

## INSTRUCTIONS FOR REPORTING A WORK RELATED INJURY

### Who is covered at Norfolk State University by the Virginia Workers' Compensation Act?

1. Faculty Members
2. Part-time Faculty Members
3. Classified Employees
4. Hourly/Wage Employees (Temporary or 1,500 hour employees)
5. Student Workers

### Procedures to follow when an employee has a work related injury

1. In the event of a medical emergency, the employee should report the work related injury to their immediate supervisor or the supervisor on duty and go to an emergency room or urgent care center. If you need assistance transporting the employee, please contact the University Police department.
2. The supervisor or designee must complete the Supervisor's **Accident Investigation Report (Attachment I)** and submit it to the Human Resources Office within **24 hours** of the injury.
3. The supervisor or designee must give the injured employee a copy of the **Workers' Compensation Employee's Instructions for Filing a Claim form (Attachment II)**. This form contains general instructions for filing a claim; the billing address for work related medical bills; and the EPIC Pharmacy telephone number.
4. The supervisor or designee must present the **Panel of Medical Providers for Workers' Compensation (Attachment III)** to the injured employee. The injured employee must select a physician from the panel or **they will be responsible for the cost of the treatment**. The employee must indicate their selection on the **Workers' Compensation Panel Physicians form (Attachment IV)**. The supervisor must submit this form with the Supervisor's Accident Investigation Report. **Special Note:** It is not necessary for the supervisor or designee to list three physicians on the Workers' Compensation Panel Physicians form. Simply indicate that a panel of physicians was presented to the injured employee.
5. The supervisor or designee must give the injured employee an **Expense Reimbursement form (Attachment V)**. The employee may use this form to receive reimbursement for medication, mileage, or parking expenses relating to the injury.
6. If medication is required, the injured employee may purchase the medication and use the Expense Reimbursement form or use an EPIC Pharmacy which will not require an out-of-pocket expense. The supervisor or designee must make the **EPIC Pharmacy list (Attachment VI)** available to the injured employee.
7. The supervisor or designee must report any time missed due to a work related injury on a Leave Activity Reporting form (WT) for classified and applicable faculty members. However, the injured employee must bring a medical statement to verify that the missed time was due to the work related injury. If medical documentation cannot be provided by the employee, the supervisor must report the leave time as personal sick leave (SP) or annual leave (AT). For wage employees, the supervisor should report any time missed on the hourly/wage time sheet. All other employees and student workers should submit any time missed on the **Supervisor's Accident Investigation Report**. The original disability and return to work certification must be forwarded to the Human Resources Office.

**The forms needed to report a work related injury, the Panel of Medical Providers for Workers' Compensation and the EPIC Pharmacy Network list may be obtained from the Human Resources Office or if you are connected to the network, click on My Computer/Orion/Public/Personnel/Forms (WC).**

**SUPERVISOR'S ACCIDENT INVESTIGATION REPORT**

**Investigate All ACCIDENTS: Help stop accidents by discovering how and why this one happened. Determine and correct the basic cause of this accident in your department and help to prevent accidents in the future. Please type or print the information requested below and return to the Human Resources Office within 24 hours of the accident.**

Name of injured \_\_\_\_\_ Soc. Sec. No. \_\_\_\_\_ Birth date \_\_\_\_\_

Home Address \_\_\_\_\_  
(Number & Street) (City or Town) (State) (Zip)

Marital Status: Married \_\_\_\_\_ Single \_\_\_\_\_ Widow \_\_\_\_\_ Widower \_\_\_\_\_ Divorced \_\_\_\_\_

Employment Date \_\_\_\_\_ Class Title \_\_\_\_\_ Dept. \_\_\_\_\_

Work shift starts: A.M. \_\_\_\_\_ P.M. \_\_\_\_\_ Work shift ends: A.M. \_\_\_\_\_ P.M. \_\_\_\_\_

Type of Employee: Faculty \_\_\_\_\_ Part-Time Faculty \_\_\_\_\_ Classified \_\_\_\_\_

Hourly/Wage Employee \_\_\_\_\_ Student Worker \_\_\_\_\_

**OCCUPATIONAL INJURY OR OCCUPATIONAL ILLNESS**

Date Accident Occurred \_\_\_\_\_ Time \_\_\_\_\_ A.M. \_\_\_\_\_ P.M.

