. 206(1).
Maryland	• Employer provides medical treatment, but no restrictions on employee's choice of physician. MD Labor & Employ. § 9-660.
Massachusetts	• If employer's insurer has entered into a preferred provider arrangement, employer may direct employee to in-network provider for first scheduled appointment, unless a necessary specialist is not in the network. After initial appointment, employee may select another treating physician, in or out of the preferred provider network. Employee may change treating physicians once. M.G.L.A. 152 § 30, pars. 1 & 5. 211 C.M.R. 51.04(3)(i). • If no preferred provider arrangement, except for employee's first scheduled visit, employee has complete freedom to select a treating physician. Employee may change physicians once. M.G.L.A. 152 § 30, par. 1.
Michigan	• Employer/insurer chooses the initial treating physician. Ten days after medical treatment began, employee may notify employer of his intent to receive treatment from a different medical provider of employee's choice. Employer has opportunity to object to the change in physician. Workers compensation commission resolves any disputes over change of physician. M.C.L.A. 418.315(1)
Minnesota	• Employer may require employee to receive medical care from a managed care plan and/or pharmacy network. Employee may change physicians with approval from employer. If no managed care plan, employee chooses medical provider. M.S.A. § 176.135(subdiv. 1). Minn. Rules Ch. 518.0250.
Mississippi	• Employee has right to choose one treating physician other than the initial physician provided by his employer. Employee may change physicians a second time with the approval of employer/insurer. Miss. Code Ann. § 71-3-15(1). MS ADC 49 000 001, Gen. Rule 9.
Missouri	• Employer directs medical treatment. V.A.M.S. 287.140(1), (10).
Montana	• Employee may select initial treating physician regardless of whether insurer has established a preferred provider network. If insurer establishes a preferred provider network, employee must receive care from a provider within the network. Employee may change physicians with authorization from insurer. Rather than authorize employee's request to change physicians, insurer may direct employee to a managed care organization or another qualified medical service provider. MT St. 39-71-1101, 1102. MT Admin. Code 24.29.1510.
Nebraska	• Employer may establish managed care plan and direct employees to receive medical care from providers within the network. Employee, however, may select his prior treating physician (or a physician treating his immediate family) if physician agrees to terms of managed care plan and agrees to refer employee to network physicians for any other medical services. If no managed care plan, employee has initial right to receive treatment from his current physician. NE St. Sec. 48-120(2), (9). [2007 Nebraska Laws LB 588 revised the workers compensation statutes but made no material changes to physician selection and managed care plans].
Nevada	• If employer/insurer has contract with managed care organization, employee chooses physician pursuant to the terms of the contract. Employee may change physician once pursuant to the terms of the contract. If employer/insurer has no contract with managed care organization, employee chooses physician from employer-provided list of physicians. Employee may change physicians to another on the panel within 90 days of his injury. Employer must give authorization for additional physician changes. NV St. 616C.090, §§ (1), (2), (3).
New Hampshire	• If employer participates in a managed care plan, employee has right to choose a physician from those within the network. Employee may change physician once within the network at each level of treatment. If employer does not have managed care plan, employee has right to choose his physician. N.H. St. § 281A:23(I). N.H. Code Admin. R Lab 704.03.
New Jersey	• Employer directs medical treatment. N.J.S.A. § 34:15-15.
New Mexico	• Employer has right to select the initial health care provider. After 60 days from the start of treatment, the party who did not select the initial health care provider may select a different health care provider. N.M.S.A. §§ 52-1-49(B), (C).
New York	• If employer is in a preferred provider network, employee must select an initial treating physician from within the network. Employee may seek treatment outside the preferred provider network 30 days after initial treatment began. Insurance carrier (or self-insured employer) may establish a network for diagnostic tests. If no preferred provider network, then employee has right to choose physician. NY Workers Comp. Law Sec. 13-a. NY Admin. Code § 325-8.1.
North Carolina	• If employer contracted with a managed care organization, employee selects physician from a panel of physicians the managed care organization maintains. Employee may change to another attending physician from the managed care organization's panel once without employer/insurer approval. N.C.G.S.A. § 97-25.2. N.C. Admin. Code 10D.0108. If no managed care network, employee has right to select physician, subject to approval from the Industrial Commission. N.C.G.S.A. § 97-25.

