



COVID-19 Exposure Workers' Compensation Process

In an effort to maintain consistency with the city's Workers' Compensation processes and procedures, supervisors must adhere to the below procedures as guidance to an employee following a direct exposed to COVID-19 while at work:

1. Advise the employee to complete the [Authorization for Medical Treatment \(AMT\)](#) form. Supervisors must complete the [First Report of Injury \(FROI\)](#) form. Additionally, employees **MUST** be provided with the Workers' Compensation packet, which includes, the Employee Information Letter, Express Scripts First Fill Card and WC Q&A Brochure. (The complete Workers' Compensation Packet (forms) may be found on the city's [Workers' Compensation webpage](#).)
2. If the employee has been directly exposed to COVID-19 while on the job; however, is **NOT** experiencing symptoms and chooses **NOT** to seek medical treatment:
 - Advise the employee to complete the AMT form indicating, ***"Employee is NOT seeking medical treatment at this time."***
 - Select a panel physician from those provided on the AMT form.

Note: Dr. Anthony Cetrone has been assigned as the designated Infectious Disease Provider for the city and although we strongly encourage he be utilized in the case of an exposure, the employee themselves is required to select their panel physician from those shown on the AMT form. *(This identification is important should the employee need to seek medical treatment in the future.)*

 - Supervisor is to complete the FROI as normal and submit paperwork to workerscomp@nva.gov.
 - Employee should monitor for related COVID-19 symptoms. If the employee later decides to seek medical treatment, the employee must update the AMT form and follow the instructions noted on #3.
3. If the employee has been exposed to COVID-19 while on the job and is requesting medical treatment:
 - Supervisor must email the Workers' Compensation Team to advise that an employee will be submitting a Workers' Compensation claim and is seeking medical treatment. This initial email notification will help to ensure that the medical facilities are notified of the authorization to test. Employees **MUST** receive pre-authorization for Workers' Compensation COVID-19 testing.
 - Advise the employee to complete the AMT form indicating, ***"Employee is seeking medical treatment with the physician selected."***
 - Select a panel physician from the AMT form whether the employee is electing to seek medical treatment or not should treatment be needed in the future.

- Supervisor is to complete the FROI as normal and submit paperwork to workerscomp@nnva.gov. Receipt of the FROI will allow the city's Workers' Compensation Team to authorize the COVID-19 testing and provide proper notification to the testing facilities.
- Along with the completed AMT and FROI forms, responses to following questions must also be emailed to workerscomp@nnva.gov:
 - Was the positive employee fully vaccinated?
 - Did the confirmed positive employee provided a copy of their test results to the HR COVID Care Team or to their department?
 - Was the alleged exposed employee wearing a mask per our most recent guidance in [COVID-19 FAQ# 18](#)?
- Advise the exposed employee to contact the selected panel physician's office at the corresponding phone number provided on the AMT form, to schedule COVID-19 testing as soon as possible. **DO NOT** send the employee to panel physician's office without a scheduled appointment as they will not be seen unless authorization has been sent.
- Supervisor should instruct the exposed employee to self-quarantine during this time.

Reminders:

- It is an employee's personal right under Virginia State Law to file a Workers' Compensation Claim.
- If an employee files a Workers' Compensation claim, the claim will be reviewed for compensability and if denied, any Workers' Compensation leave/time taken for the denied claim will then be reverted to the employee's personal time (PPL/PML) as stated in [PAM 1202 Occupational Injury and Disease Policies, Procedures and Guidelines](#).