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PROCESSING OF EXPOSURE CLAIMS

presented by
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I. BACKGROUND

A. Classes of public employees at risk to exposure claims

1. Police officers
2. Paramedics
3. Healthcare workers
4. Teachers
5. Custodial/waste disposal
6. Lifeguards

B. Methods of exposure

1. Needlestick injuries
2. Direct contact with another's blood through eyes, nose, mouth, or broken skin
3. Human bite
4. Bug bite
5. Exposure to airborne pathogen

II. EMPLOYER PROCESSING OF EXPOSURE CLAIMS

A. Is there a claim to report and process?

B. Option other than filing a formal claim initially:

1. For minor cases, discuss with the worker whether he or she wants to file a formal claim at that time.

2. If the worker does not want to file a claim initially, have the worker sign a pre-prepared form confirming this.

3. This notice will allow the worker to file a claim in the future, if necessary, and it will not be time barred.

C. "First aid" exception

III. GENERAL LEGAL FRAMEWORK FOR ANALYZING COMPENSABILITY

A. Injury vs. occupational disease

B. Injury claims

1. A diagnosis or condition not required to prove an injury claim.

2. The incident must only require medical services, even if only diagnostic in nature.

C. Occupational disease claims

1. Not tied to one specific event

2. Must prove actual medical condition

3. Sufficient proof if the evidence establishes that the employee is in a class of workers statistically more likely to develop the condition.

IV. PROCESSING SPECIFIC TYPES OF CLAIMS

A. Puncture and abrasion injuries

1. Verify injury and investigate source of potential medical condition.

2. Pay for diagnostic and preventive care.

3. If testing is negative, accept claim (normally non-disabling) if appropriate for "needle stick," "puncture wound," "abrasion," etc. Do not accept a medical condition.

B. Blood and Injury exposure claims

1. Verify nature of exposure and investigate source of potential medical condition.

2. Pay for diagnostic testing and possible prophylactic treatment.

3. If testing is negative, accept as injury claim (normally non-disabling) for "blood splash," "blood contact," etc.

C. Positive test results

1. Investigate further with IME, review of statistical information regarding work exposure for medical exposure, and

2. Consider acceptance of as minimal a condition as possible, e.g., "positive TB skin test," depending on results of investigation.

3. Consider denial if investigation does not support work connection.

D. Infections disease exposures

1. Confirm claim is occupational disease or injury.

2. Verify testing for claimed condition supports existence of condition.

3. Investigate exposure and potential sources.

4. Pay for diagnostic or possible prophylactic treatment.

5. If testing is negative, deny claim if no specific injury. However, may have to consider a very limited acceptance if there is a specific injury which required diagnostic services.

6. If testing is positive:

   a. Contact physician with expertise on condition and obtain information concerning causes for the condition, etc.

   b. Obtain recorded statement from claimant.

   c. Consider an IME or file review with the appropriate medical expert.

   d. If medical and investigative evidence fails to support work exposure as compensable cause, deny claim.

   e. If medical and investigative evidence confirms work as the likely cause, consider acceptance, but only of most minimal diagnosis.