## STATE-SPECIFIC RULES

State	Rule(s)
North Dakota	<ul style="list-style-type: none"> <li>If employer selects a preferred provider, employee must receive treatment from the preferred provider for the first 60 days. After 60 days, employee may request a change of provider from the state workers compensation organization. Employee has free choice of initial treating physician. After determination that injury is compensable, the state workers compensation organization has the right to direct treatment. If the organization requests, employee would choose physician from a list of three physicians provided by the organization. Employee may change physicians with the approval for the state workers compensation organization. ND St. §§ 65-05-28, 28.1, 28.2. N.D. Admin. Code 92-01-02-38.</li> </ul>
Ohio	<ul style="list-style-type: none"> <li>If employer participates in a Qualified Health Plan (QHP), employee has free choice of medical provider from within network. Employee may change to a different provider within the QHP. Employee may petition workers compensation bureau to switch out of the employer's QHP to a bureau-certified provider. If employer is not in a Qualified Health Plan, employee has free choice of physician. Ohio Rev. Code § 4121.442. Ohio Admin. Code §§ 4123-6-06, 56.</li> </ul>
Oklahoma	<ul style="list-style-type: none"> <li>Employer selects treating physician from within certified workplace medical plan network, if any. Employee may request one change of treating physicians to another physician within the network. If no certified workplace plan network, employer has right to select a treating physician. 85 OK St. §§ 14(D), (G), 14.2(A).</li> </ul>
Oregon	<ul style="list-style-type: none"> <li>If employer is self-insured or a member of a managed care organization, employer has right to direct medical treatment. Managed care plan must provide for a means for employee to seek compensable treatment outside the organization. If employer is not a member of a managed care organization, employee has free choice of initial treating physician. Employee may change treating physicians twice without restrictions. OR St. § 656.245(2)(a), (4). OR Admin. Code § 436-015-0030(4), (5). [Note: OR St. § 656.245 (revised) becomes effective Jan. 2, 2008. The new statute eliminates employee's option of choosing a nurse practitioner].</li> </ul>
Pennsylvania	<ul style="list-style-type: none"> <li>Employer provides employee with a list of six medical providers from which the employee may choose. The list must include no more than four coordinated care providers and no fewer than three physicians. Employee must visit the same health care provider for 90 days following the injury. After the initial 90 day period, employee may freely select another physician. 77 Penn. St. §§ 531(1)(i), 531.1. PA Admin. Code §§ 127.751, 127.752.</li> </ul>
Rhode Island	<ul style="list-style-type: none"> <li>Employee has free choice of initial treating physician. If employer has a preferred provider network, the employer may direct the employee to a network physician only if the employee desires to change physicians. Employee may change to a physician outside the network with the approval of the insurer or a self-insured employer. 5 RI St. § 28-33-8(a)(1).</li> </ul>
South Carolina	<ul style="list-style-type: none"> <li>Employer has the right to select treating physician. SC Code § 42-15-60.</li> </ul>
South Dakota	<ul style="list-style-type: none"> <li>Employee has right to select treating physician. If employer has case management plan, employee may still elect to receive treatment from a provider outside the plan. Outside provider must comply with provisions of the case management plan. Employee must obtain approval from the case management plan before changing treating physicians. SD Laws § 62-4-43. SD Admin. Code 47:03:04:05, 06.</li> </ul>
Tennessee	<ul style="list-style-type: none"> <li>Employee has right to select treating physician from a list of three or more (depending on nature of injury) physicians provided by the employer. Tenn. Code § 50-6-204(a)(4).</li> </ul>
Texas	<ul style="list-style-type: none"> <li>If managed care network, employee, who lives within network service area, selects initial treating physician from the list provided by the health care network. Employee may change to another physician from the same list once without restriction. Subsequent physician changes are subject to approval from the network. V.T.C.A. Labor Code § 408.031; Insurance Code § 1305.104.</li> <li>If no managed care network, employee freely selects initial treating physician from a commission-approved list. Employee may petition the commission to change treating physicians. Employee selection is subject to the provisions of a workers compensation health care network agreement. V.T.C.A. Labor Code § 408.021, 022.</li> </ul>
Utah	<ul style="list-style-type: none"> <li>Employer has initial right to select treating physician. If employer has established a preferred provider network, employee must choose a physician within the network. Employee may change physicians one time without restrictions. If no preferred provider network, employee has free choice of physician. Employee may change physicians once. UT Code § 34A-2-111(2). UT Labor Comm. 612-2-7,8.</li> </ul>
Vermont	<ul style="list-style-type: none"> <li>Employer has right to select initial treating provider. Employee may change providers if employee provides employer with written notice of reasons for change. 21 VT St. § 640(b).</li> </ul>
Virginia	<ul style="list-style-type: none"> <li>Employer provides a list of at least three physicians from which the employee chooses a physician. VA. Code § 65.2-603(A)(1).</li> </ul>
Washington	<ul style="list-style-type: none"> <li>Employee chooses treating physician. Employee may change physicians with the permission of the workers compensation department or self-insured employer. WA St. § 51.36.010. Wash. Admin. Code § 296-20-065.</li> </ul>
West Virginia	<ul style="list-style-type: none"> <li>Employer may require employee to receive medical treatment from providers within a managed care organization. Employee may change to another provider within the managed health care organization. Employee may seek approval from the workers compensation commission to seek medical treatment outside the managed care organization.</li> <li>If employer does not have a managed care plan, employee may either freely select physician or select from within the workers compensation commission's managed care plan. WV Code § 23-4-3(b).</li> </ul>
Wisconsin	<ul style="list-style-type: none"> <li>Employee freely selects a treating physician. Employee has right to change treating physicians once without restrictions. In an emergency, employer has right to select a temporary treating physician. WI § 102.42(2).</li> </ul>
Wyoming	<ul style="list-style-type: none"> <li>Employer has right to designate a health care provider. Employee has right to select another health care provider. Workers compensation division must approve employee's request to change providers. If a different provider, employer is entitled to a second opinion. WY St. Sec. 27-14-401(f). WY Admin. Code EMP WCC Ch. 7, § 3(a)(ii).</li> </ul>