Date Reported to Supervisor \_\_\_\_\_ Time \_\_\_\_\_ A.M. \_\_\_\_\_ P.M.

Where Did Accident Occur  
(Building) (Room)

Brief description of how the accident occurred (Be specific and name any objects or substances involved and state what the employee was doing when injured).

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Exact location of injury (Indicate the part of the body affected; e.g., right or left, upper or lower, index finger or thumb, etc.).

\_\_\_\_\_

Did injured visit a physician? \_\_\_\_\_ YES \_\_\_\_\_ NO

Name and address of physician

**ATTACHMENT I**

Name and address of Hospital

Name of Health Insurance Plan

Name and address of Witnesses

What should be done to prevent repetition?

Has it been done \_\_\_\_ YES \_\_\_\_ NO If not, give reason

Was employee instructed regarding hazards of job \_\_\_\_ YES \_\_\_\_ NO

Lost Time YES \_\_\_\_ NO \_\_\_\_ Probable length of disability

Has injured returned to work \_\_\_\_ If so, date and hour

Employee's Signature \_\_\_\_\_ Date

Supervisor's Comments

Supervisor's Signature \_\_\_\_\_ Date

The supervisor is responsible for informing the Human Resources Office when the employee returns to work.

**NOTE: In order to complete the report thoroughly, it is suggested that the employee and supervisor complete it together.**

\_\_\_\_\_ ***DO NOT WRITE BELOW THIS LINE*** \_\_\_\_\_

***HUMAN RESOURCES OFFICE USE ONLY***

Date Received \_\_\_\_\_

Length of Disability

From \_\_\_\_\_ To

Date of Follow-up \_\_\_\_\_

Number of Days Lost

Comments

(Rev. 10/98)

**WORKERS' COMPENSATION**

## EMPLOYEE'S INSTRUCTIONS FOR FILING A CLAIM

The Commonwealth of Virginia selected MANAGED CARE INNOVATIONS (MCI) to manage the Commonwealth's workers' compensation program. To the extent granted by the Virginia Workers' Compensation Act, the MCI team coordinates the medical and disability benefits related to your claim.

To assist in this process, the program uses a Preferred Provider Organization (PPO) medical network (available at [www.covwc.com](http://www.covwc.com)). The coordinated process between the claims management, PPO, and medical management services are designed to provide the Commonwealth's employees with quality medical care and procedures to facilitate return to work as soon as medically possible.

### *The following are steps you should follow if you are injured on the job:*

1. In the event of a medical emergency, seek medical attention immediately.
2. Report all details of the incident or injury to your supervisor. An investigation will be performed for investigation of safety prevention and claim compensability.
3. Complete all required agency forms with your supervisor.
4. Your employer will offer to you a panel of physicians. You must select a physician from the list provided.  
*\*Please note, if you choose to go to a physician other than the panel provider, you may be responsible for the cost of the medical services.*
5. This program also provides for the payment of pharmacy prescriptions by your panel physician. Your supervisor can locate the closest pharmacy to you by checking [www.covwc.com](http://www.covwc.com), page to PPO/Rx Networks, or calling 800/876-EPIC (3742).

**The card below provides you with the instructions for filing a workers' compensation claim and selecting medical care. Show this card to the medical provider you select.**

*These procedures are in addition to any internal policies required by your agency.*

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### **WORKERS' COMPENSATION**

**If you are injured on the job do the following:**

1. Immediately report all details of the incident to your supervisor. Complete all agency forms.
2. Select medical care from the panel offered to you by your Supervisor. If you do not use a panel physician you may be responsible for the cost of the treatment.
3. If you are to be admitted to the hospital, your medical provider should call MCI.
4. For Prescription Drugs, use an EPIC Pharmacy. Call 1/800/867-3742 for pharmacy locations or [www.covwc.com](http://www.covwc.com), page to PPO/Rx Networks.

