Guide
to
Workers’
Compensation

Iowa Division of Workers’ Compensation
Iowa Workforce Development

Sixth Edition - 2005
Dear Workers’ Compensation Associate:

It is our pleasure to provide you with a complimentary copy of the Iowa Division of Workers’ Compensation Guide to Workers’ Compensation.

This guide contains valuable information in an understandable format relating to the rights and duties of those covered by Iowa’s workers’ compensation law. This publication is intended to be used as a compilation of general information for commonly asked questions. Opinions or conclusions expressed or implied in this guide should not be considered to be a final determination of this office. You may copy and distribute the guide to others.

The guide reflects the current law, but changes in the law may affect the information contained in the guide. If you have questions, please contact our office.

We trust you will find the guide informative and useful.

Very truly yours,

Michael G. Trier
Workers’ Compensation Commissioner

Sharon K. Ortega     Ann M. Snowgren
Administrative Secretary    Administrative Assistant
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I. Introduction

This booklet has been prepared by the Iowa Division of Workers’ Compensation, Iowa Workforce Development to answer commonly asked questions about workers’ compensation. This publication is intended to be a compilation of general information. Opinions or conclusions expressed or implied in this guide should not be considered to be a final determination of this office. Reference numbers throughout are references to the Iowa Code unless otherwise indicated. For more specific information you may contact the Iowa Division of Workers’ Compensation.

II. Specifics of Workers’ Compensation

What is Workers’ Compensation?

The Workers’ Compensation Act is a part of the Iowa Code designed to provide certain benefits to employees who receive injuries (85), occupational disease (85A) or occupational hearing loss (85B) arising out of and in the course of their employment. Benefits are payable regardless of fault and are the exclusive remedy of the employee against the employer.

Are All Employers Required to Have Workers’ Compensation Coverage on Their Employees?

The Iowa law requires most employers to have a reliable method of providing workers’ compensation benefits to eligible employees. An employer may purchase a workers’ compensation policy through a private insurance company OR become self-insured by meeting certain requirements of the Iowa Insurance Commissioner. (87.1, 87.11)

An employer shall not engage in business without first obtaining insurance covering compensation benefits or obtaining relief from insurance or furnishing a bond. A person who willfully and knowingly does so is guilty of a class “D” felony. (87.14A)

The employer is required to pay the insurance premiums. It is against the law for the employer to take deductions from an employee’s earnings for the purpose of paying workers’ compensation insurance premiums. (85.54)

Who Is Eligible To Receive Workers’ Compensation Benefits?

Nearly all employees who have work-related injuries in Iowa are eligible for Iowa workers’ compensation benefits. In certain circumstances an employee who has a work-related injury outside the state of Iowa may be eligible for Iowa workers’ compensation benefits. (85.71)

There are a few classifications of employees who are exempt from the law. The following are exempt or non-covered employees: (85.1)

1. Domestic and casual employees who earn less than $1,500 from their employer during the 12 consecutive months prior to the injury.

2. Agricultural employees whose employer has a cash payroll of less than $2,500 in the calendar year preceding the injury.

3. The spouse of the employer, parents, brothers, sisters, children and stepchildren of either the employer or the spouse of the employer, and the spouses of the brothers, sisters, children, and stepchildren of either the employer or the spouse of the employer.

4. Exchange labor in agricultural employment.

5. The president, vice president, secretary, and treasurer of a family farm corporation and their spouses, and the parents, brothers, sisters, children, stepchildren, and their spouses of either the officers or their spouses.

6. Police officers and fire fighters who are entitled to benefits under pension fund established by Iowa Code chapters 410 and 411.

7. A proprietor or partner who is actively engaged in the proprietor’s or partner’s business on a substantially full-time basis.

8. The president, vice president, secretary, and treasurer of a corporation (other than a family farm corporation), not to exceed four officers per corporation, may elect not to be covered under the workers’ compensation law. In order for the rejection of coverage to be valid, a REJECTION OF WORKERS’ COMPENSATION OR EMPLOYER’S LIABILITY COVERAGE (a form available through the Workers’ Compensation Commissioner’s office) must be completed. (See Appendix O)

9. Employees who are entitled to benefits under any rule of liability or method of compensation, for employees, established by the Congress of the United States.

10. Members of a limited liability company.
Proprietors (independent contractors), partners and limited liability company members are not considered employees but may elect to be covered by purchasing a valid workers’ compensation insurance policy specifically including the proprietor or partner. [85.1A, 85.61 (13)] Employers who have employees that are exempt specified in numbers one through seven may cover these employees by purchasing a workers’ compensation insurance policy. [85.1(6)]

**What Type of Injuries are Covered?**

In Iowa, “injury” is defined very broadly to include any health impairment other than the normal building up and tearing down of body tissues. The health impairment must be a result of employment activities.

