



Employee Injury or Illness Quick Reference Guide

Procedures for Emergency Situations:

1. Immediately Call Campus Police

- From cell: 609-771-2345
- From campus phone: 911
- They will contact emergency responders to provide aid, and transport to an emergency room if necessary

2. Notify your supervisor and Human Resources

- As soon as possible after injury
- Human Resources:
609-771-2118 or 609-771-3414

3. Complete the required paperwork

- State of New Jersey Employer's First Report of Accidental Injury or Occupational Disease (RM-2)
- TCNJ Worker's Compensation Initial Report of Employee Injury
- Request for Receiving or Declining State-Authorized Medical Treatment

Procedures for Non-Emergency Situations:

1. Immediately report injury/illness to your supervisor

2. Supervisor will instruct you to call Human Resources at:

- 609-771-2118 or 609-771-3414

3. Complete the required paperwork

- State of New Jersey Employer's First Report of Accidental Injury or Occupational Disease (RM-2)
- TCNJ Worker's Compensation Initial Report of Employee Injury
- Request for Receiving or Declining State-Authorized Medical Treatment

4. Obtain medical treatment, if requested

- During normal business hours, Monday through Friday, 8:30AM-4:30PM, the HR Benefits Representative will arrange for treatment at Concentra Urgent Care or other authorized treatment facility
- Outside of normal business hours, refer to the section below



EMPLOYEE INJURY OR ILLNESS WORKER'S COMPENSATION PROCEDURES

Who is eligible?

Employees who incur work related injuries or illnesses are eligible to receive medical treatment through the New Jersey Worker's Compensation Program. Under this program, the employee's initial medical treatment is scheduled through the Office of Human Resources and coordinated by Horizon Casualty Services, a managed care service contracted by the State of New Jersey.

There are no out-of-pocket expenses for the medical services authorized by Horizon Casualty Services. Unauthorized medical expenses elected by the employee shall, however, become the sole responsibility of the employee. The procedures for obtaining treatment for work related injuries or illnesses are provided in the following sections. It is important to read and follow the procedures as outlined to ensure prompt medical treatment.

What do I need to do?

Immediately report ALL injuries, even if treatment will not be requested. This can help to prevent the potential for a denied Worker's Compensation claim, if you decide to report at a later date.

Employee Procedures for Receiving Treatment and Reporting Your Injury/Illness

► **Emergency Situations, at any time**

Examples: life or limb is threatened, unconscious person, sustained a trauma, burns, other injury/illness that may require immediate medical attention at an emergency room or trauma center. (This is not an all-inclusive list.)

Step 1: Immediately call **Campus Police at 609-771-2345 using a cell phone or 9-1-1 from any hard-wired campus phone**. Campus Police will contact emergency responders to provide aid, and transport to an emergency room if necessary.

Step 2: You are responsible for reporting your injury to your supervisor **and** the Office of Human Resources **as soon as possible**. Call the Office of Human Resources at 609-771-2118 or 609-771-3414 during normal business hours, Monday through Friday, 8:30AM-4:30PM.

Step 3: Complete the required paperwork (**State of New Jersey Employer's First Report of Accidental Injury or Occupational Disease (RM-2)**, the **TCNJ Worker's Compensation Initial Report of Employee Injury**, and the **Request for Receiving or Declining State-Authorized Medical Treatment**). The forms are on the Office of Human Resources website. (The employee or the supervisor may print out the forms or a hard copy can be provided to the employee at the Office of Human Resources, Administrative Services Building, Suite 101). Your claim of accidental injury or occupational disease will be reported to the NJ Division of Risk Management and a claim number will be assigned.



Step 4: A Horizon Casualty Services Case Manager will be assigned to you and will serve as your personal service representative. The Case Manager will contact you to address concerns regarding your medical care. The Case Manager is also responsible for coordinating your treatment with the doctor or specialist.

Step 5: When you are released from the treating physician's care, you are required to submit medical clearance documentation from the doctor who is treating you, which allows you to return to work. **You must communicate with the Office of Human Resources and ensure this documentation has been received before reporting to your work site.**

► **Non-Emergency Situations, during normal business hours**

Examples: any injury/illness that is not an emergency and can be treated at an urgent care facility (not an ER), sprains, contusions, minor cuts, chemical exposure, needle stick, other minor injuries, etc. (This is not an all-inclusive list.)

