



ADMINISTRATIVE REGULATION

Workers' Compensation (Revised from City AR-00042)

FESSAM #7C.2

Effective 1/1/2016

I. SCOPE:

This Administrative Regulation (AR) applies to all Loveland Fire Rescue Authority (LFRA) employees including full-time, part-time, temporary, seasonal hires, and volunteer firefighters.

II. PURPOSE:

This AR is to help ensure that the Authority complies with the provisions of the Colorado Workers' Compensation Act.

III. DEFINITIONS:

- **Work-Related Injury** is defined as any injury/illness that arises out of the course and scope of employment regardless of fault.
- **Designated Medical Provider (Designated Provider)** means the medical facilities that the Authority has selected to treat work-related injuries and illnesses. The Designated Provider is responsible for the primary medical care for occupational injuries/illnesses including but not limited to, writing prescriptions, providing work restrictions, making referrals, and monitoring treatment. Designated Provider in this AR also refers to medical providers to whom an employee has been referred by one of the Authority's Designated Providers and that referral has been authorized by TRISTAR Insurance Group.
- **TRISTAR Insurance Group (TRISTAR)** is the workers' compensation carrier for the Authority and administers work-related injury and illness claims for Authority employees in accordance with the Colorado Workers' Compensation Act.
- **Maximum Medical Improvement (MMI)** is the point when the injury has become stable and no further treatment is reasonably expected to improve the condition. The possibility that the condition may get better or worse over time or that a person is receiving maintenance treatment does not affect an MMI determination.
- Permanent Impairment is when the Designated Provider has determined that the injured employee is at MMI and will not return to his/her pre-injury condition. The Designated Provider will determine an impairment rating based on the employee's change of condition due to his/her current injury in accordance with state law. An impairment rating does not necessarily mean that an employee is disabled or cannot return to his/her regular position.

IV. POLICY:

All persons covered by this AR are expected to comply with the following procedures in order for the Authority to comply with the Colorado Workers' Compensation Act and to assist with the efficient processing and management of workers' compensation claims.



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Basis for Mandate: Colorado Workers' Compensation Act

V. PROCEDURE:

Injured Worker Responsibilities

- **Reporting:** Employees shall report any work-related injuries or illnesses to their supervisors, or the designated person in charge, **by the next business day** per Authority policy, even if no medical treatment was needed. If an employee misses this deadline, he/she must still report any work-related injury/illness. Failure to report a claim within four working days, however, may result in loss of workers' compensation benefits as prescribed by law, up to and including the denial of the claim. If an employee is unsure as to whom to report a claim, he/she should contact the City of Loveland Risk Management Division at 962-3314 or 962-3319 for guidance.
- **Designated Medical Providers:** Employees must seek treatment with one of the Authority's Designated Providers for any and all work-related injuries/illnesses. Going to personal physicians or medical facilities that are not Designated Providers may result in medical and/or pharmacy bills not being paid by the Authority or TRISTAR. Employees have the choice between the following Designated Providers:

Banner Occupational Health Colorado

1703 E 18 th St, Ste 4	1517 16 th Ave. Ct.
Loveland, CO 80538	Greeley, CO 80631
(970) 820-4580	(970) 350-6810
Monday - Friday 7:30 a.m. to 6:00 p.m.	Monday - Friday 7:30 a.m. to 6:00 p.m.

OR

UC Occupation Health Colorado

2500 Rocky Mountain Ave., Suite 2200	4674 Snow Mesa Dr. Ste. 200
Loveland CO 80538	Ft. Collins, CO 80528
(970) 495-8450	(970) 495-8450
Monday – Friday 8:00 a.m. to 5:00 p.m.	Monday – Friday 8:00 a.m. to 5:00 p.m.

Employees are expected to call the Designated Provider's office for an appointment before going in to seek treatment.