**Report Claim**


The employee's injury has occurred and their immediate safety is secured. You now need to report the employment-related injury and subsequent Workers Compensation claim to Liberty Mutual.

Keep the following key points in mind when reporting the injury and filing the claim:

For You	For the Injured Employee
<ul style="list-style-type: none"> <li>• Report the injury by filing a claim with Liberty Mutual on the same business day, if possible</li> <li>• Follow the procedures outlined in your Claims Kit                             <ul style="list-style-type: none"> <li>• One Claims Kit per location was sent to your credit union</li> </ul> </li> <li>• Before filing your claim, use the ExPRSCall form located in your Claims Kit (sample below) to gather all the information Liberty Mutual needs to begin the claims process                             <ul style="list-style-type: none"> <li>• If you need another copy, visit <a href="http://www.cunamutual.com/workerscomp">www.cunamutual.com/workerscomp</a></li> </ul> </li> <li>• You may file a claim via:                             <ul style="list-style-type: none"> <li>• Phone (24x7): 800.654.0427</li> <li>• Fax: 800.329.3297</li> <li>• Online: see one-time setup steps below</li> </ul> </li> <li>• If you submit your claim via fax or online, you will receive a call from a Liberty Mutual representative to verify all the facts of the claim and gather any additional information they may need</li> <li>• After you file your claim, you will receive a First Report of Injury confirmation letter via mail from Liberty Mutual. It will contain your reference and claim numbers</li> </ul>	<ul style="list-style-type: none"> <li>• Ensure management and the HR contact are aware of each step taken to care for the injury, including next steps for treatment prescribed by the medical provider</li> <li>• Be sure the injured employee knows their reference and claim numbers as treatment progresses</li> </ul>

**Sample ExPRSCall Form (portion of the form):**

**REPORT ALL WORKER'S COMPENSATION INJURIES TO LIBERTY MUTUAL**  
*The 1-800-CLAIMS SERVICE CENTER is open 24 hours a day including Weekends and Holidays. For efficient service, have the following information available for the Customer Service Representative.*  
 Call: 1-800-654-0427



**ExPRSCall W C Report Form/National Mkt**

---

**CLAIM INFORMATION**

Date/Time of Injury:  AM  PM (After the call, we'll call you back with a one-time member alert.) **WC**

Is this claim work related? Yes  No  Will the employee miss time from work? Yes  No

**Employer Name:** \_\_\_\_\_

---

**EMPLOYEE INFORMATION**

Employee's Social Security Number: \_\_\_\_\_ Employee's Name: \_\_\_\_\_

Home Address: (street) \_\_\_\_\_ (city) \_\_\_\_\_ (state) \_\_\_\_\_ (zip) \_\_\_\_\_

Home Phone Number: \_\_\_\_\_ Male  Female

Date of Birth: \_\_\_\_\_ Marital Status:  Single  Married  Widowed  Divorced

Hire Date: \_\_\_\_\_ Number of Dependents: \_\_\_\_\_ Dependents Under 18: \_\_\_\_\_