Employees with diseases and hearing losses are also eligible for benefits if they are a result of employment activities or exposures. (85A, 85B)

An employee is not entitled to benefits for the results of a preexisting injury or disease unless it is aggravated or worsened by the employment.

**Who Pays the Benefits?**

If the employer purchased an insurance policy, the employer pays the insurance premiums and the insurance company (or adjusting company) pays the workers’ compensation benefits to the injured employee.

If the employer is self-insured, the employer (or adjusting company) pays the workers’ compensation benefits to the injured employee.

Any employer, who fails to provide insurance coverage for eligible employees, as the law provides, may be liable to an employee for either workers’ compensation benefits or for damages in a civil action. (87.21)

The office of the Workers’ Compensation Commissioner administers the workers’ compensation law, but does NOT make payment of any benefits.

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**Types of Benefits**

**Medical Care**

The law provides for the payment of all reasonable and necessary medical expenses incurred to treat the injury. This includes transportation expenses. Mileage for use of a private auto is reimbursed at a rate set by the state of Iowa, currently at 29 cents per mile. (85.27)

Under certain circumstances an employee who has to leave work for medical treatment may be eligible for payment of lost wages. (85.27)

♦ **Choice of Medical Care**

The employer is required to provide medical care reasonably suited to treat the employee’s injury and has the right to choose the medical care. If the employee is dissatisfied with the care offered, the employee should discuss the problem with the employer or insurance carrier. In certain situations the employee may wish to request alternate care. If the employer or insurance carrier does not allow alternate care, the employee (through appropriate proceedings) may apply to the Workers’ Compensation Commissioner for alternate medical care. (85.27)

If the employer-retained physician gives a rating of permanent impairment, which the employee feels is too low, the employee does have a right to another examination to determine the degree of disability by a doctor of the employee’s choice at the employer’s expense. (85.39)

♦ **Obtaining Medical Information**

Any party making or defending a claim for benefits agrees to release all information concerning the employee’s physical or mental condition relative to the claim and waives any privilege for the release of such information. The information shall be made available to any party or the party’s representative upon request. (Appendix M) (85.27 and 876 IAC 4.6)
### Weekly Benefits

#### Temporary Total Disability (TTD)  
**(85.32, 85.33 [1])**

<table>
<thead>
<tr>
<th>Who Receives Benefits</th>
<th>Rate</th>
<th>When Benefits Begin</th>
<th>When Benefits End</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employees whose injury results in more than 3 calendar days of temporary total disability.</td>
<td>80% of the employee’s spendable weekly earnings not to exceed the maximum. (200% statewide average weekly wage)</td>
<td>On the 4&lt;sup&gt;th&lt;/sup&gt; day of disability following the injury. The 3-day waiting period is payable if the disability exceeds 14 calendar days.</td>
<td>When the employee has returned to work or is medically capable of returning to substantially similar employment, whichever occurs first.</td>
</tr>
</tbody>
</table>

#### Temporary Partial Disability (TPD)  
**(85.33 [2-6])**

<table>
<thead>
<tr>
<th>Who Receives Benefits</th>
<th>Rate</th>
<th>When Benefits Begin</th>
<th>When Benefits End</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employees who are still recuperating from the injury but who return to work at a lesser paying job, because of a temporary partial disability which results from the injury.</td>
<td>66 2/3% of the difference between the employee’s average gross weekly earnings at the time of the injury and the employee’s actual earnings while temporarily working at the lesser paying job.</td>
<td>On the 4&lt;sup&gt;th&lt;/sup&gt; day of disability following the injury. The 3-day waiting period is payable if the disability exceeds 14 calendar days.</td>
<td>When the employee returns to work at their regular job for their employer or is medically capable of returning to employment substantially similar to the employment in which the employee was engaged at the time of injury, or completes recuperation from the injury, whichever occurs first.</td>
</tr>
</tbody>
</table>
# Weekly Benefits

## Healing Period (HP)  
[85.34 (1)]

<table>
<thead>
<tr>
<th>Who Receives Benefits</th>
<th>Rate</th>
<th>When Benefits Begin</th>
<th>When Benefits End</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employees recuperating from an injury which produces a permanent impairment</td>
<td>80% of the employee’s spendable weekly earnings not to exceed the maximum. (200% statewide average weekly wage)</td>
<td>First day of disability after the injury.</td>
<td>(1) Employee returns to work; (2) it is medically indicated that significant improvement from the injury is not anticipated; (3) the employee is medically capable of returning to employment substantially similar to the employment in which the employee was engaged at the time of the injury, whichever occurs first.</td>
</tr>
</tbody>
</table>

