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All documents are also available on our website at omahanational.com



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- DWC-7 Notice to Employees Injuries Caused by Work
- Fraud Prevention Poster



#### **Injury Report Forms**

- Instructions
- ▼ DLSR-5020 Employer's Report of Occupational Injury or Illness
- ▼ DIA-510 Notice of EE Death
- Incident, Supervisor, and Witness Reports



### **Injured Worker Handouts**

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- Injured Worker's First Fill Prescription Form
- DWC-1 Claim Form and Notice of Potential Eligibility
- F Employee Medical Provider Network Notice
- Notice to Victims of Workplace Crimes
- F Employee Acknowledgement Part Two
- Consent and Authorization for Release of Information and Request for Medical History



#### Informational Documents

- Instructions
- Omaha National Contact Information
- Medical Provider Network (MPN) Information for Employers
- Reduce Your Workers Compensation Costs



#### **General Forms**

- Instructions
- Request for Subrogation Waiver
- Notice of Ownership Change
- Company Contacts Verification



#### State-Specific

- Instructions
- DWC Time of Hire Pamphlet
- F Employee Acknowledgement Form Part One



# Non-Compliance Notice

Please note, the use of many of the documents within this packet is required. Additional fines and enforcement actions may result from non-compliance with California law regarding these notices.

If you have any questions regarding your responsibilities, please contact Omaha National at 844-761-8400.