Occupation: \_\_\_\_\_ Department Name: \_\_\_\_\_

State Hired: \_\_\_\_\_ Supervisor Name & Phone: \_\_\_\_\_

Current Weekly Wage: \_\_\_\_\_ Hourly Wage: \_\_\_\_\_ Hours Worked Per Week: \_\_\_\_\_

Days Worked Per Week: \_\_\_\_\_ Hours Worked Per Day: \_\_\_\_\_ Employment Status: \_\_\_\_\_

Employer Report No: \_\_\_\_\_ Employee ID No: \_\_\_\_\_ Was Salary Continued: \_\_\_\_\_

Was Employee Paid in Full for Date of Injury: \_\_\_\_\_ How often is employee paid: \_\_\_\_\_

Education Level: \_\_\_\_\_ Any Prior WC Injuries: \_\_\_\_\_ OSHA Reference No.: \_\_\_\_\_

**One-time setup steps for submitting a claim online:**

If you would like to submit your claims online, please complete the following setup steps:

1. Send an email to [WCPrograms@libertymutual.com](mailto:WCPrograms@libertymutual.com) and request an "Email Claim Reporting Form"
2. The form, along with instructions and a password, will be returned to you
3. Once you have this one-time setup completed, you can email any new Workers Compensation claims going forward and the claims process will begin once your email is received

**Assess & Assign Claim**

You have reported the injury and filed a claim with Liberty Mutual. Here's what you should expect from Liberty Mutual as the claim progresses.

Keep the following key points in mind:

For You	For the Injured Employee
<ul style="list-style-type: none"> <li>• Once you file the claim and Liberty Mutual has the information needed, the claim will be assigned to the local Liberty Mutual claims office based on the employee's physical work location (see map below)</li> <li>• Claims are forwarded to the local office so that regulations and licensing requirements for your area can be closely followed</li> <li>• The local claims office will then own the processing of your claim</li> <li>• Many claims (e.g., Medical Only) will not require additional follow-up from the local claims office. Those that do will receive a call (see Step 4)</li> <li>• To find the status of your claim, please contact the local claims office (see table on the next page)</li> <li>• You can be assured that your claim is progressing as quickly as possible</li> </ul>	<ul style="list-style-type: none"> <li>• Keep the employee's manager informed of how treatment is progressing, as appropriate, and if there are any changes in the situation                             <ul style="list-style-type: none"> <li>• Example: The injury was responding to treatment but has since taken a turn for the worse, requiring a different approach</li> </ul> </li> <li>• Contact your local Liberty Mutual claims office if the employee's status or situation changes, especially if the employee loses time from work due to the injury</li> </ul>



**Local Claims Office Information  
(based on the employee's physical work location):**

Office	States Served	Address	Fax Number	Phone Number*
Anchorage, AK	AK	2700 Gambell Street, Suite 405 Anchorage, AK 99503	800.254.5728	866.893.1541
Bala Cynwyd, PA	CT, DE, MA, ME, NH, NJ, PA, RI, VT	15 King's Grant Drive Bala Cynwyd, PA 19004	603.334.0227	800.300.4472
Boise, ID	ID	6213 N. Cloverdale Road, Suite 150 Boise, ID 83713	800.256.3853	800.283.4456
Columbus, OH	OH	700 Taylor Road, Suite 220 Gahanna, OH 43230	603.334.0217	800.368.5095
Glendale, CA	CA, HI	Liberty Mutual/Helmsman-Glendale 225 W. Broadway, Suite 500 Glendale, CA 91204	603.334.0222	800.281.1120
Indianapolis, IN	IN, KY, MD, MI, TN, VA, WV	1161 North Meridian, Suite 500 Carmel, IN 46032	603.334.0203	800.752.5832
Irving, TX	AL, AR, CO, LA, MS, NM, OK, TX	2100 Walnut Hill Lane, Suite 100 Irving, TX 75038	603.334.8096	800.300.0110
Missoula, MT	MT	700 SW Higgens Ave Missoula, MT 59803	406.549.0468	800.735.7079
Portland, OR	OR, WA	650 NE Holladay Street Portland, OR 97232	503.239.4108	800.275.5600
Rockville, MD	MD (litigated claims only)	6101 Executive Boulevard Rockville, MD 20852	603.334.0208	800.526.6525
Sacramento, CA	AZ, NV, UT, WY	1750 Howe Avenue, Suite 400 Sacramento, CA 95825	603.334.0231	800.821.0967
Schaumburg, IL	IL, IA, KS, MN, MO, NE, ND, SD, WI	1000 Plaza Drive Schaumburg, IL 60173	603.334.8077	800.835.6279
Tampa, FL	FL, GA, NC, SC	3901 Premier North Drive Tampa, FL 33631	603.334.8050	800.282.6218
Tarrytown, NY	NY	520 White Plains Road Tarrytown, NY 10591	603.334.8111	800.422.0820

\*Only use this number to inquire about claims status after you have submitted your claim using the options in Step 2.