**Question? Call MCI at 804/649-2288**

### **Commonwealth of Virginia**

### **Workers' Compensation Injury Management**

#### **Attention Panel Provider:**

The holder of this card has reported a Workers' Compensation claim.

#### **All billing should be sent to:**

**MANAGED CARE INNOVATIONS**

**P.O. Box 1140**

**Richmond, VA 23208-1121**

**804/649-2288 fax 804/649-2435**

#### **Attention EPIC Pharmacy:**

Please call 1/800/876-3742 (800/876-EPIC) for authorization.

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**MANAGED CARE INNOVATIONS**

**Phone 804/649-2288 Fax 804/649-2435**

**NORFOLK STATE UNIVERSITY  
PANEL OF MEDICAL PROVIDERS  
FOR WORKERS' COMPENSATION**

**CHESAPEAKE**

**GENERAL MEDICINE**

Dr. Hal Barnes	SHCC- Chesapeake	757-548-1400
Dr. Kenneth Mayer	910 Great Bridges Blvd., Ste 101	
Dr. Arlene Palting	Chesapeake, VA 23320	

**ORTHOPEDICS**

Dr. Edward Gold	200 Medical Pkwy, Ste. 105	757-547-0302
	Chesapeake, VA 23320	
Dr. Sidney Tiesenga	110 American Legion Rd.	757-483-4575
	Chesapeake, VA 23321	

**HAMPTON**

**GENERAL MEDICINE**

Dr. James Mixon	2013 Cunningham Dr., Ste 203	757-826-9425
	Hampton, VA 23666	

**ORTHOPEDIC**

Dr. Bruce Reid	2202 Executive Dr., Ste. C	757-838-5055
	Hampton, VA 23666	

**NEWPORT NEWS**

**EMERGENCY AND GENERAL MEDICINE**

Dr. Stanley Cypress	Southeast Medical Center	757-245-3613
Dr. Clarence Friend	727 25th Streets	
Dr. Thaddeus Sutton	Newport News, VA 23607	

**ATTACHMENT III**

## **ORTHOPEDICS**

Dr. Harry McCarthy Dr. Kerry Nevins Dr. Gary Routson	Peninsula Orthopedic Assoc. 309 Main Streets Newport News, VA 23601	757-599-3821
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## **NORFOLK**

### **EMERGENCY AND GENERAL MEDICINE**

Ghent Urgent Care & Family Practice Dr. Andrew Knoll Dr. Frank Westmeyer	957 - E West 21st Street Norfolk, VA 23508	757-622-8358
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N. D. C. Medical Center Dr. Steven Ackerman Dr. William D. Archley, Jr. Dr. Robert L. Bademian Dr. Stuart Baker Dr. Siva Balakrishnan Dr. John D. Becher, Jr. Dr. David Blais Dr. James Carty, Jr. Dr. H. Steven Choi Dr. Richard L. Cullen, Jr. Dr. Dr. Jeanne C. Dillon Dr. Craig B. Froede Dr. E. Beaumont Hodge, Jr. Dr. Ramon A. Matawaran Dr. Jonathan W. Miller Dr. Lisa Price Stevens Dr. Ghandi M. Saadeh Dr. Walter E. Vest, III	850 Kempsville Road Norfolk, VA 23502-3979	757-466-5900
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## **ORTHOPEDICS**

Dr. J. Abbott Byrd III Dr. James Devereux Dr. Stephen McCoy Dr. Donald O'Neill Dr. Thomas Markham	Vann Atlantic Orthopedics 844 Kempsville Road, Ste. 101 160 Kingsley Lane, Ste. 405 Norfolk, VA 23502-3979	OR 757-461-1780
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## **PORTSMOUTH**