## Permanent Partial Disability (PPD)  
[85.34 (2)]

<table>
<thead>
<tr>
<th>Who Receives Benefits</th>
<th>Rate</th>
<th>When Benefits Begin</th>
<th>When Benefits End</th>
</tr>
</thead>
<tbody>
<tr>
<td>An employee whose injury results in a permanent disability but the employee is capable of gainful employment.</td>
<td>80% of the employee’s spendable weekly earnings not to exceed the maximum. (184% statewide average weekly wage) The minimum weekly benefit amount is equal to the weekly benefit amount a person whose gross weekly earnings are 35% of the statewide average weekly wage.</td>
<td>At the termination of the healing period (HP) benefits.</td>
<td>When the employee has been paid the number of weeks required.</td>
</tr>
</tbody>
</table>
# Weekly Benefits

## Permanent Total Disability (PTD) [85.34 (3)]

<table>
<thead>
<tr>
<th>Who Receives Benefits</th>
<th>Rate</th>
<th>When Benefits Begin</th>
<th>When Benefits End</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employees whose injury leaves them incapable of returning to gainful employment.</td>
<td>80% of the employee’s spendable weekly earnings not to exceed the maximum. (200% statewide average weekly wage) The minimum weekly benefit amount is equal to the weekly benefit amount a person whose gross weekly earnings are 35% of the statewide average weekly wage.</td>
<td>Date of the injury.</td>
<td>Benefits are payable as long as the employee remains permanently disabled.</td>
</tr>
</tbody>
</table>

## Death (85.29, 85.31, 85.42, 85.43, 85.44)

<table>
<thead>
<tr>
<th>Who Receives Benefits</th>
<th>Rate</th>
<th>When Benefits Begin</th>
<th>When Benefits End</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dependents of employee whose death results from injury.</td>
<td>80% of the employee’s spendable weekly earnings not to exceed the maximum. (200% statewide average weekly wage) The minimum weekly benefit amount is equal to the weekly benefit amount a person whose gross weekly earnings are 35% of the statewide average weekly wage.</td>
<td>Date of the employee’s death.</td>
<td>Benefits are first payable to the surviving spouse for life or until re-marriage. Upon remarriage, if there are no dependent children, the surviving spouse is entitled to a two-year lump sum settlement. Dependent children are entitled to the benefit until they reach the age of 18, or age 25 if they are actually dependent or for life if totally disabled.</td>
</tr>
</tbody>
</table>
Types of Permanent Partial Disabilities (PPD)

- **Scheduled Member Disabilities**
  An employee’s entitlement to PPD benefits when a scheduled member is involved is based on functional impairment.

<table>
<thead>
<tr>
<th>Values of Scheduled Body Members</th>
<th>WEEKS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Loss of thumb</td>
<td>60</td>
</tr>
<tr>
<td>Loss of first finger</td>
<td>35</td>
</tr>
<tr>
<td>Loss of second finger</td>
<td>30</td>
</tr>
<tr>
<td>Loss of third finger</td>
<td>25</td>
</tr>
<tr>
<td>Loss of fourth finger</td>
<td>20</td>
</tr>
<tr>
<td>Loss of hand</td>
<td>190</td>
</tr>
<tr>
<td>Loss of arm</td>
<td>250</td>
</tr>
<tr>
<td>Loss of great toe</td>
<td>40</td>
</tr>
<tr>
<td>Loss of any other toe</td>
<td>15</td>
</tr>
<tr>
<td>Loss of foot</td>
<td>150</td>
</tr>
<tr>
<td>Loss of leg</td>
<td>220</td>
</tr>
<tr>
<td>Loss of eye</td>
<td>140</td>
</tr>
<tr>
<td>Loss of hearing in one ear</td>
<td>50</td>
</tr>
<tr>
<td>Loss of hearing in both ears</td>
<td>175</td>
</tr>
<tr>
<td>Permanent disfigurement, face or head</td>
<td>150</td>
</tr>
</tbody>
</table>

The number of weeks of benefits payable for 100% loss, or loss of use, of the body member. If the permanent partial disability rating is less than 100%, the percentage rating is multiplied by the number of weeks shown. For example a 20% loss, or loss of use, of a thumb would be computed as 20% of 60 weeks or 12 weeks of PPD benefits. [85.34(2)]