Step 1: Immediately report your injury or illness to your supervisor.

Step 2: Your supervisor will instruct you to call the Office of Human Resources at 609-771-2118 or 609-771-3414. Normal business hours for the Office of Human Resources is Monday through Friday, 8:30AM-4:30PM.

Step 3: Complete the required paperwork (**State of New Jersey Employer's First Report of Accidental Injury or Occupational Disease (RM-2)**, the **TCNJ Worker's Compensation Initial Report of Employee Injury**, and the **Request for Receiving or Declining State-Authorized Medical Treatment**). The forms are on the Office of Human Resources website. (The employee or the supervisor may print out the forms or a hard copy can be provided to the employee at the Office of Human Resources, Administrative Services Building, Suite 101). Your claim of accidental injury or occupational disease will be reported to the NJ Division of Risk Management and a claim number will be assigned.

Step 4: Obtain medical treatment, if requested. The HR Benefits Representative will arrange for you to be treated at **Concentra Urgent Care** (2542 Brunswick Avenue, Lawrenceville, NJ 08648, (609) 493-5440) or at another approved Initial Treating Provider (A complete list of authorized treatment facilities may be viewed in the Office of Human Resources).

Step 5: The treating physician at Concentra, or other authorized treatment facility, will carefully examine you, treat your injury/illness, and determine if work restrictions are necessary. (If so, the Office of Human Resources will be informed and will inform your supervisor). If necessary, you will be referred to a participating specialist.

Step 6: If you are evaluated or receive treatment at an Initial Treating Provider other than Concentra, it is your responsibility to provide your Work Activity Status Report (or similar document) to the Office of Human Resources following **every visit** for treatment/evaluation. This medical documentation will detail any work restrictions (see below for more information about work restrictions and accommodations). Each time you see your treating physician you will receive a Patient Treatment and Referral form. Submit this form in person, via email or fax to the Office of Human Resources **within 24 hours of receipt**.



Step 7: A Horizon Casualty Services Case Manager will be assigned to you and will serve as your personal service representative. The Case Manager will contact you to address concerns regarding your medical care. The Case Manager is also responsible for coordinating your treatment with the doctor or specialist.

Step 8: When returning to work for the first time after receiving treatment/evaluation for your injury/illness, you are required to submit medical clearance documentation from the doctor who is treating you, which allows you to return to work. **You must communicate with the Office of Human Resources and ensure this documentation has been received before reporting to your work site.**

► **Non-Emergency Situations, outside of normal business hours**

In the event that you experience a **Non-Emergency** and are seeking immediate treatment, you may visit an authorized initial treating hospital emergency room, which are open at all times. The closest to TCNJ are:

Capital Health Medical Group
750 Brunswick Ave.
Trenton, NJ 08638
Phone: (609) 394-6063

OR

Capital Health Medical Group
1 Capital Way
Pennington, NJ 08534
Phone: (609) 303-4000

The employee and supervisor must complete the required paperwork (**State of New Jersey Employer's First Report of Accidental Injury or Occupational Disease (RM-2)**, the **TCNJ Worker's Compensation Initial Report of Employee Injury**, and the **Request for Receiving or Declining State-Authorized Medical Treatment**) and submit the forms to the Office of Human Resources as soon as possible.

IMPORTANT INFORMATION

Work Restrictions & Accommodations: Your treating physician at Concentra, or other authorized treatment facility, will carefully examine you, treat your injury/illness, and determine if work restrictions are necessary.

- **If you are evaluated at Concentra**, the Office of Human Resources will receive a Work Activity Status Report from Concentra. If restrictions are indicated on the Work Activity Status Report, the Office of Human Resources will inform your supervisor to determine if the restrictions can be accommodated. You will be notified if you are able to return to work with accommodations. Do not return to work until you are notified.
- **If you are evaluated at an Initial Treating Provider other than Concentra**, it is your **responsibility** to provide your Work Activity Status Report (or similar document) to the Office of Human Resources. If restrictions are indicated on the Work Activity Status Report, the Office of Human Resources will inform your supervisor to determine if the restrictions can be accommodated. You will be notified if you are able to return to work with accommodations. Do not return to work until you are notified.



