



## INJURED WORKER HANDOUTS

As soon as you know one of your employees may have been injured at work, please provide the following documents to the injured worker.

### **Injured Worker's First Fill Prescription Form:**

This document contains a first fill card that an injured worker can use for a one-time fill of prescription medicines for their work injury. **It is important that you give the worker this card right away when they report an injury.** The temporary card is only valid if used within 5 days of the reported date of injury. Once the injury is reported to us, our claims staff will provide further instructions to the worker on how to get subsequent prescription fills and refills.

### **C-1 - Notice of Injury or Occupational Disease (Incident Report):**

Injured workers may use this to report a work incident. Upon receipt of a completed form, the employer or the employee's supervisor must sign the C-1 form and provide a copy to the employee. Copies of completed forms must be retained for 3 years after the date of accident.

### **D-2 - Brief Description of Rights and Benefits and Employee Acknowledgement Form:**

Provide both documents to an injured worker and obtain their signature on the Employee Acknowledgement Form. Send a copy of the signed form to Omaha National.

### **D-53 – Alternative Choice of Physician or Chiropractor:**

Provide a copy of this informational document to the injured worker.

### **D-36 - Request for Additional Medical Information and Medical Release:**

Have the injured worker complete and sign this form. Then, send a copy to Omaha National when the injury is reported.

### **Consent and Authorization for Release of Information and Request for Medical History Forms:**

These forms help us to obtain the information and records needed to handle a claim and to make sure that the injured worker receives the best possible medical care. Have the injured