

Temporary Modified Duty (TMD)/Return to Work (RTW)

Funds Utilization:

Workers' Compensation program has funds available to cover the salary cost for injured employees with a compensable claim, who meet the following criteria:

RTW Funds to cover salary cost for injured employees on temporary modified duty within the home department are available only when all of the following criteria are met:

1. Employee has filed a compensable Workers' Comp claim, is actively treating with one of the Authorized Treating Physician, and has temporary restrictions.
2. Medical restrictions prevent employee from performing their regular job duties.
3. Department has sufficient alternative work (at least 50% of normal work hours) within the employee's medical restrictions.
 - Please note that hours offered do not have to be the same as employee's normal work schedule.
4. Department must provide a list of regular job duties and a list of the alternative job tasks proposed within the restrictions to the Workers' Comp office.
5. Workers' Comp office receives a signed TMD letter from department (template available online at <http://rmi.prep.colostate.edu/workers-compensation/forms/>) along with the signed confirmation that the Employee RTW Guide was reviewed with the employee.
6. While the TMD letter needs to reflect the actual return-to-work date, transfer of salary to RTW funds is effective the day the signed TMD letter is received by the Workers' Comp office and cannot be backdated.
7. Weekly timesheets are required in order to utilize the RTW funds and need to be sent to the Workers' Comp office by Tuesday the following week.

Documents can be sent to:

Email: workcomp@colostate.edu.

Fax: (970) 491-4804

Campus Mail: 6002 Campus Delivery

RTW funds can not be used when:

- TMD letter was not received by Workers' Comp office
- Employee is working regular job duties for more than 50% of the day
- Employee is not complying with medical treatment (i.e. missing appointments)
- Employee is working overtime
- Timesheets are not turned in on a weekly basis
- Employee is off work (taken off work by physician, no work available, personal leave)
- Probationary employees and employees whose claim is on a Notice of Contest cannot be on TMD/RTW funds over 30 days
- Employee is released to full duty or assigned permanent restrictions

Any necessary corrections requiring a labor distribution (i.e. overtime/comp time payout, date allocations) must be done within 30 days of notice.

Non-compliance with items 1-7 above will forfeit the department's use of RTW funds. Please note that once an employee is taken off RTW funds for any of the reasons listed above, employee cannot be placed back onto RTW funds for the remainder of the claim.

Abuse of RTW funds by departments may result in permanent loss of RTW funds on all future departmental WC claims.

RETURN TO WORK WORKERS' COMPENSATION TEMPORARY MODIFIED DUTY GUIDE

The following information provides the employee and department with information, guidelines and expectations of the Temporary Modified Duty (TMD) program. The goal of CSU's Workers' Compensation program is to work cooperatively with our injured employees, their respective departments, and the medical providers to return them to full duty in a timely and safe manner.

While the guide will answer some of your questions, please contact us if you have any questions or need any assistance with the Workers' Compensation process. Kenda Weigang, WC Manager, can be reached at (970) 491-4832 or at kweigang@colostate.edu. The main WC office number is (970) 491-5110. Additional Information is also available on our website: <http://rmi.prep.colostate.edu/workers-compensation/>

- Complete a weekly timesheet. Timesheets need to be turned in weekly, outlining hours worked and missed during work schedule. If you missed time due to your work-related injury, supporting documentation **must** be attached to the timesheet. You may obtain this form on line at <http://rmi.prep.colostate.edu/workers-compensation/lost-time/> or by contacting our office.

Submit timesheets to Departmental HR and to Risk Management at General Services Building

via e-mail to: workcomp@colostate.edu

interoffice mail: Campus Delivery 6002

fax to: (970) 491-4804.

Your time sheets need to be received by the Risk Management office no later than Tuesday of each week.

Please note:

- Without documentation from the medical provider attached to your timesheet, showing that you attended an appointment or were taken off work**, you will not be granted paid injury leave.
 - Delay in reporting missed time and lack of documentation for injury-related missed time will forfeit wage coverage.
 - Hourly employees are not paid for time taken for time to attend medical appointments
- Unless you are taken off work by one of CSU's Authorized Treating Physicians (ATP), you are expected to continue to work. After your department reviews your work status report, you may continue to work in your department, performing work within your physical abilities, or placed **temporarily** elsewhere within the CSU system.
- If your department does not have work for you, contact Risk Management **immediately** at (970)491-5110 or (970)491-4832 for an alternative/temporary assignment.
- If you are released to return to work, whether modified duty or full duty, and choose not to return to work, wage replacement benefits will be discontinued or jeopardized. If you are not taken off work by the Authorized Treating Physician, and fail to report for work, it will be your own personal time.
- To prevent further injury, it is important that you work within the restrictions established by the Authorized Treating Physician. If you are asked to perform work outside of your restrictions, please contact the Workers' Comp office immediately at (970)491-5110 or (970)491-4832, so that we may assist you.