Personal Case Manager: Injured employees are assigned a personal case manager, in addition to a Worker's Compensation Primary Care Physician (PCP). Each case manager is experienced in managing medical care and return-to-work plans for injured workers. They will serve as a personal service contact with Horizon Casualty Services to help facilitate your recovery. **You may contact your case manager with any questions at 1-800-985-7777.**

Participating Pharmacies: Any medication prescribed by your PCP can be obtained at Blue Cross Blue Shield member pharmacies throughout the state. More than 98 percent of New Jersey pharmacies are in network.

Worker's Compensation Identification Card: A copy of a State of New Jersey Worker's Compensation Identification Card can be accessed online with the required paperwork (**State of New Jersey Employer's First Report of Accidental Injury or Occupational Disease (RM-2)**, the **TCNJ Worker's Compensation Initial Report of Employee Injury**, and the **Request for Receiving or Declining State-Authorized Medical Treatment**). Once you receive your claim number from Human Resources, it can be placed on the ID card. The ID card must be presented when you obtain medical services or prescription drugs in connection with a job-related injury or illness. You are the only person authorized to use the ID card. Please keep it with you at all times.

Questions and Concerns

Questions regarding any aspect of TCNJ's Worker's Compensation Program may be directed to the Office of Human Resources at 609-771-2118. You may also contact a Horizon Casualty Services representative at 1-800-985-7777 or the State of New Jersey Division of Risk Management at 609-292-3475.

Concentra Urgent Care

Address: 2542 Brunswick Pike, Lawrence Township, NJ 08648
Phone: (609) 493-5440
Hours: Monday – Friday: 8:00AM – 5:00PM
(X-rays conducted only if arriving before 4:00PM)
Saturday & Sunday: Closed

Directions from TCNJ: Start out going **northeast** on Pennington Rd/NJ-31 toward Lake Blvd.

1. Turn **right** onto Ewingville Rd/County Hwy-636.
2. In 1.24 miles, turn **left** onto Eggerts Crossing Rd.
3. In 1.46 miles, turn **right** onto Lawrence Rd/US-206 S. Continue to follow US-206 S.
4. In 0.5 miles, turn **left** at the traffic light onto Gainsboro Rd.
5. Then 0.5 miles, turn **right** onto Princeton Pike/County Hwy-583.
6. In 0.4 miles, turn **left** onto Texas Ave.
7. In 0.4 miles, turn **left** onto US Highway 1/US-1 Bus N.
8. Immediately turn **right** into the parking lot for Concentra Urgent Care

Inform Human Resources if transportation is needed. Concentra can provide transportation using a ride sharing service (Uber, Lyft, etc.), at no cost to the employee if the Office of Human Resources is notified that transportation is needed.



**WORKER'S COMPENSATION
INITIAL REPORT OF AN EMPLOYEE INJURY**

Horizon Casualty Insurance Claim #: _____

Name:	SS#:	Date of Birth:
Home Address:	Job Title:	Home Tele #:
Department:	Supervisor Tele #:	Work Tele #:
Supervisor Name:	Regular Work Shift:	Start Time on Day of Injury:

Date of Injury: _____ Time of Injury: _____ Date Injury Was Reported: _____

Description of Injury: _____

Body Part(s) Injured: _____

Related Previous Injury: _____

RELEASE OF INFORMATION

I HEREBY AUTHORIZE THE RELEASE OF THIS MEDICAL INFORMATION TO THE INSURANCE CARRIER, MY EMPLOYER, AND/OR AGENTS OF MY EMPLOYER.

Employee Signature: _____ Date: _____ Time: _____

BELOW COMPLETED BY HUMAN RESOURCES

Disposition:

_____ Employee declined medical treatment, and returned to work

_____ Employee received First Aid Only, declined medical treatment, and returned to work

_____ Employee sent to Emergency Room at Capital Health Medical Center- Hopewell (1 Capital Way, Pennington, NJ 08534) or any other provider on list of approved hospitals (See approved list of Initial Treating Hospitals)

_____ Employee sent to Concentra (2542 Brunswick Ave, Lawrenceville, NJ 08648) or any other provider on approved list of Initial Treators (See approved list of Initial Treators)

Benefits Representative Signature: _____ Date: _____

Distribution: Employee, Supervisor, TCNJ Environmental Health and Safety, TCNJ Office of Human Resources



The College of New Jersey
Request for Receiving or Declining State-Authorized Medical Treatment

Employee Name (Please Print): _____

- I am requesting treatment with a State-authorized physician at this time as a result of the incident described in the attached form, Employer's First Report of Accidental Injury or Occupational Disease (RM-2).