## **ORTHOPEDICS**

Dr. James Collier, Jr. Orthopedic Surgery Centers 757-397-0783  
3300 High Street

Dr. Ernesto Luciano-Perez 4041 Taylor Road, Ste. 1 757-397-0783  
Portsmouth, VA 23707

## **VIRGINIA BEACH**

### **EMERGENCY AND GENERAL MEDICINE**

Dr. Karen Hart Bayside Family Practice 757- 460-0915  
Dr. George Wong 2017 Pleasure House Road  
Dr. Merih Dagli VA. Beach, VA 23455

## **ORTHOPEDICS**

Dr. Timothy Buderick 1016 First Colonial Rd. OR 757-481-9500  
Dr. Sandra Glasson VA. Beach, VA 23454 757-464-0888  
Dr. Paul Krop 1020 Independence Blvd.  
VA. Beach, VA 23455

## **WILLIAMSBURG**

### **EMERGENCY AND GENERAL MEDICINE**

Dr. James Barton Williamsburg Medical Arts, LLC 757-220-8300  
Dr. Douglas Brown 5251 John Tyler Hwy., Ste 17 OR  
Dr. William Cummings 5601 Richmond Road  
Dr. Christopher Jones Williamsburg, VA 23185  
Dr. Peter Nord

## **ORTHOPEDICS**

Dr. John Grasinger Orthopedics Surgery Associates 757- 253-1047  
Dr. John Kona 1155 Professional Drive  
Williamsburg, VA 23185

**SPECIAL NOTE: IN THE EVENT OF AN INJURY, YOU MAY ALSO USE AN EMERGENCY ROOM OR AN URGENT CARE CENTER.**

## **WORKERS' COMPENSATION**

## PANEL PHYSICIANS

The Virginia Workers' Compensation law requires your employer to provide to you a Panel of at least three physicians. You must select a physician from this Panel to treat your work related injury. **If you do not use one of these physicians for your work related injury, you may be responsible for the cost of the medical care.**

Please select a physician from this Panel, complete and sign this form and return it to your supervisor. The supervisor should immediately return this form to MANAGED CARE INNOVATIONS (MCI).

Please choose from the following list by writing the physician's name and signing the form. Return the form to your supervisor for filing with the claim application.

1) _____	2) _____	3) _____
Name	Name	Name
_____	_____	_____
address	address	address
_____	_____	_____
_____	_____	_____
Phone	Phone	Phone

### Employee

By signing this form, I release all medical information to Managed Care Innovations. All information will be considered confidential and used only in the matter of the workers' compensation claim.

I have been presented with a panel of at least three physicians and have selected

Dr. \_\_\_\_\_ to provide me with medical care for my work related injury.

Signed: \_\_\_\_\_ Date

Name

Printed: \_\_\_\_\_ Date of Injury

Name

Social Security Number

ATTACHMENT IV



# EPIC Pharmacy Network

## Chesapeake, VA

Great Bridge Pharmacy  
Malcolm Knight  
130 S. Battlefield Blvd.  
Chesapeake, VA 23320  
(757) 482-3332

Irwin's Pharmacy & Drug, Inc.  
Lawrence Barlow  
4300 E. Indian River Road  
Chesapeake, VA 23325  
(757) 420-8418

Lawrence Pharmacy  
David Lawrence  
1156 N. George Washington Hwy.  
Chesapeake, VA 23323  
(757) 487-3458

## Franklin, VA

Jones Drug Company  
Beverley Carson  
114 N. Main Street  
Franklin, VA 23851  
(757) 562-3510

Lakeview Pharmacy #3  
Bill Brown  
1301 Armory Drive  
Franklin, VA 23851  
(757) 516-8214

Parker Drug Company  
Ed Canada  
102 N. Main Street  
Franklin, VA 23851  
(757) 562-3333