- The Workers' Compensation Program has a loan closet of equipment that is available for use while recovering from an injury. Please contact us if you would like us to look at your job site and/or provide you with any equipment.
- In order to be paid through Workers' Compensation or CSU injury leave for a missed day, or leaving during your work shift**, the ATP must take you off work. If you do not report to work due to your injury, or leave due to discomfort, you will need a note from the ATP taking you off work; **otherwise it will be your own personal leave.**
- Medical Appointments:
 - Hourly and non-benefitted full time employees are not paid for time taken for medical appointments
 - When your work schedule allows, make appointments outside of normal work hours or times that least impact workflow.
 - Unless appointments are made at the beginning or end of the work shift, employee must report to work before and after appointments for leave to be considered for compensation. If the employee does not report to work, any time missed that day will be personal leave.
 - Medical appointments without documentation will not be considered for compensation.
- You cannot take injury leave for time taken to attend a medical appointment when you are not scheduled to work, or during days you take off as personal time.
- You are to provide your supervisor with a copy of the work status sheet **within 24 hours** of seeing the physician or prior to the next work shift. If you do not provide an updated report, you may be sent home on your own time until medical documentation of your current status is provided. **You must provide this information to your regular supervisor whether or not you are currently working in your department.**
- While on modified duty, you are expected to adhere to all CSU and departmental personnel rules and regulations.
- If you will not be at work on a given day, you are to contact your Modified Duty supervisor the Workers' Comp office at (970) 491-5110. You must contact them immediately if you are having any difficulty fulfilling your modified duty tasks.

Please confirm receipt of this letter and return to CSU Workers' Compensation by email, fax or in person.

Employee Printed Name

Employee Signature

Date



**Office of Risk Management and
Insurance Fort Collins,
Colorado 80523-6002
Phone: (970) 491-6745
Fax: (970) 491-4804
www.rmi.prep.colostate.edu**

Date: _____

To: Name: _____

Address: _____

City, State, Zip: _____

Dear _____

CSU is sorry about your recent work related injury and wishes you a speedy recovery. As a result of your injury, you have been placed on **temporary** work restrictions, and CSU has identified **temporary** modified duty work for you to perform. This letter is to request that you report for temporary modified duty on _____.

You will work _____ hours a week. Your work shift will be from _____ to _____, Monday through Friday, unless otherwise specified, _____ Your temporary modified duty will be with _____ located at _____ under the supervision of _____ phone number _____.

While performing modified duty, you are expected to adhere to all CSU personnel rules and regulations. You are still an employee of your home department and must keep your supervisor informed of your status following each physician visit and when you will be taking any leave time.

While on temporary modified duty you will be paid your regular hourly wage for the hours you work. If appropriate, your worker's compensation benefits will be adjusted accordingly. **If you choose not to accept this temporary assignment, please note that you will lose some or all wage replacement benefits.**

In order to be paid, you will need to complete a weekly time sheet. **For consideration of injury leave coverage, missed time must be accompanied by medical documentation** and submitted to your department and the Workers' Compensation Program, 140 General Services Building- Fax #491-4804 or scanned and emailed to workcomp@colostate.edu on a weekly basis.

Please note, this is not a change to your regular duty assignment but only a temporary set of duties and you will be moved around campus according to your restrictions and temporary tasks available. The main purpose of the modified duty program is to return employees back to their full duty position in a safe and timely manner.

If you have any questions regarding you worker's compensation benefits or modified duty program please call Kenda Weigang, Work Compensation Manager at (970) 491-4832. Please maintain contact with Kenda regarding you medical and return to work progress. Please contact her immediately if you are having any difficulties with your modified duty tasks or if your supervisor doesn't have work for you.

CSU looks forward to your continued employment and wish you a speedy recovery.

Acknowledgement of Modified Duty Offer: _____

Employee Signature: _____ Date: _____

CSU Representative: _____ Date: _____