**Investigate Claim**

The claim has been assigned to a local claims office and is now being investigated.

Keep the following key points in mind:

For You	For the Injured Employee
<ul style="list-style-type: none"> <li>• Liberty Mutual will make three-point contact (credit union, employee, provider) as needed within two business days</li> <li>• Three-point contact will be made on any claim where:                             <ul style="list-style-type: none"> <li>• Further investigation is needed</li> <li>• The worker is missing time from work</li> <li>• The worker has modified work hours not accommodated by the insured</li> <li>• Medical treatment exceeds usual and customary charges for the reported injury</li> </ul> </li> <li>• If contact is not needed, compensability will be determined and the claim will be approved or denied</li> <li>• If approved, the claim is processed and bills are generally paid within 30 days</li> <li>• To find the status of your claim, please contact the local claims office (see the table on page 9)</li> <li>• You can be assured that your claim is progressing as quickly as possible</li> </ul>	<ul style="list-style-type: none"> <li>• Keep the employee's manager informed of how treatment is progressing, as appropriate, and if there are any changes in the situation                             <ul style="list-style-type: none"> <li>• Example: The injury was responding to treatment but has since taken a turn for the worse, requiring a different approach</li> </ul> </li> <li>• Contact your local Liberty Mutual claims office if the employee's status or situation changes, especially if the employee loses time from work due to the injury</li> </ul>

**Manage Care**

Claims that require additional care will be managed using Liberty Mutual's claim management expertise.

Keep the following key points in mind:

For You	For the Injured Employee
<ul style="list-style-type: none"> <li>• A Return-to-Work program will be designed and employed as needed by Liberty Mutual</li> <li>• Litigation will proceed as needed by Liberty Mutual</li> <li>• You will receive information from Liberty Mutual as needed to begin these next steps</li> </ul>	<ul style="list-style-type: none"> <li>• Keep the employee's manager informed of how treatment is progressing, as appropriate, and if there are any changes in the situation                             <ul style="list-style-type: none"> <li>• Example: The injury was responding to treatment but has since taken a turn for the worse, requiring a different approach</li> </ul> </li> <li>• Contact your local Liberty Mutual claims office if the employee's status or situation changes, especially if the employee loses time from work due to the injury</li> </ul>

**Q: How do I file a claim?**

Credit unions have several options available for submitting claims. Refer to the detailed instructions in Step 2.

**Q: When I report a claim, will I receive a claim number?**

If you call to report your claim, you will receive a reference number to use for inquiries until Liberty Mutual has assigned your claim to your local claims office. Once the claim has been assigned, you will receive a First Report of Injury letter via mail that contains both your reference and claims numbers.

**Q: To whom is the First Report of Injury sent?**

The letter is sent to the person who filed the claim.

**Q: Where can I get a claim form?**

The claim form (called the ExPRS form) can be found in your Claims Kit and on the web at [www.cunamutual.com/workerscomp](http://www.cunamutual.com/workerscomp).

**Q: We've submitted all bills to Liberty Mutual, when will they be paid?**

Once Liberty Mutual receives the bills and the claim is approved, it will generally take up to 30 days for the bills to be paid. If you have questions about the status of your claim, please call your local claims office.

**Q: In what claims situations will three-point contact occur?**

Three-point contact will be made on any claim where:

- Further investigation is needed
- The worker is missing time from work
- The worker has modified work hours not accommodated by the insured
- Medical treatment exceeds usual and customary charges for the reported injury

In these cases, the claims adjustor will contact the credit union contact that reported the claim, the injured worker and the medical provider.

**Q: I have an urgent claim question and when I call the adjustor, I reach their voice mail. I don't have time to wait for a return phone call or email. What should I do?**

Liberty Mutual's adjustors are required to return phone calls within 4 business hours, and emails within one business day. If your need is urgent and you reach their voice mail greeting, zero-out to reach another team member or manager.