- **After-hours or Emergency Medical Care:** Employees must go to:

Nearest Emergency Room



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- Completing Hospital Paperwork: If an employee treats in an emergency room, the hospital may require the completion of paperwork for billing purposes that requests information about the Authority's workers' compensation insurer and a claim number. If an employee receives such a form, it must be provided to City of Loveland Risk Management Division for completion by the next business day.
- Following up on Hospital Treatment: Employees that treat in the emergency room must follow up with either Workwell or OHS on the next business day. **Referrals from the emergency room, except for emergency referrals, may not be acceptable to TRISTAR and thus may not be paid.** Employees should not return to the emergency room to have bandages changed, stitches removed, etc.
- Obtaining Referrals: The Designated Provider may make treatment referrals for tests, physical therapy, specialists, chiropractors, etc. Hospitalization, surgeries, and certain procedures or treatments may require authorization from TRISTAR. If an employee consults a provider not affiliated with or to whom he/she was not referred by the Designated Provider, neither the Authority nor TRISTAR will pay for such consultation unless each visit has prior approval from TRISTAR. No consultation will be paid under any circumstance unless a complete medical report is submitted to TRISTAR from that provider.
- Purchasing Prescription Drugs: Charges for prescription drugs ordered by the Designated Provider will be paid by TRISTAR. The Authority does not have designated pharmacies. The pharmacy may require verification that the prescription is for an authorized workers' compensation claim. If so, the employee needs to provide the pharmacy with the City of Loveland Risk Management Division's main phone number of 962-2314. If an employee pays for a prescription, he/she needs to submit the receipt that shows the type of medicine purchased and cost to TRISTAR for reimbursement.
- Receipt of Invoices from Designated Providers: If an employee receives an invoice from a Designated Provider with respect to his/her workers' compensation claim, he/she should contact the City of Loveland Risk Management Division. Employees are not responsible for payment of authorized treatment.
- Keeping Appointments: If no prior arrangements have been made for missing an appointment, the employee shall be responsible for any cost incurred due to the missed appointment. Additionally, if an appointment has been missed and the employee has not been released to work, he/she may be considered absent without permission from work and subject to discipline in accordance with the Authority's disciplinary policy. If an employee fails to reschedule and attend the appointment, he/she will be subject to whatever sanctions may be available under the Colorado Workers' Compensation Act.
- Communicating with Supervisor: After each visit to the Designated Provider, employees are expected to return to work and provide their supervisors with a copy of the Physician's Report of Workers' Compensation Injury form, which provides information on restrictions, work status, and any follow-up needed. The supervisor may make a copy of the form for his/her files.
- Procedures for Surgery: If a work-related injury requires surgery, TRISTAR must authorize it (except for emergencies). The Designated Provider will obtain authorization



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from TRISTAR. If surgery is authorized, the employee needs to do the following:

1. Inform his/her supervisor of the date of the surgery, when he/she may be returned to restricted duty, and the estimated recovery time for return to full duty.
2. Inform the City of Loveland Risk Management Division of the surgery date to help make sure that the City of Loveland Risk Management Division has the information to notify TRISTAR, City of Loveland Human Resources Department (HR), and City of Loveland Payroll Division regarding the start of lost time.

- Procedures for Lost Time: Only the Designated Provider can place an employee off work and it must be done in writing. Employees may not put themselves off work and receive workers' compensation wage replacement benefits. If an employee is returned to work, but does not think he/she is able to work due to pain or discomfort, he/she must contact the Designated Provider and discuss being placed off work. Employees will be required to use other leave accruals for any unauthorized lost time.

Supervisor Responsibilities

- Reporting an Injury: Upon learning of an employee's injury, the supervisor or the person in charge shall report the injury by the next business day to the City of Loveland Risk Management Division regardless of whether or not medical treatment was sought. If the employee has been put off work by the Designated Provider, the supervisor is to contact the employee to obtain any information needed to complete the injury report. If that is not possible, the supervisor shall report the injury to the City of Loveland Risk Management Division with the information he/she has available.
Injury reporting should be done using the City of Loveland workers' compensation intranet reporting system. If a supervisor cannot access this system, he/she needs to complete the Employee Initial Report of Injury form which can be found in the City of Loveland intranet system under Finance/Risk Management.
- Informing Employees About Choice of Providers: Per state law, supervisors must provide the injured worker information on his/her available choices of Designated Providers each time an employee has an injury that requires medical attention regardless of when the employee last received such information.
- Contacting Employees Off Work: If an employee has been placed off work by a Designated Provider, the supervisor shall keep in contact with him/her to keep apprised of how treatment is progressing, when he/she is scheduled for his/her next appointment, when he/she is expected to return to work, etc.
- Day of Injury: Unless the injury occurs towards the end of the employee's shift, the employee is expected to return to work, unless directed otherwise, in writing, by the Designated Provider. If the Designated Provider places the employee off work, the tracking of workers' compensation lost-time hours does not begin until the next day and the employee is paid his/her regular pay for the day of the injury.
- Finding Transitional Duty: If an employee has been released to work by the



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Designated Provider, the supervisor is expected to try to find transitional duty work that meets the employee's restrictions. If the employee is able to perform his/her regular job, with or without modifications, the supervisor is to return the employee to his/her job. If a simple modification is needed, the supervisor shall complete the modification and return the employee to work.

