

# RECEIPT FORM INSTRUCTIONS

1. EVERY EMPLOYEE MUST COMPLETE A RECEIPT FOR THE EMPLOYEE PROCEDURE FOR ACCIDENT/PERSONAL INJURY.
2. Complete the Receipt Form (below), cut the form at the dotted line, and provide the completed form to your supervisor.
3. **Supervisor's** shall ensure that every employee provides a completed form, collect all forms for their area, and submit original forms to their Branch Manager/Division Manager as appropriate.
4. **Branch Manager's/Division Manager's** shall verify that all employee receipts have been collected, and shall submit entire Branch Office/Division receipts to Risk Management in Room 7 at the MVA Headquarters.

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## RECEIPT FORM

*Employee Procedure for Accident/Personal Injury*

TO: **The Office of Risk Management**

I have received my copy of the Employee Procedure for Accident/Personal Injury and I realize that I will be required to follow this procedure if I have an accident at work.

\_\_\_\_\_  
(Employee's Signature)


\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Print Employee Name)

\_\_\_\_\_  
(Office Name)

**MEMORANDUM**

TO: Associate Administrators  
Managers/Supervisors

FROM: Milton Chaffee   
Chief Deputy Administrator

DATE: October 27, 2006

SUBJECT: MVA Accident/Injury Procedures

In July 2005 the Motor Vehicle Administration implemented the Supervisor Procedure for Employee Accident/Injury and the Employee Procedure for Accident/Personal Injury. Since inception, these MVA procedures have helped to improve accident reporting, assure prompt medical treatment for injured employees, and ensure appropriate leave charges for lost time accidents. These three key elements will always require improvement and our commitment to making improvements.

It is with this in mind that special emphasis must be placed upon ensuring MVA employee accidents are reported by employees immediately, and then reported by respective Managers/Supervisors within 24 hours. The above procedures and appropriate forms can be found on the Risk Management Intranet site.

Employees' who indicate injury or uncertainty of injury are to be examined at the local Department Medical Advisor (DMA) site immediately following their accident at work. When an employee seeks immediate medical treatment from an alternate source, they must receive an examination following the initial treatment. After the initial examination by the DMA, an employee must continue with DMA scheduled follow-up examinations until released to return to work without medical restriction or to their determined capability.

Lost time charges for employees eligible to use Work Injury Leave require submission of appropriate leave requests to Risk Management for approval/denial. Medical documentation to support lost time must accompany leave requests. Supervisors must ensure that timekeepers code all work accident lost time charges in accordance with payroll Time Card Codes when completing bi-weekly time sheets.

Please ensure that you and your employees are aware of and follow the procedures we have in place to address work accidents and injury.

You may contact Mr. Robert Saunders, Risk Manager by telephone (410-768-7069) or by e-mail at [rsaunders1@mdot.state.md.us](mailto:rsaunders1@mdot.state.md.us) should you need clarification regarding MVA procedures for employee accidents/injuries.

cc: John T. Kuo, Administrator

## Employee Procedure for Accident/Personal Injury

### General

*Employees must use reasonable judgement assessing accidents at work and resulting injuries. Severe injuries requiring response of emergency medical personnel may not allow injured employees to adhere to these procedures. For employee absence due to injuries resulting from accidents at work, employee wage benefits should only be paid through use of Work Injury Leave, Sick Leave or Temporary Total Disability Payment benefits. These benefits are not guaranteed and along with other eligibility criteria (# 9 & # 10 below), they require employee absence verification by the Department Medical Advisor and/or the Injured Workers Insurance Fund (IWIF) Medical Provider. In all instances employees must familiarize themselves with applicable TSHRS Policy, communicate regularly with their supervisor, and follow these procedures to ensure continued wage, health and leave benefits.*

### Procedure

NOTE - Automobile accidents involving MVA/State of Maryland vehicles are reported in accordance with Fleet Management procedures, however any resulting employee injury shall be reported using this procedure.

1. When an employee has an accident at work, the employee shall report the accident immediately to their supervisor using the "Employee Report of Accident/Personal Injury" form (attachment 1).

NOTE - If the accident results from an automobile accident during a driving test, the involved DLA must ensure thorough and correct vehicle and insurance information is completed on the "Third Party Information Work Sheet" (attachment 2) and submitted with the Employee Report of Accident/Personal Injury form. **DO NOT RELY ON THE MVA MAINFRAME FOR THIS INFORMATION.** Obtain all information from the vehicle owner and make copies of the registration and insurance cards for the vehicle involved immediately following the accident.