**Q: How do I locate a doctor?**

Your Claims Kit contains a worksite poster that lists a number of physicians and clinics workers can visit. You can also access the Liberty Mutual Provider Referral Services (PRS) website and locate a physician or clinic in your immediate area by visiting [www.talispoint.com/liberty/ext](http://www.talispoint.com/liberty/ext).

**Q: Is Return-to-Work assistance included in our coverage?**

Yes. Liberty Mutual provides assistance with Return to Work programs as part of a Workers Compensation claim. The claims adjustor will contact you to begin this process, if needed.

**Q: What should I give my injured employee prior to seeing a physician?**

Provide your employee with a copy of the medical authorization form located in your Claims Kit. Instruct the employee to have all medical bills sent directly to Liberty Mutual's local claims office based on the employee's physical work location. Your local claims office can be found in Step 3.

**Q: What should I do if the provider mails the bill to my credit union or to the injured worker directly?**

Providers are not allowed (per state law) to bill the employee unless it is deemed by Liberty Mutual's claim adjustor to be a non-compensable claim under Workers Compensation. Instruct the medical provider to send the bill directly to Liberty Mutual's local claims office listed in Step 3.

**Q: When is an investigation required?**

An investigation commences when a claims adjustor needs to verify the facts of a claim. Some examples include:

- How did the injury occur?
- Is the treatment sought appropriate for the reported injury?
- Was the worker in the course and scope of their employment when the injury occurred?
- Did the worker have any pre-existing injuries or conditions?

**Q: My employee needs an MRI and physical therapy. Why does Liberty Mutual need to review these requests in more detail?**

When more advanced or lengthy care has been requested, Liberty Mutual will perform what is known as Utilization Management (UM) on the claim. UM is a formal process that compares health care service requests against nationally accepted protocols to determine if the treatment is medically necessary and appropriate for the covered injury. Utilization Management does not address payment decisions or compensability/causality.

**Q: Who should I call with questions about my policy or endorsements?**

CUNA Mutual Group will be happy to answer your policy questions. Simply contact your CUNA Mutual Group Sales Executive at 800.356.2644.

**Q: Who do I call to request an ergonomic evaluation?**

Loss control resources are available to all insureds. Liberty Mutual offers many options based on your needs. Please contact your CUNA Mutual Group Sales Executive at 800.356.2644 for further information.

**Q: When are Claims Kits mailed and who are they mailed to?**

Claims Kits are mailed to the Human Resources Manager at the credit union's primary location two weeks prior to the effective date of the policy. If you have not received your Claims Kit(s), please contact CUNA Mutual's Protection Resource Center at 800.637.2676. You will receive updated worksite posters for the second (and future) year renewal.

**Q: What is my policy number?**

Please contact CUNA Mutual's Protection Resource Center at 800.637.2676 to obtain your Workers Compensation policy number.

CUNA Mutual Insurance Agency, Inc., an affiliate within CUNA Mutual Group, is the marketing agent licensed to broker Property and Casualty coverages, including Workers Compensation coverage. The Workers Compensation Policy is underwritten by Liberty Mutual Insurance Company or an affiliate or subsidiary. Coverage may vary or may not be available in some states. This summary is not a contract. No coverage is provided by this summary, nor does it replace any provisions of any policy. Please contact the company or an agent for further information about coverage, terms, conditions and exclusions. This summary does not make any representations that coverage does or does not exist for any particular claim or loss, or type of claim or loss, under any policy. Whether or not coverage exists for any particular claim or loss under any policy depends on the facts and circumstances involved in the claim or loss and all applicable policy language.

CUNA Mutual Group Proprietary and Confidential  
Further Reproduction, Adaptation or Distribution Prohibited  
© CUNA Mutual Group, 2009 All Rights Reserved

10000841-0209 ©CUNA Mutual Group

CUNA Mutual Group is a leading provider of financial services to cooperatives, credit unions, their members, and valued customers worldwide. With more than 70 years of market commitment, CUNA Mutual's vision is unwavering: to be a trusted business partner who delivers service excellence with customer-focused, best-in-class products and market-driven innovation.

Visit [www.cunamutual.com](http://www.cunamutual.com) or call 800.356.2644 for more information.



## CUNA MUTUAL GROUP

*CUNA Mutual Insurance Agency, Inc.*

P.O. Box 391  
5910 Mineral Point Road  
Madison, WI 53701-0391  
800.356.2644  
[www.cunamutual.com](http://www.cunamutual.com)

Common Purpose. Uncommon Commitment.