Transitional duty can be the employee performing part of his/her regular duties and/or other work, whether the work is full time or part time. If work is not available in the supervisor's division, the Division Chief should check whether work is available in other divisions. If the employee is provided with transitional duty, the supervisor shall complete with the employee the transitional duty form supplied by the City of Loveland Risk Management Division and return it to the City of Loveland Risk Management Division as soon as possible.

If there is no transitional work or only part-time work can be found, the supervisor must inform the City of Loveland Risk Management Division immediately. Supervisors shall only allow the employee to perform work that meets the restrictions. Supervisors shall inform the City of Loveland Risk Management Division when an employee returns to work (regular or transitional duty) after being off work to help ensure that the employee is properly paid and that the City of Loveland Risk Management Division can submit the required report to TRISTAR.

- **Reviewing Treatment Paperwork:** If an employee is working, the supervisor shall require from him/her the Physician's Report of Workers' Compensation Injury form received from the Designated Provider so that the supervisor may review any work restrictions given and follow-up appointments scheduled.
- **Managing Time Off for Medical Treatment:** Supervisors may require employees to schedule appointments at the beginning or end of a shift to better meet departmental needs. Medical appointments for benefited employees are considered time worked (paid) in calculating overtime, if the employee is working. Employees can be required to "flex" these hours so that these hours do not result in an overtime situation or be required, if feasible, to schedule appointments during his/her working hours.
- **Cooperation:** Supervisors shall cooperate with the City of Loveland Risk Management Division and/or TRISTAR to complete or provide any paperwork that may be required, including, but not limited to, Transitional Duty Form, witness reports, or additional information on the injury.

Transitional Duty

If an employee is released to work, but the Designated Provider imposes restrictions, he/she will be returned to his/her job, if it can be done within his/her restrictions. If an employee is released to work, but cannot perform his/her regular job due to restrictions, he/she may be placed in a temporary transitional duty position, if one is available. Once an employee is released to



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work, it is his/her responsibility to get to work even if he/she has not been released to drive. In any event, once an employee returns to full-time work, workers' compensation wage replacement benefits end.

An employee in a transitional duty position will receive his/her regular rate of pay for hours worked. The Authority continues to pay its portion of medical, dental, life, and disability insurance coverage for an employee on transitional duty as it does when the employee is in his/her regular position regardless of the hours worked. An employee must continue to pay his/her portion of any insurance premiums while on transitional duty. Vacation, holidays, and medical leave will accrue during transitional duty at the same rate as when the employee was in his/her regular position regardless of hours worked. Designated holidays will be paid while on transitional duty regardless of hours worked.

If no transitional duty work is available, an employee will be put off work until a transitional duty assignment becomes available that meets his/her work restrictions or he/she is released by the Designated Provider to full duty. A transitional duty position may be re-evaluated after each visit to the Designated Provider and change as physical limitations change. If an employee refuses a transitional duty assignment, workers' compensation wage replacement benefits will be terminated in accordance with the Colorado Workers' Compensation Act.

Transitional Duty assignments are temporary and are intended to assist an employee return to work at his/her normal job duties. **At no time shall transitional duty** assignment(s) exceed a total of twelve consecutive months or eighteen months of intermittent duty for any single injury/illness. If an employee is no longer eligible for transitional duty, a representative from the City of Loveland Human Resources Department will coordinate the evaluation of his/her employment options with the Authority.

If an employee is placed in a transitional duty assignment, he/she will be required to sign a form acknowledging his/her status. In addition, employees are expected to follow the Designated Provider's restrictions while working. The Authority makes every effort to accommodate medical restrictions and requires employees to share the responsibility of keeping themselves from being re-injured.

An employee must return to his/her normal job duties and normal schedule immediately upon the determination by the Designated Provider that he/she has reached MMI unless he/she is eligible leave under the Family and Medical Leave Act (FMLA) or he/she will be terminated. In any event, if a benefited employee is not able to perform his/her normal job duties due to permanent restrictions or impairments, he/she will undergo an ADA determination.

Time Off for Medical Treatment

- **Appointments:** For benefited employees, the Authority will pay for time off needed for authorized medical treatment whether the appointment occurs during regularly scheduled



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work hours or outside of those hours. Supervisors may require an employee to get appointments at the beginning or end of a shift.

