

Manager/Supervisor Risk Management

#19– 1/12/12

TOPIC: WORKERS' COMPENSATION – INITIAL FORMS, 5020

The second form generated on each new injury is the "Employer's Report of Occupational Injury or Illness" (form 5020). The 5020 is the State mandated form that is used to report the worker's injury to the State. It contains the following printed statement: "NOTICE: California law requires employers to report within five days of knowledge every occupational injury or illness which results in lost time beyond the date of the incident OR requires medical treatment beyond first aid..."

Virtually all of our member's 5020's are electronically generated, and forwarded to our third party claims administrator (TPA). Two things then happen; first the form is electronically forwarded by the TPA to the state, and second, the TPA opens a claim file. The 5020 should be submitted regardless of whether the injured worker has filled out the DWC 1 claim form. There is no cost incurred by the employer or YCPARMIA for a 5020 that reports an injury where there is no medical treatment or lost time. On the other hand, treatment authorization and payment of incurred medical bills cannot be made without a claim file, and there is no claim file until the 5020 is received by the TPA.

Form 5020 contains over 3 dozen boxes grouped into three parts:

- Employer information;
- Information about the injury or illness; and
- Employee information.

Some comments on filling out the report:

- All boxes must be filled in if you have the information; there is no privacy interest;
- Box 17 requires the date of employers knowledge – it is the date that you had reason to think that there was an injury – and – that it might be work related;
- Box 18 requires the date that you gave the employee a claim form; it should be the same as #17;
- Box 19 asks for the body part injured: you should list all of them in detail; use #26 if needed.
- Box 22 is the department and the division, if applicable, that the employee works for;
- Box 26 asks what happened: go into detail when describing how the injury occurred;
- Boxes 33/33a: is the home contact information for the injured worker, and must be provided;
- Box 35 calls for an occupation description, not a salary grade;
- In addition to the information required on the form, YCPARMIA REQUIRES THAT THE NAME AND PHONE NUMBER OF THE WORKER'S SUPERVISOR AT THE TIME OF THE INCIDENT BE INCLUDED;
- Lastly, if you have information that you do not want to put on the form, please call YCPARMIA.

What should the supervisor take from this? Immediately, but no later than 5 days after learning of a work injury, a 5020 must be submitted to our TPA. Note, since a DWC1 claim form must be given to the injured worker within one day, it is normal to fill out the 5020 at the same time. Keep HR involved.

Next topic: Workers' Compensation – What is a TPA?