

[REDACTED] Onsite Clinic Policies and Procedures

- If the employee requires further assessment beyond the onsite clinic they must first go to [REDACTED] see an occupational medicine physician. Second shift employees will go to the emergency room and report to the onsite clinic at the start of their next shift. **(The date of injury is determined by the date it is reported to the coach or onsite clinic staff. This becomes important when an injury is not reported until quite a bit of time has passed since the onset.)**
 - Give the employee an Authorization for Occupational Health Services form. These forms are located in the desk drawer under the label “Physician Visits”. Call the [REDACTED] or [REDACTED] and schedule an appointment for the employee. They are to return all paperwork to the onsite clinic immediately upon their return to [REDACTED]. They cannot return to work without first turning in their paperwork to the onsite clinic.
 - Create a WC claim with [REDACTED] (See page 20)
 - Give the employee a WC First Contact Packet which they will fax to [REDACTED]. The packet is located in [REDACTED] Occupational Health → WC → New Claim Packet (a hard copy of the packet is also located in the left side drawer of the desk), and it includes:
 - Fax Cover Sheet
 - Information Brochure
 - DWCI Claim Form
 - Signed Medical Release
 - Mileage Form
 - Physician List
 - Questionnaire
 - First Fill Form
 - If [REDACTED] refers them for diagnostic testing or to a specialist:
 - Contact [REDACTED] and attach all documentation. [REDACTED] OR reach out to the case manager who contacts you regarding the claim.
 - Injury report and subsequent SOAP notes
 - FJP (Functional Job Profile) - obtain from the employee’s Coach
 - All available documentation from CareSpot
 - Any referral scripts
 - If the employee is ordered to get a prescription filled for medication, he/she may use their own insurance to fill the prescription and get reimbursed by [REDACTED] if and when the claim is approved. They may also get a copy of the **First Fill Form** located in the New Workers’ Comp Forms folder in the drawer to left of the desk. It is also located on the external hard drive:
 - [REDACTED] Occupational Health → WC → New Claim Packet → [REDACTED] First Fill Form
 - Fill out the employee’s [REDACTED] number, date of injury, DOB, name, and address.
 - Print the form and the worker presents it to the pharmacy.
 - If an existing claim number is submitted and there is a matching Express Scripts claim, the medication is adjudicated against the claim. If there is no claim number, the pharmacist will enter the SSN and the date of injury.