Medical treatment for benefited employees is considered time worked (paid) in calculating overtime for employees that are working. An employee can be required to "flex" these hours so that the hours do not result in an overtime situation or schedule the appointments during his/her regular work day, if feasible. If a benefited employee has returned to work with restrictions and, as a result, is only working part time, but continues to receive his/her full pay, he/she must make medical appointments during the time which he/she is not working.

- Coding Medical Appointments: Time used for authorized medical appointments does not count towards the MAXIMUM hours of workers' compensation injury leave. For tracking purposes, payroll code 51 must be used concurrently with payroll code 02 on time sheets for medical appointments.

Workers' Compensation Injury Leave and Wage Replacement

- Lost Time Benefits Eligibility: If the Designated Provider states in writing that an employee is unable to work as a result of a work-related injury/illness, it is considered a "lost-time" injury and the employee may be eligible for workers' compensation wage replacement benefits. If an employee returns to work and subsequently is unable to work due to the same work-related injury/illness or the anticipated return-to-work date is postponed, the Designated Provider must again state in writing that the employee is unable to work. If an employee takes time off that has not been authorized in writing by the Designated Provider, he/she must use sick or other accrued leave for that lost time.
- How Wage Replacement Benefits Work: The Authority will supplement wage replacement benefits due under state law so that a benefited Authority employee receives 100% of his/her base salary for a limited period of hours for a work-related injury/illness (see table below) for lost time that has been certified by the Designated Provider. The following chart indicates the maximum number of authorized lost-time hours paid at 100% by the Authority:

Scheduled hours Per Week		Maximum Hours Paid at 100% by Authority
20-24	hours =	261
25-29	hours =	326.25
30-34	hours=	391.5
35-40	hours=	456.75
40	hours=	522
56	hours=	730



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When an employee reaches the maximum number of hours supplemented by the Authority, wage replacement benefits revert to the state's formula. The state's formula provides that employees be paid 2/3rds of his/her average weekly wage up to a cap, which is determined annually by the state. Employees will then receive wage replacement benefits directly from TRISTAR and may supplement this pay with leave accruals.

Under no circumstances shall an employee's net wages while on workers' compensation injury leave be more than he/she would have received if he/she had worked his/her regular hours. The Authority will deduct from the employee's pay any overpayment made by TRISTAR or the Authority. Workers' compensation wage replacement benefits are determined on base salary and do not consider overtime, on-call pay, or any other type of pay that is not worked.

- Coding Lost-time Hours: If an employee has been placed off work by a Designated Provider, timesheets must be submitted that indicate the authorized time lost from work. For tracking purposes, payroll code 46 must be used on timesheets to show any lost time.
- Day of Injury: Employees are expected to return to work following his/her initial visit with a Designated Provider, unless the injury occurs at the end or his/her shift or he/she is otherwise directed, in writing, by the Designated Provider. If the Designated Provider places the employee off-work, the employee will be paid his/her regular pay for that day and the tracking of lost-time hours will begin with the employee's next shift.
- Tracking Lost-time Hours: The tracking of workers' compensation lost-time hours for benefited employees is on a per-incident basis and begins with the date the employee is placed off work by the Designated Provider. The accumulation of paid workers' compensation hours does not start over at the beginning of each calendar year.
 1. The City of Loveland Risk Management Division and the City of Loveland Human Resources Department will track the hours missed due to an authorized lost-time injury/illness to help assure that an employee does not exceed the time that he/she is eligible to receive 100% of his/her pay under the Authority's wage replacement benefits.
 2. HR will notify the employee in writing when he/she is approaching the maximum number of workers' compensation hours that the Authority will supplement. When an employee reaches the maximum number workers' comp hours, the Authority will no longer supplement the wage replacement wages payable under the Colorado Workers' Compensation Act.
 3. The City of Loveland Risk Management Division will inform TRISTAR when an employee is reaching the limit of hours being supplemented by the Authority, so that TRISTAR can arrange to pay the employee directly the 2/3 of his/her average weekly wage up to the state cap.

- When Workers' Compensation Wage Replacement Ends:



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1. Designated Provider provides the employee with a written release to return to regular work; or
2. Designated Provider gives a written release to return to work with restrictions and the employee begins working a transitional duty position;
3. The Authority offers transitional duty and the employee refuses the work.