## Hampton, VA

Mercury West Discount  
Paul Wolf  
2148 W. Mercury Blvd.  
Hampton, VA 23666  
(757) 827-1938

## Newport News, VA

Denbigh Pharmacy, Inc.  
Richard Woodfin, III  
13349 Warwick Blvd.  
Newport News, VA 23602  
(757) 877-0253

East End Pharmacy, Inc.  
Thomas Goode  
2501 Marshall Avenue  
Newport News, VA 23607  
(757) 247-9554

Hiddenwood Pharmacy, Inc.  
Tom Hutchens  
35 Hiddenwood Shopping Center  
Newport News, VA 23606  
(757) 595-1151

## Norfolk, VA

Bayview Plaza Pharmacy  
Michael Stredler  
7924-A Chesapeake Blvd.  
Norfolk, VA 23518  
(757) 583-7466

Jai's Apothecary Shop  
J. W. Phelham, Sr.  
1401 Tidewater Drive, Suite 8  
Norfolk, VA 23504  
(757) 627-9159

Murden Drug Co.  
Lawrence Bartell  
3520 Tidewater Drive  
Norfolk, VA 23509  
(757) 622-6373

## Portsmouth, VA

Drug Center Pharmacy #2  
Ron Woods  
600 High Street  
Portsmouth, VA 23704  
(757) 393-4039

## **Portsmouth, VA**

**Drug Center Pharmacy #3**  
**Robert Woods**  
**912 Airline Blvd.**  
**Portsmouth, VA 23707**  
**(757) 399-6361**

**Suburban Pharmacy**  
**David Stephenson**  
**3701 King Street**  
**Portsmouth, VA 23707**  
**(757) 397-2377**

## **Suffolk, VA**

**Bennett's Creek Pharmacy**  
**S. Chris Jones**  
**3219 Bridge Road**  
**Suffolk, VA 23435**  
**(757) 483-6966**

**J.P. Hall Drug Company, Inc.**  
**Shirley Bumgardner**  
**121 W. Washington Street**  
**Suffolk, VA 23434**  
**(757) 539-3461**

**Lakeview Pharmacy #2**  
**Dom De Polo**  
**4868 Bridge Road**  
**Suffolk, VA 23435**  
**(757) 483-7140**

**Lakeview Pharmacy, P.C.**  
**Nat Jones**  
**2000 Meade Parkway**  
**Suffolk, VA 23434**  
**(757) 934-0533**

## **Virginia Beach, VA**

**Barr's Pharmacy, Inc.**  
**Rick Hall**  
**201 Virginia Beach Blvd.**  
**Virginia Beach, VA 23451**  
**(757) 428-1211**

**Bayside Pharmacy**  
**H. Lindsay Reavis**  
**4801-A Shore Drive**  
**Virginia Beach, VA 23455**  
**(757) 464-1463**

**Ingram Pharmacy**  
**Keith Bonney**  
**207 25th Street**  
**Virginia Beach, VA 23451**  
**(757) 428-6363**

**Kempsville Pharmacy**  
**Tom Leavitt**  
**345 Kempsville Plaza**  
**Virginia Beach, VA 23462**  
**(757) 497-3516**

## **Williamsburg, VA**

**Berkley Pharmacy, Inc.**  
**Jim Patterson**  
**5251-14 John Tyler Hwy.**  
**Williamsburg, VA 23185**  
**(757) 229-8181**

**Olde Towne Pharmacy**  
**Kelly Hasty**  
**4854 Longhill Road**  
**Williamsburg, VA 23188**  
**(757) 220-8764**

**Professional Pharmacy**  
**Warren Harrell**  
**1302 Mt. Vernon Avenue**  
**Williamsburg, VA 23185**  
**(757) 229-3560**

**Williamsburg Drug Company**  
**Patricia Robinson**  
**440 Duke of Gloucester Street**  
**Williamsburg, VA 23185**  
**(757) 229-1041**