I understand that I must submit medical documentation from the State physician to the Human Resources Representative immediately after I have seen the State-authorized physician. The documentation must indicate the diagnosis, prognosis, treatment plan, limitations, if any, and duration of absence from work, as well as the projected return to work.

- I am NOT requesting treatment for my injury/illness at this time. I understand that by not requesting treatment at this time, the State will have no information about my physical condition as a result of the incident detailed in the attached form, Employers' First Report of Accidental Injury or Occupational Disease (RM-2). If I seek unauthorized treatment on my own, I will be responsible for any medical bills incurred. I do understand that if my condition worsens or I feel that I need to see a State-authorized physician, I am to contact the Human Resources Representative prior to seeing a State-authorized physician.

Signature: _____

Date: _____

Time: _____

TREATMENT FOR YOUR WORK-RELATED INJURY

We're here to help you. Your employer has chosen Horizon Casualty Services, Inc. (HCS), a subsidiary of Horizon Blue Cross Blue Shield of New Jersey, to manage your workers' compensation claim. We carefully select doctors, hospitals and other health care professionals who have expertise in treating work-related injuries and illnesses for your treatment.

For information, call or visit:

- ◆ HCS at **1-800-985-7777** or **HorizonCasualty.com**, and select *State of New Jersey Injured Worker under Most Popular*.
- ◆ State of New Jersey Division of Risk Management at **1-609-292-3475** or **state.nj.us/treasury/riskmgmt/workers-comp.shtml**.

Save money

You will pay **NO OUT-OF-POCKET COSTS** if you:

- ◆ Use medical services authorized by us.
- ◆ Fill your prescription using the ID card below at participating pharmacies, such as CVS/pharmacy, Walmart, Rite Aid and most independent pharmacies. HCS contracts with Prime Therapeutics to serve as its pharmacy benefits manager.

You may be responsible to pay **ALL OF THE COSTS** if you:

- ◆ Use medical services not authorized by us.
- ◆ Fill prescriptions at nonparticipating pharmacies.
- ◆ Use the attached ID card for medication not prescribed by your State of New Jersey-authorized doctor for your work-related injury. If you fill a prescription not prescribed by your authorized doctor for your work-related injury, you may be responsible for reimbursing the State of New Jersey Division of Risk Management for the cost.

In case of an emergency

Immediately call 911 or go to the nearest Emergency Room. Report your injury to your supervisor as soon as possible (within 24 hours).

HCS Personal Case Worker

You can call your HCS personal case worker during normal business hours to discuss any aspect of your workers' compensation medical care. If your HCS personal case worker has not contacted you, please call TCNJ Office of Human Resources at your earliest convenience.

Your satisfaction matters to us

If you have questions or concerns, call **1-800-985-7777**. We will make every effort to resolve your concerns. Visit **HorizonCasualty.com** to review your rights and responsibilities.

Horizon Casualty Services provides administrative claims payment services only and does not assume any financial risk or obligations with respect to claims.

Horizon Casualty Services, Inc. (HCS) is a subsidiary of Horizon Blue Cross Blue Shield of New Jersey. Services and products may be provided through HCS or Horizon Blue Cross Blue Shield of New Jersey, each of which is an independent licensee of the Blue Cross Blue Shield Association. The Blue Cross® and Blue Shield® names and symbols are registered marks of the Blue Cross Blue Shield Association. The Horizon® name and symbols are registered marks of Horizon Blue Cross and Blue Shield of New Jersey. © 2021 Horizon Blue Cross Blue Shield of New Jersey.

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Workers' Compensation ID Card

Claim Number:

Employee Name:

Employer: **The State of New Jersey**

Rx Group #: **CS0199601** Date of Injury: **0**

RXBIN: **016499** RXBPCN: **HZNWC**

Visit **HorizonCasualty.com** to view your rights and responsibilities.

Important Information

1-800-985-7777

This card is for information only and is not a guarantee of benefits.

Mail all bills to:

Horizon Casualty Services
Attn: Claims Department
3 Penn Plaza East
Newark, NJ 07105

Please call **1-800-985-7777** with any questions.

Pharmacists, please call **1-877-686-6875** with any questions.

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