- Wage Replacement Benefits for Terminated Employees Eligible for Lost-Time: If an employee is terminated from the Authority while receiving workers' compensation wage replacement benefits, he/she is only entitled to receive the benefits due in accordance with the Colorado Workers' Compensation Act and will receive such payments directly from TRISTAR.
- Family Medical Leave Act (FMLA): Employees with lost-time injuries are subject to the FMLA. The FMLA runs concurrently with the time an employee is off work due to a work-related injury/illness.
- Calculating Lost Wages From Other Employment: Employment outside the Authority is included in the calculation of the state's average weekly wage formula paid by TRISTAR, but the Authority will not pay for wages lost at second jobs.
- Lost-Time for Firefighting Volunteers and Non-benefited Employees: Firefighting volunteers and non-benefited employees are eligible only for the wage replacement benefits provided by TRISTAR under the Colorado Workers' Compensation Act.
- How Lost Wages Are Taxed: Workers' compensation wage replacement benefits paid directly by TRISTAR are not subject to income tax or FICA withholding. The Authority's supplemental workers' compensation wage replacement benefits, however, are subject to taxes.
- Payment of Insurance Premium: The Authority continues to pay its portion of medical, dental life and disability insurance coverage for employees on workers' compensation injury leave as it does with other employees not on leave. An employee must continue to pay his/her portion of any insurance premium while on leave.
- Employee Actions that Can Reduce Wage Replacement Benefits: The Colorado Workers' Compensation Act states that disability indemnity payment for lost wages shall be reduced by 50 percent when an injury:
 1. Is caused by the willful failure of the employee to use safety devices provided by the employer; or
 2. Results from the willful failure to obey any reasonable rule adopted by the Authority for safety, such as the requirement of wearing safety belts; or
 3. Results from employee intoxication.

An employee may also be penalized for late reporting. The Authority requires that all



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work-related injuries/illnesses be reported by the next business day. Under the Workers' Compensation Act, if a claim is not reported within four working days, lost-time wages may be reduced one day for each day's delay in reporting.

If an employee has his/her wages reduced as a result of any penalties allowed by the state, the Authority will not supplement the employee's wage replacement benefits and he/she will receive only what is available to him/her from TRISTAR.

End of Treatment

When an employee reaches MMI, generally treatment ends. Occasionally, some maintenance treatment is provided. If it appears to the Designated Provider that the employee may have permanent restrictions, a Functional Capacity Evaluation (FCE) may be ordered to ascertain what restrictions are necessary and, if necessary, assist the Authority in evaluating whether or not an employee is able to perform the essential functions of his/her job.

After an employee reaches MMI, if the Designated Provider determines that there is a loss of function as a result of the workers' compensation injury/illness, the employee will receive an impairment rating that is calculated in accordance with the American Medical Association Guide to Evaluation of Permanent Impairment, Third Edition. The impairment rating is converted by TRISTAR into a dollar amount pursuant to the Colorado Workers' Compensation Act. The amount paid for the impairment is based on several factors. One such factor is the body part involved. Therefore, the payment amount for an injury involving a finger is different than what is paid for a neck injury. The State's formula includes an age factor, the total disability rate (determined by the employee's average weekly wage under State law), and the impairment rating percentage; thus, two people with the same impairment rating can receive different dollar amounts.

Risk Management Responsibilities

- Reporting Claims: Upon receipt of the report of a work-related Injury/illness, The City of Loveland Risk Management Division files the workers' compensation claim with TRISTAR.
- Communicating with Others: The City of Loveland Risk Management Division assists employees or supervisors with questions regarding an employee's workers' compensation claim or treatment. The City of Loveland Risk Management Division communicates with the Designated Providers and Insurer on the status of the employee's recovery.
- Coordinating Employee Lost Time: When an employee is put off work by the Designated Provider, The City of Loveland Risk Management Division does the following:
 1. Notifies TRISTAR of the date that the employee was put off work. TRISTAR then starts tracking the employee's time off work.
 2. Informs City of Loveland Human Resources Department and Payroll Division that an employee is losing time, so that he/she can be properly paid and City of Loveland Human Resources Department can notify the employee about FMLA.
 3. Provides the employee information on how lost time works and sends



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him/her a summary of this information.

4. Communicates with City of Loveland Human Resources Department and TRISTAR when an employee is getting close to the maximum hours to be paid at 100% by the Authority.
5. Works with City of Loveland Human Resources Department and Payroll Division regarding discrepancies with an employee's lost time under workers' compensation.
6. Informs City of Loveland Human Resources Department, Payroll Division, and TRISTAR when an employee has returned to work.