- **Body as a Whole Disabilities**
  When an injury results in a permanent disability to the body as a whole, it is referred to as industrial disability. Factors to be considered in determining industrial disability include the employee’s medical condition prior to the injury, immediately after the injury, and presently; the situs of the injury, its severity and the length of healing period; the work experience of the employee prior to the injury, after the injury and potential for rehabilitation; the employee’s qualifications intellectually, emotionally and physically; earnings prior and subsequent to the injury; age; education; motivation; functional impairment as a result of the injury; and inability because of the injury to engage in employment for which the employee is fitted. Loss of earnings caused by a job transfer for reasons related to the injury is also relevant. There are no weighing guidelines that indicate how each of the factors is to be considered. Once the degree of the industrial disability is determined, the percentage rating is multiplied by the total value of the body as a whole (500 weeks) to determine the number of weeks payable. [85.34(2)(u)]

Burial Expense (85.28, 85.31, 85.42, 85.43, 85.44)

Burial expenses up to $7,500 are paid in addition to the weekly death benefits.

Second Injury Fund Benefits (85.63 – 85.69)

If an employee has a permanent partial disability to one hand, arm, foot, leg, or eye, and sustains a permanent partial disability as a result of a job-related injury to another of such members, the employee may be entitled to benefits from the “Second Injury Fund.” The benefits are limited to the value of that permanent disability which exceeds the value of the two affected members separately. The benefits are not payable until after the employer, or insurance carrier, has completed payment of benefits for the second permanent partial disability.

The “Second Injury Fund” is administered by the treasurer of the state. An employee who feels entitled to benefits from this fund should contact the treasurer’s office. The treasurer of the state pays Second Injury Fund benefits. An employer, or, if insured, the insurance carrier, in each case of compensable injury causing death pays to the Fund $12,000 in a case where there are dependents and $45,000 in a case where there are no dependents.

When are the Benefits to be Paid?

The law is written to encourage prompt payment of workers’ compensation benefits so that the employee will not suffer any undue hardship. Before making payments, most insurance companies or self-insured employers, require a written report of injury (which is usually completed and filed by the employer) and some medical verification of the injury. The law provides for weekly payments of disability benefits, beginning on the 11th day of disability. If the benefits are not paid when due the employee is entitled to interest. If benefits are unreasonably delayed or denied the employee is entitled to penalty benefits.

If commenced, the payments shall be terminated only when the employee has returned to work, or upon thirty days notice stating the reason for the termination and advising the employee of the right to file a claim with the Workers’ Compensation Commissioner. (85.30, 86.13)

Rate of Weekly Benefits

The weekly rate for disability benefits for temporary total (TTD), healing period (HP), permanent partial (PPD), and
permanent total (PTD) is 80% of the employee’s spendable weekly earnings not to exceed a maximum. An employee’s spendable weekly earnings is defined as amount remaining after payroll taxes are deducted from gross weekly earnings. [85.61 (9)] Gross earnings is defined as recurring payments by the employer to the employee for employment, before any authorized or lawfully required deduction or withholding, excluding irregular bonuses, retroactive pay, overtime, penalty pay, reimbursement of expenses, expense allowances, and the employer’s contribution for welfare benefits. [85.61 (3)] Generally, the basis of determining gross weekly earnings is dependent upon when or how an employee is paid. (85.36) There is a weekly minimum benefit for receiving permanent partial, permanent total or death benefits. The minimum is a benefit based on earnings of thirty-five percent (35%) of the statewide average weekly wage. The maximum for temporary total, healing period, permanent total, and death benefits is two hundred percent (200%) of the statewide average weekly wage. The minimum for permanent partial disability benefits is one hundred eighty-four percent (184%) of the statewide average weekly wage. The maximum and minimum rates are calculated annually and apply for injuries occurring in the year beginning July 1 and ending the following June 30.

The rate for a volunteer fire fighter, emergency medical care provider, reserve peace officer, volunteer ambulance driver, volunteer emergency rescue technician, or emergency medical technician trainee is an amount equal to the compensation they would receive if injured in the normal course of their regular employment or an amount equal to 140% of the statewide average weekly wage, whichever is greater. [85.36 (9) (a)]

The rate for elected or appointed officials is an amount based on the official’s weekly earnings as an official or an amount equal to 140% of the statewide average weekly wage. [85.36 (11)]

**Waivers**

Section 85.18 of the Iowa Workers’ Compensation Act prohibits the employee from waiving any rights to benefits under the Act. Former section 85.55 that permitted an employee with a physical defect that increased the employee’s risk of injury to waive compensation benefits for any injury caused directly or indirectly by the defect was repealed in 2004.

