

PM/PD Checklist for Workers' Compensation



This checklist outlines the steps PM/PD should take to document a work-related injury, illness, or accident and/or a potential work-related incident for purposes of Workers' Compensation.

Please Note: In the event of a medical emergency, call 911

ALL work-related injuries, illnesses, and accidents must be reported as they may require regulatory reporting. Immediately notify AmTrust in the event of one of the following occurrences:

- Fatalities
- Any inpatient hospitalization
- Any amputation or loss of an eye

Not Reporting a work-related injury, illness or accident within the required time periods may result in penalties to WellHaven.

Pre-Injury Action Items	
	Establish relationships with local Occupational Health Clinics or local ER Use link to search for physicians in your area: https://www.talispoin.com/amtrust/external/
	Ensure Occupational Health Clinic's hours are the same as your clinic
	Selected Health Clinics should be able to provide blood/urine drug and alcohol testing if needed.
	Once you've selected 3 local Occupational Health Clinics, please edit the form you will provide to your employees. This form will be handed to them at the time of an injury.
	You will need to include job descriptions with the Employee Work Comp Packet
When Notified of a Work-Related Injury, Illness, or Accident PM/PD ACTION ITEMS	
	Help the employee receive first aid or seek medical attention, if necessary when an employee informs you that he/she suffered a work-related injury or accident
	IMMEDIATELY UPON NOTICE OF A WORK INJURY/ILLNESS/ACCIDENT , submit an Incident Report through AmTrust (use state form). If you are unsure contact Human Resources before submitting the report.
	Investigate ALL workplace accidents using the Investigation form. Take witness statements using the witness form. Take a photo of the scene where the injury occurred the same day. Be specific as to what happened. Note if there are any defects with the area of injury.
	Provide the employee with a copy of the Workers' Compensation Packet & Job Description
	Provide the employee with a copy of your State info
	Fax or email completed documents & any doctor notes to the claims adjuster at AmTrust
	Contact AmTrust immediately if an employee is admitted to the hospital within 24 hours post-incident.
	Contact Human Resources at HR@WellHaven.com to make arrangements for the absence if the employee is gone from work for more than 3 days.
	Notify the employee of the following: <ul style="list-style-type: none"> • They will receive and acknowledgment letter from AmTrust regarding the claim. • They will receive a call from their assigned claims adjuster from AmTrust to discuss the claim. • Contact Human Resources at HR@WellHaven.com to make arrangements for absence if they employee is absent from work for more than 3 workdays. • If medical treatment isn't sought within the first 24 to 48 hours, it may impact their potential workers' compensation benefit. • Personal medical insurance will not cover treatment for a work-related injury or illness. They should inform the medical facility that they were injured at work and should provide AmTrust contact information to the medical provider for billing purposes.
	Respond to requests from AmTrust
Return to Work	
	Do NOT allow employees to work without a release to return to work (RTW). RTW Form Included in Employee Packet
	Work with Human Resources if not released to full duty.
	Assist in accommodating restrictions/Modified Duty
OSHA Reporting	
	If the employee seeks medical treatment, report on OSHA-300 Log
	If there is no medical treatment, report on the Incident log

AMTRUST- (All States Except for WA)
 Phone: [866-272-9267](tel:866-272-9267)
 Fax: 775-908-3724 or 877-669-9140
 Email: Amtrustclaims@qrm-inc.com
 WellHaven Policy # is found on the
[Work Comp page in Knowledge Base](#)

Human Resources
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