2. If an employee is injured as a result of the accident, the employee should circle YES on the Employee Report of Accident/Personal Injury form.
3. Injured employees may receive medical treatment from any medical provider of their choice, however the employee must advise the medical provider that the injury resulted from an accident at work. Employees need to advise the medical provider to submit medical bills to the Injured Workers Insurance Fund, P.O. Box 9899, Baltimore, Maryland 21284-9899, or contact IWIF customer service at 410-494-2000. Medical bills must contain the employee's name, social security

number and IWIF case number for processing. To obtain the IWIF case number contact Risk Management at 410-768-7069/7053.

4. Injured employees must submit to a medical examination by the Department Medical Advisor immediately following an accident, initial medical treatment, or within ten days of the date of accident. Regardless of the treating physician's determination (# 3 above), the Department Medical Advisor verifies the medical necessity and specifies the duration of the employee's absence from work. Employees refusing to submit to a medical examination at the onset and during related absence from work will not be eligible to use work injury leave and may not be approved to use sick leave. Employees may have compensation rights available through the Maryland Workers' Compensation Commission.
5. Injured employees shall provide the Department Medical Advisor with the "Employer's Authorization for Examination or Treatment" form (attachment 3) at the time of initial examination. Note - The Supervisor will provide a completed form to the employee prior to sending the employee for a medical evaluation by the Medical Advisor.
6. For injured employees returning to work with medical restrictions, these employees with restrictions shall submit medical documentation received from Treating/Examining Physicians to their supervisor bi-weekly. Medical documentation shall specify respective medical restrictions. Employees with medical restrictions shall, when required by the respective supervisor, submit to an examination by the Medical Advisor to verify medical restrictions and the duration of respective restrictions.
7. For employee absence due to injuries resulting from accidents at work, recovering employees shall submit medical documentation received from Treating/Examining Physicians to their supervisor bi-weekly. Medical documentation shall indicate a recovering employee's prognosis and should be provided on stationary that indicates the name, office, telephone, etc. of the Treating/Examining Physician(s).
8. For employee absence due to injuries resulting from accidents at work, these recovering employees shall call-in to their respective supervisor each day until medical documentation required in 7. (Above) is provided.
9. For employee absence due to injuries resulting from accidents at work, these recovering employees must submit and qualify for Work Injury Leave. The employee shall complete a "Request for Work Injury Leave" form (attachment 4) and submit completed forms along with appropriate medical documentation at the onset and bi-weekly during the absence from work. NOTE - In order to qualify for Work Injury Leave an employee injury must: result from an accident that occurs during the actual performance of duty (breaks, lunch time, to and from work excluded); result in lost time related to the accident as determined

appropriate by a physician and verified by the Medical Advisor; and be deemed compensable under Maryland Workers Compensation Law. Work Injury Leave does not cover injuries that are occupationally related disease (i.e., injuries that occur over time).

10. Recovering employees denied Work Injury Leave may use accumulated Sick Leave provided the Department Medical Advisor has examined the employee and verifies the medical necessity and specifies the duration of the employee's absence from work. If eligible for use of accumulated Sick Leave the employee must submit a "Request for Leave" form (attachment 5) along with appropriate medical documentation to their supervisor at the onset and bi-weekly during absence from work.
11. For employee absence due to injuries from accidents at work, recovering employees are not eligible to use Extended or Advanced Sick Leave in lieu of Work Injury Leave. Employees are cautioned from using other earned leave (Annual, Personal, Compensatory, etc.) for absence from work, because such leave will not be reimbursed by the MVA regardless of the outcome of the employee's accident case.
12. Recovering employees denied Work Injury Leave and Sick Leave will need to file an Employee Claim Form with the Workers' Compensation Commission, 10 East Baltimore Street, Baltimore, Maryland 21202-1641 and submit and qualify for Temporary Total Disability Payment benefits from IWIF.
13. Recovering employees denied Work Injury Leave and Sick Leave should submit for Temporary Total Disability Payment benefits prior to entering a without pay status by contacting IWIF customer service at 410-494-2000 and speaking with the Adjuster assigned to the employee's accident case.
14. Employees submitting for Temporary Total Disability Payment benefits can be required to get a medical examination from a Medical Provider that is selected by the IWIF.
15. Employees granted Temporary Total Disability benefits will be in a without pay status with the Department Payroll System. To protect wage, health, and leave benefits an employee must contact their Human Resources representative. Additionally, employees in this status might need to submit appropriate paperwork and apply for leave of absence-illness or FMLA Leave. To determine the need and eligibility for these two types of leave, an employee must contact their MVA Human Resources representative.
16. For clarification concerning this procedure, employees are encouraged to consult with their respective supervisor, but may also contact the MVA Office of Risk Management, Safety and Fleet Services at 410-768-7069.