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**Time Limitations**

The law establishes the following time limitations within which certain actions must be taken.

**Notice of Injury (85.23)**

The law provides that the employer must have notice or knowledge of an alleged injury within 90 days of its occurrence, if not, benefits may be denied. The 90-day period begins to run when the employee knew, or should have known the injury arose out of and in the course of employment.

**Reporting of Claims (86.11)**

An Employer’s First Report of injury must be filed with the Workers’ Compensation Commissioner when an employee alleges an injury arising out of and in the course of employment, which results in time loss from work of more than three days, permanent injury or death. The report is required to be filed electronically with the Workers’ Compensation Commissioner within four days after the employer obtains notice or knowledge of the claimed injury. The report also must be filed with the insurer so the employee’s claim can receive proper consideration and so the insurer can file the first report for the employer.

**Two-Year Statute of Limitation (85.26)**

If within two years from the occurrence of the injury the employee does not receive Iowa weekly workers’ compensation benefits or file an application for arbitration, benefits may be denied.

**Three-Year Statute of Limitation (85.26)**

If Iowa weekly workers’ compensation benefits have been paid, the employee has three years from the last payment of weekly benefits to receive additional benefits or file an action before the Workers’ Compensation Commissioner. If not filed within the three-year period, the benefits may be denied. This statute of limitation does not apply to medical expenses reasonably necessary to treat the injury.

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**Settlements**

The law provides for the following two types of settlements, both of which must be approved by the Workers’ Compensation Commissioner.

**Agreement for Settlement (86.13)**

The parties may enter into an agreement as to the amount and extent of compensation payment due and file it with the Workers’ Compensation Commissioner. The approval of the agreement for settlement does not end the employee’s future rights. (Appendix E)
Compromise Settlement (85.35)
When there is a dispute as to whether or not the employee is entitled to benefits, a compromise settlement may be filed with the Workers’ Compensation Commissioner. Approval of a compromise settlement ends the employee’s future rights to any benefits for the settled injury. (Appendix F)

Lump Sum Payments
In Iowa, lump sum payments are the exception and not the rule. The law does, however, provide for two types of lump sum payments in the form of commutations, if approved by the Workers’ Compensation Commissioner.

A commutation is a lump sum payment of future benefits. In order for a commutation to be approved by the Workers’ Compensation Commissioner, it must be shown that the employee has a specific need and that the lump sum is in the employee’s best interest. There are several other filing requirements that must be met before a commutation will be approved. When commuting benefits, the employer is entitled to a discount on the benefits commuted. There are two types of commutations:

Full Commutation (85.45, 85.47)
A full commutation is a lump sum payment of all remaining future benefits. When approved, a full commutation ends all of the employee’s future rights to any additional benefits, including medical benefits. (Appendix C)

Partial Commutation (85.45, 85.47, 85.48)
A partial commutation is a lump sum payment of a portion of the remaining future benefits. When approved, a partial commutation establishes the employee’s entitlement to disability benefits, but it does not end the employee’s future rights. (Appendix D)

How Are Disputes Handled?
Free and open communication between the employee and the employer or insurance carrier is encouraged. The employee should be able to learn the reasons for any action taken, as well as the nature of the evidence supporting the action.

The majority of disputes in workers’ compensation claims can be resolved by discussion between the employee and the employer or insurance carrier. If the dispute is not resolved a contested-case proceeding may be initiated before the Workers’ Compensation Commissioner, following established procedures. Though not required, it is usually advisable to consider the need for legal representation when filing a contested case proceeding. However, before contacting an attorney or filing a contested case proceeding, the employee is encouraged to contact a compliance administrator in the Workers’ Compensation Commissioner’s office to discuss other options and alternatives.

The Workers’ Compensation Commissioner is the head of the Iowa Division of Workers’ Compensation, which is part of the Iowa Workforce Development Department. The Iowa Division of Workers’ Compensation has the responsibility of administering, regulating and enforcing the workers’ compensation laws. The Workers’ Compensation Commissioner’s office maintains files on all workers’ compensation claims reported to the agency. Though the Workers’ Compensation Commissioner’s office cannot represent the interests of any party, the agency can provide information regarding the provisions of the Workers’ Compensation Act, the rights of the parties, and the procedures the parties can follow to resolve their disputes. The Workers’ Compensation Commissioner’s office provides a variety of different procedures to resolve disputes. These procedures include; mediation, alternate medical care and health services dispute resolution. The office of the Iowa Division of Workers’ Compensation is open during the hours of 8:00 a.m. to 4:30 p.m., Monday through Friday, except for state holidays.

