



The College at Brockport  
State University of New York

**Category:**

Office of Human Resources

**Responsible Office:**

Office of Human Resources

**Policy Title:**

Workers' Compensation/Accident  
Reporting

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**Policy:**

Employees must report on-the-job accidents to both your supervisor and the ARS system at 1-888-800-0029 within 24 hours of the accident.

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**Procedure:**

**EMPLOYEE**

Reports work related accident or illness to supervisor **immediately**. Seeks medical attention as needed.

**SUPERVISOR**

Gives the employee the **Injury Report Form**, available at: <http://www.brockport.edu/hr/forms/documents/accidentform.doc> to complete. After the injured employee signs the form, the supervisor also signs and forwards to The Office of Human Resources **within 24 hours**. *Supervisor must notify the Office of Human Resources immediately by phone*

**EMPLOYEE**

**Calls 1-888-800-0029** to report the injury to NYS Accident Reporting System within 24 hours of the accident.

**HUMAN  
RESOURCES**

Receives the injury report from the supervisor and processes the C-2 in the NYS Accident Reporting System. The report is electronically sent to the Workers' Compensation Board. Workers' Compensation will forward to **State Insurance Fund**, the carrier for The College at Brockport. This will initiate the claim process.

**STATE  
INSURANCE  
FUND**

Sets up claim and notifies the Office of Human Resources once a claim has been established. Contacts employee to verify information on the accident report.

**EMPLOYEE**

*In order for bills to be paid, medical reports must be received by the State Insurance Fund. Employee must ensure that their doctor transmits medical reports to the State Insurance Fund.* In addition, employee must submit a medical statement to The Office of Human Resources verifying diagnosis and estimated date of return to work.

**STATE**

Upon receipt of acceptable medical reports, processes claim for

**INSURANCE  
FUND**

payment to Doctor.

**EMPLOYEE**

Classified employees must charge accruals for lost time up to 5 full time days. If the employee has no accruals, they will be placed on leave without pay. Professional/Faculty employees charge accruals until accruals run out. University Police employees do not charge accruals.

**EMPLOYEE**

Responsible for keeping the **Office of Human Resources** and **Supervisor** informed of status during absence and supply medical documentation before they return to work.

**DEPT./HR**

Determines whether alternative duty assignment is appropriate. Employee must be no more than 50% disabled and able to return to full duty within **60 calendar days**.

**EMPLOYEE**

Prior to returning to work, employees **must sign in** and present to Human Resources a statement from the treating doctor allowing employee to return to work and identifying restrictions. Human Resources will provide the supervisor with a copy of the medical release.

**HUMAN  
RESOURCES**

Will notify Payroll and State Insurance Fund when the employee returns to work.

- ❖ If you have any questions regarding Workers' Compensation, please feel free to contact the Office of Human Resources at **x2126**.

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**Forms:** [On The Job Accident and Injury Report](#)

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