



**WILLIAM  
PATERSON  
UNIVERSITY**

OFFICE OF PAYROLL AND EMPLOYEE BENEFITS • COLLEGE HALL  
P.O. BOX 913 • WAYNE, NEW JERSEY 07474-0913  
973.720.2885 FAX 973.720.2013  
CONFIDENTIAL FAX FOR MEDICAL DOCUMENTATION 973.720.3694

## **Work-Related Injury or Diagnosis of an Occupational Disease Reporting Procedures**

### **Reporting a Work Related Injury or Diagnosis of an Occupational Disease**

In the event that you are injured or are diagnosed with an Occupational Disease during the course of your employment, you are required to notify your immediate supervisor and call the Payroll and Employee Benefits office at extension 2624, no later than the end of the workday on which the injury occurred or the date on which you became aware of the occupational disease.

[Form RM2 \(State Of New Jersey Employer's First Report of Accidental Injury or Occupational Disease\)](#) which is accessible from our web site, must be completed by the injured employee, reviewed and signed by his/her immediate supervisor and submitted to the Payroll and Employee Benefits office within 48 hours of the accident.

### **Medical Treatment**

#### **Life Threatening Medical Emergencies**

Employees who are seeking treatment of life threatening medical conditions should seek immediate treatment at:

St. Joseph's Wayne Hospital's - Emergency Room  
Address: 224 Hamburg Turnpike, Wayne NJ 07470

#### **Non-Life Threatening Medical Conditions**

Employees who are seeking treatment for non-life threatening medical conditions will be referred to the following facility:

Concentra  
Address: 283 Piaget Ave,  
Clifton, NJ 07011  
Hours: Monday to Friday: 8 a.m. to 7 p.m.

For treatment of a non-life threatening medical conditions after the operating hours of the Concentra facilities, employees should seek treatment at:

St. Joseph's Wayne Hospital's Emergency Room.  
Address: 224 Hamburg Turnpike, Wayne NJ 07470  
Phone Number: 973.942.6900



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## Plan Administration

The NJ Division of Risk Management (DRM), which is self-insured for Workers' Compensation, administers William Paterson University's work related accident and occupational disease claims. DRM has selected Horizon Casualty Services as the third party administrator to provide a managed care program. An injured employee must follow the above reporting procedures and seek treatment in accordance with this managed care program.

*Employees who do not comply with these procedures will be responsible for any unauthorized medical bills.*

## Absences Due to a Work Related Injury or an Occupational Disease

It is the employee's responsibility to provide the Payroll and Employee Benefits office with proper medical documentation from a Horizon Casualty approved physician to support any absence from a work related injury or Occupational Disease. Employees may choose to use any of their accrued earned leave time if they are unable to work because of a work related injury or occupational disease. Employees who do not have accrued earned leave time or do not wish to utilize earned leave time may qualify for Temporary Workers Compensation benefits. Temporary Workers Compensation benefits are payable to an employee at the rate of 70% of wages up to a maximum payment of \$903.00 per week after an absence of seven (7) consecutive work days or more.

## Workers' Compensation Fraud

If there is reason to believe that an absence due to a work-related injury or occupational disease is being abused, the University or its designee may conduct an investigation into the matter. If the University concludes that there has been an abuse, disciplinary action, up to and including termination will result. In addition, where appropriate, the matter may be referred to the New Jersey Attorney General's Office for appropriate action.

I have read and understand the above work-related injury reporting procedures and agree to comply with the procedures listed above.

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Employee's Name (Please Print)                      Employee's Signature                      Date