The Workers’ Compensation Commissioner has no control or authority over employee benefits other than workers’ compensation. The Workers’ Compensation Commissioner’s office cannot give advice on questions relating to workers’ health care or disability caused by sources other than a work-related injury.
III. Reporting Injuries in Iowa

Every employer shall keep a record of all injuries, fatal or otherwise, alleged by an employee to have been sustained in the course of the employee’s employment and resulting in incapacity for a longer period than one day. A First Report of Injury or Illness must be filed with the Iowa Workers’ Compensation Commissioner, in the form and manner required by the commissioner. (86.11)

All injury reporting in Iowa is required to be accomplished using Electronic Data Interchange (EDI) making the process faster with less paper work.

Electronic Data Interchange

Electronic Data Interchange (EDI) is an electronic process to file a First Report of Injury (FROI) and Subsequent Reporting (SROI) with the Iowa Division of Workers’ Compensation. Subsequent reporting includes payment reports, annual reports, and final reports.

Iowa has adopted the IAIABC EDI standards for filing of First Reports of Injury and Subsequent Reports of Injury. Iowa has been accepting Employers First Reports of Injury via EDI since 1996. EDI reporting has been mandatory since July 1, 2001.

EDI is an electronic process to file a FROI/SROI with the Iowa DWC. Claims will be submitted electronically to a Value added Network (VAN) or via Internet. The VAN is an electronic handoff point or mailbox from which to place and retrieve information. The Internet allows you to go to a storage center to place and retrieve your data. The Division will retrieve the information, process it and then send back an acknowledgement via the VAN/Internet back to the sender of the information. This acknowledgement informs the sender of the status of that particular transmission. For example, the acknowledgement informs the sender of errors or acceptable information. It is as easy as 1-2-3. It is a win-win situation.

EDI eliminates paper forms, facsimiles, forms on a disc, forms processed through the Internet or e-mail, and the use of scanners to get data to the Iowa Division of Workers’ Compensation.

With EDI, after an injury, an employer gathers the information and gives it to the workers’ compensation insurer or claim administrator. The insurer or administrator stores the data on a computer. Through electronic mailbox systems, the information is relayed to the Iowa Division of Workers’ Compensation.

EDI is proposed as a solution to the problems associated with data collection in workers’ compensation. For example, a lack of uniformity among forms and terms which prevents comparisons between states; and an excess of administrative paperwork are just a few of the problems today. Data can be used to measure the timeliness and accuracy of claim handling practices.

EDI is an international initiative created by the International Association of Industrial Accident Boards and Commissions (IAIABC), an association of workers' compensation administrators. It has established standards on reporting industrial accidents since its inception in 1914.

Claim processing in workers’ compensation is a rapidly changing field. Since 1991, the IAIABC has coordinated joint efforts with state jurisdictions and workers’ compensation administrators to establish data and communication standards. Therefore, EDI is proposed as a solution to communicate with all parties involved in the workers’ compensation process. The IAIABC, through all its partners, manages and provides the resources to establish the EDI process. The IAIABC EDI Development Committee, a collaboration of jurisdictions, insurance carriers, employers, and EDI product vendors, staffs the EDI project.

Future Claim Processing in Iowa

Over the next few years, the Iowa Division of Workers’ Compensation will be taking steps to improve compliance with claim reporting and payment laws and regulations.

Administrative Rules

The next section indicates the Iowa Division of Workers’ Compensation rules to follow.

Chapter 11 (876 IAC 11.1-6)
The purpose of this chapter is to establish the procedure for fulfilling reporting requirements for the Iowa Division of Workers’ Compensation. [876—11.1(85,86)]

♦ “EDI” means electronic transmission or reception, or both, of data through a telecommunications process utilizing a value-added network or the Internet as set forth in the EDI partnering agreement.

♦ “EDI partnering agreement” means the written agreement between an entity and the Iowa
Division of Workers’ Compensation specifying the terms and manner of reporting by EDI.

- “Implementation plan” means the written document prepared by a reporter specifying a timetable for reporting by EDI.

- “Report” means a first report of injury or a subsequent claim activity report, or both.

- “Reporter” means the person who is responsible for reporting to the Iowa Division of Workers’ Compensation pursuant to the Iowa workers’ compensation laws and includes an employer, an employer who has been relieved from insurance pursuant to Iowa Code section 87.11, and an insurance carrier which provides an employer workers’ compensation insurance.

- “Reporting” means submission of claims data and data fields of information of a report. [876…11.2(85,86)]

**Format of Reporting**

The format of EDI reporting must be the current version of the International Association of Industrial Accident Boards and Commissions (IAIABC) Release 2 Implementation Guide. Iowa plans to move to Release 3 in the near future.