- Assisting with Transitional Duty: When an employee is returned to work with restrictions, City of Loveland Risk Management Division will:
 - a) Work with the supervisor on developing transitional job duties, if needed, and provide the transitional duty form to the supervisor. If no transitional work is available in the employee's division, the employee's supervisor will try to find a transitional duty job elsewhere in the Authority.
 - b) Obtain authorization from the Designated Provider for the transitional work, as needed.
 - c) Send a transitional job offer letter, as needed, to an employee who has been off work due to his/her work-related Injury/illness and has been released to work a transitional duty job.
- Recordkeeping: City of Loveland Risk Management Division keeps the records for workers' compensation claims in accordance with the Authority's retention schedule.

TRISTAR Procedures

TRISTAR'S process includes and encourages injured workers to report their own claims to the CSD Pool's toll free number 800-318-8870 Ext. 1 which is staffed 24/7 year round. Implementing a new injured worker telephonic 27/7 reporting program should first include a review of all your internal policies that may be modified for your organization companywide and employees should be notified of procedural changes.

If injured workers report injuries telephonically, TRISTAR will ask the injured worker questions required to produce the First Report of injury. TRISTAR will then email a completed First Report to the district's designated WC contact and the TRISTAR adjuster along with the assigned claim number. Please advise who will be the district's designated contact for Workers' Comp. Please note that if you prefer to complete the First Report of Injury instead of having injured workers or the district contact report telephonically, please see below.

Here is a link to the [CSD Pool WC Claim Forms](#) which are PDF fill-able.



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1. Under the Manuals Tab, look at the right-hand column. **Section 7 - Claim Procedures and Forms**
2. At the time of an employee injury, complete the following forms from the list:
 - a. Employers First Report of Injury
 - b. Medical Info. Release Authorization
 - c. First Fill Temporary Prescription Card
 - d. Wage Statement (if time loss/Indemnity claim)
 - e. Supervisor's Accident Report
 - f. Employee Notice of Injury
3. Employee/Claimant must sign the Designated Preferred Medical Provider Form (Please let us know if you need a copy)

The primary forms that must be returned to TRISTAR as soon as possible are listed above and should be scanned and emailed to CSDPool@tristargroup.net. You may still fax claims reports to **720-962-0301**. If you mail claim forms, please send to: **TRISTAR Risk Management at P.O. Box 2805, Clinton, IA 52733-2805**.

A list of the individual WC claims contacts can be found at **TRISTAR Claims Staff**. The Branch Manager is Anne **Schrader**. Her contact information is listed below.

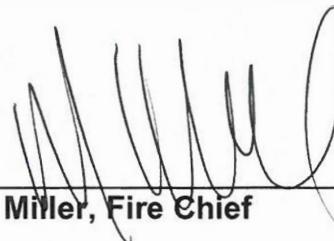
TRISTAR Risk Management Ph: 720-962-0222 Ext. 3212 FAX: 303-861-1022

Email: anne.schrader@tristargroup.net

VI. OTHER RELATED REGULATIONS & PROCEDURES:

None

VII. LFRA FIRE CHIEF SIGNATURE:



Mark Miller, Fire Chief



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Exhibit A

TRISTAR

INSURANCE GROUP

TO REPORT A NEW CLAIM:

Employees: Call the toll-free Claims Line at (800) 318-8870 ext. 1

Members: send claim forms to CSDPool@tristargroup.net or call Branch Manager Anne Schrader at (720) 962-0222 ext. 3212.

CSD Pool Workers' Compensation Dedicated Claims Team

Main Phone: 720-962-0222 / Fax: 720-962-0301

Email: CSDPool@tristargroup.net

Anne Schrader, Branch Manager - Colorado, Ext. 3212

Email: anne.schrader@tristargroup.net

Jennifer Rindahl, WC Indemnity Adjuster (for Members A-L) Ext. 3213

Email: jennifer.rindahl@tristargroup.net

Michael Hawkins, WC Indemnity Adjuster (for Members M-Z) Ext. 3206

Email: michael.hawkins@tristargroup.net

Jonathan Beck, WC Medical Only Adjuster, Ext. 3231

Email: jonathan.beck@tristargroup.net

Dee Martinez, Nurse Case Manager, Ext. 4413

Email: dee.martinez@tristargroup.net

TRISTAR Risk Management



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Mail Claims to: P.O. Box 2805, Clinton, IA, 52733-2805