- “Manner of reporting” The manner of EDI reporting is electronic. [876—11.4(85,86)]

- “Mandatory reporting deadline” All reporters must sign a partnering agreement and report by EDI. Reporting by any means other than EDI after July 1, 2001, is not acceptable. Reporters are responsible for reporting by EDI. A reporter may contract with another entity for reporting but the reporter is ultimately responsible for reporting. Any entity reporting on behalf of a reporter must also sign an EDI partnering agreement. [876—11.6(85,86)]

## IV. Vocational Rehabilitation

The Iowa Division of Vocational Rehabilitation Services (DVRS) assists eligible individuals with disabilities to prepare for, obtain and maintain employment.

An employee who has a permanent partial or permanent total disability which makes return to gainful employment impossible may be entitled to a payment of $100.00 per week (up to 13 weeks) if the employee is actively participating in a vocational program. An additional 13 weeks may be paid if approved by the Workers’ Compensation Commissioner. (85.70)
## V. DO’S & DON’TS FOR EMPLOYERS

### Do’s

- **Do implement, maintain and enforce** a workplace safety program. Reducing injuries is a good way to reduce your workers’ compensation costs.

- **Do see** that an injured worker is provided proper, prompt medical care.

- **Do keep records** of the medical care and record who authorized care, dates of medical appointments, mileage, meals, and lodging expenses incurred in the medical treatment.

- **Do what is necessary** to see that an injured worker is returned to work as soon as prudent. An injured worker returning to employment benefits both the employer and the employee.

- **Do make sure** that your potential workers’ compensation liability is insured either by a private insurance company or through qualified self-insurance.

- **Do see** that a first report of injury is filed when a work injury occurs. Filing a first report of injury is not an admission of liability. Notify your insurance carrier promptly of work injuries. (86.11) See Appendix A

- **Do make sure** that an original notice and petition (Appendix H) or a request for alternate medical care (Appendix K) is forwarded immediately to your insurance company or your attorney if you are self-insured.

- **Do contact** the Iowa Division of Workers’ Compensation if you have any questions on workers’ compensation.

### Don’ts

- **Do not discriminate** against an injured worker.

- **Do not discriminate** against a prospective employee who may have a disability.

- **Do not discharge** or retaliate against a worker who files a workers’ compensation claim.

- **Do not try to escape** your workers’ compensation responsibilities by calling employee’s independent contractors when in fact they are employees.

## VI. DO’S & DON’TS FOR EMPLOYEES

### Do’s

- **Do cooperate** in maintaining workplace safety.

- **Do notify** your employer or a supervisor of any injury.

- **Do keep** a record of the injury noting such things as date, time and place, who witnessed the incident, and who was notified.

- **Do request** that your employer provide you prompt, proper medical care if necessary. Ask your employer who the medical care provider should be.

- **Do keep records** of the medical care and record who authorized care, dates of medical appointments, mileage, meals, and lodging expenses incurred in the medical treatment.

- **Do keep** your employer and its insurance carrier informed about medical care and your progress.

- **Do contact** the Iowa Division of Workers’ Compensation if you have any questions.

### Don’ts

- **Do not choose** your own medical care provider. If your employer does not agree with your choice, the employer may not pay for unauthorized care.

- **Do not argue** or make threats.

- **Do not refuse** to participate in medical examination.

- **Do not seek** workers’ compensation benefits for a condition that is not work related.
VII. FURTHER INFORMATION

Questions on who is covered, who should receive benefits, etc., should be referred to:

**Iowa Division of Workers’ Compensation**  
1000 East Grand Avenue  
Des Moines, IA 50319  
Telephone: (515) 281-5387  
1-800-JOB IOWA (1-800-562-4692)  
FAX (515) 281-6501  
http://www.iowaworkforce.org/wc

Questions on insurance premium costs and insurance company conduct should be referred to:

**Iowa Insurance Division**  
330 Maple Street  
Des Moines, IA 50319  
Telephone: (515) 281-5705

Questions relating to vocational rehabilitation for injured workers should be referred to:

**Iowa Division of Vocational Rehabilitation Services**  
510 East 12th Street  
Des Moines, IA 50319  
Telephone: (515) 281-4311

Report deaths at work within 48 hours to:

**Iowa Division of Labor Services**  
1000 East Grand Avenue  
Des Moines, IA 50319  
Telephone: (515) 281-8066 (Death Reporting Only)  
Telephone: (515) 281-3606 (Other Labor Issues)

Questions on workplace safety should be referred to:

**IOSHA Consultation and Education**  
1000 East Grand Avenue  
Des Moines, IA 50319  
Telephone (515) 281-7629

Copies of a law book which contains Iowa Code chapters 17A, 85-87 (Workers’ Compensation Law), uniform administrative rules, and the administrative rules of the Iowa Division of Workers’ Compensation and the Iowa Workers’ Compensation Manual with rate tables may be obtained at cost from:

**Iowa Workers’ Compensation Advisory Committee, Inc.**  
P.O. Box 7032, Grand Station  
Des Moines, IA 50309  
(Order form is Appendix P)

Training sessions on workers’ compensation and safety are sponsored by:

**Iowa Workers’ Compensation Advisory Committee, Inc.**  
(annually in June)  
P.O. Box 7032, Grand Station  
Des Moines, IA 50309

**The Iowa Association of Workers’ Compensation Lawyers, Inc.**  
(annually in October)  
PO Box 17069  
Des Moines, IA 50317  
Telephone: (515) 226-8840  
Fax (515) 226-8903

**Employer’s Council of Iowa**  
1000 East Grand Avenue  
Des Moines, IA 50319  
Telephone: (515) 281-5361

**Iowa Governor’s Safety Conference**  
(annually in November)  
**Labor Commissioner**  
P.O. Box 6066  
Des Moines, IA 50309  
Telephone: (515) 281-8067

**Labor Center of the University of Iowa**  
(annual and periodic training targeted for organized labor)  
100 Oakdale Campus, Room M-210  
Iowa City, IA 52242  
Telephone: (319) 335-4144

**Iowa State Bar Association**  
Workers’ Compensation Section Meeting  
(annually in the Spring)  
521 East Locust Street  
Des Moines, IA 50309  
Telephone: (515) 243-3179
The following describe the various forms used by the Iowa Division of Workers’ Compensation.

**Appendix A**  
*First Report of Injury (FROI)* -- information filed electronically with the Iowa Division of Workers’ Compensation when a work injury occurs.

**Appendix B**  
*Supplemental Report of Injury (SROI)* -- information filed electronically to indicate status and/or payment of employee’s workers’ compensation claim. (Formerly known as form 2A)

**Appendix C**  
*Original Notice and Petition for Full Commutation (Form 9)* -- filed with the Iowa Division of Workers’ Compensation when requesting a full commutation.

**Appendix D**  
*Original Notice and Petition for Partial Commutation (Form 9)* -- filed with the Iowa Division of Workers’ Compensation when requesting a partial commutation.

**Appendix E**  
*Agreement for Settlement* -- filed with the Iowa Division of Workers’ Compensation when parties enter into an agreement for settlement. Employee’s future rights do not end.

**Appendix F**  
*85.35 Contested Case Settlement* -- filed with the Iowa Division of Workers’ Compensation when there is a dispute between the parties. Settlement ends future rights of the employee.

**Appendix G**  
*Waiver on Account of Physical Defect (Form 12)* -- Reserved 2004.

**Appendix H**  
*Original Notice and Petition (Form 100)* -- form used to initiate a contested case proceeding, generally filed by an employee, which should be forwarded to insurance carrier or attorney.

**Appendix I**  
*Request for Independent Medical Examination (Form 100A)* -- form used by employee to initiate contested case requesting another examination by a doctor of the employee’s choice at the employer’s expense due to a rating of permanent impairment, which the employee feel is too low.

**Appendix J**  
*Request for Vocational Rehabilitation Program Benefits (Form 100B)* -- form used by employee to request benefits for vocational rehabilitation.

**Appendix K**  
*Request for Alternate Medical Care (Form 100C)* -- form used by employee to initiate contested case requesting change in medical care which should be forwarded to insurance carrier or attorney.

**Appendix L**  
*Application and Consent Order for Payment of Benefits* -- form used when employer and/or insurance carrier dispute liability and weekly benefits are paid.

**Appendix M**  

**Appendix N**  
*Dispute Resolution Conference Report* -- outlines disputes/issues.

**Appendix O**  
*Corporate Officer Exclusion Form* -- filed with the Iowa Division of Workers’ Compensation when officers are to be excluded from workers’ compensation coverage.

**Appendix P**  
*Order form for law book* -- used to order the law book.

**NOTE**

These forms may be reproduced. Any reproduction will be accepted if it is identical to the forms available on the website. The forms are available and can be downloaded off our website at www.iowaworkforce.org/wc. The forms may be updated and the current version of the form must be used.

There are several other forms that are regularly used that are not included in these appendixes. Please contact Iowa Division of Workers’ Compensation for information about other forms.
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