

Workers' Compensation Benefits

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Information for Injured Workers from the Division of Workers' Commission

What are Workers' Compensation benefits?

[Sections 408.081-408.187]

There are four types of workers' compensation benefits:

Income benefits replace a portion of any wages you lose because of a work-related injury or illness.

Medical benefits pay for necessary medical care to treat your work-related injury or illness.

Burial benefits pay for some of the deceased worker's funeral expenses to the person who paid the funeral expenses.



Death benefits replace a portion of lost family income for eligible family members of workers killed on the job.

Payment of income or death benefits can be made to you or your beneficiary by:

- (1) check, or
- (2) electronic funds transfer (EFT).

To be eligible for electronic funds transfer, you must be expected to receive benefits for at least eight (8) weeks. To receive payment by electronic funds transfer, you or your beneficiary must make the request in writing to the insurance carrier and provide:

- the name of the financial institution;
- the type of account (checking or savings);
- the routing/transit number; and
- the account number you want benefits electronically transferred to.

Definitions

The following terms are defined:

Average Weekly Wage (AWW) is the average amount of weekly wages you earned during the 13 weeks immediately before your work-related injury or illness occurred. Income and death benefit payments are based on your average weekly wage.

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Claim Employer is an employer with whom the injured worker filed a claim for workers' compensation benefits and for whom the injured worker was working at the time of the on-the-job injury.

Disability occurs when a work-related injury or illness causes you to lose the ability to earn your weekly wages. Disability refers to your ability to earn an income, not to a physical handicap.

Impairment Rating is the percentage of permanent physical damage to your body that resulted from a work-related injury or illness.

Maximum Benefit Amount may not exceed 100 percent of the state average weekly wage rounded to the nearest whole dollar. The Division will compute the maximum weekly income benefit for each state fiscal year no later than September 1st of each year.

Maximum Medical Improvement (MMI) is the earlier of:

- the point in time when your work-related injury or illness has improved as much as it is going to improve; *or*
- 104 weeks from the date you became eligible to receive temporary income benefits.

Minimum Benefit Amount is 15 percent of the state average weekly wage rounded to the nearest whole dollar. The Division will compute the minimum weekly income benefit for each state fiscal year no later than September 1st of each year.

Multiple Employment means a worker who has more than one employer.

Non-Claim Employer is an employer, other than the claim employer, by whom the worker was employed at the time of the on-the-job injury.

**For further assistance, call
1-800-252-7031
or visit
www.tdi.state.tx.us**

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Non-pecuniary Wages are wages in a form other than money (i.e., health insurance premiums; vehicle; clothing; or rent/housing).

Pecuniary Wages are wages in the form of money (i.e., salary; commissions; and bonuses).

Medical Benefits

[Section 409.005(j-k), 413.021, Rule 129.5, 129.6]

Medical benefits pay for necessary medical care to treat your work-related injury or illness. Your employer's workers' compensation insurance company pays medical benefits directly to the health care provider who provides your medical treatment.

Medical benefits are paid only for the treatment of your work-related injury or illness. The insurance carrier does not pay for the treatment of other injuries or illnesses, even if the treatment was provided at the same time you received treatment for your work-related injury. Your health care provider may not bill you for treatment related to a work-related injury or illness, but may bill you for treatment of other injuries or illnesses.

When Medical Benefits Begin and End

You may receive necessary medical treatment immediately after the work-related injury or illness. You have the right to an initial choice of doctor. The doctor you choose must be on the Division's Approved Doctor List (ADL). You may access the ADL online: www.tdi.state.tx.us/wc/information/locatedoctor.html. Then click on "TXCOMP Healthcare Provider System". Place the cursor on main menu, and then click on "Locate Doctor". You can then search for a doctor by name, city, county, or specialty. If you do not have access to the Internet, you may contact Customer Assistance at 1-800-252-7031 and request a list of Division approved doctors in your area, which can be mailed or faxed to you.

After you have chosen a doctor, any request to change doctors must be approved by the local Division office handling your claim. If you or your doctor move or the doctor becomes unavailable to provide medical treatment, you will be allowed to choose another doctor from the ADL. This will be considered an exception to the law and will not be viewed as a request to change doctors. You will need to complete the *Employee's Request to Change*

Treating Doctors (DWC Form-53) and file it with the local Division office. We will notify all parties that your treatment is going to be managed by a different doctor. All medical treatment for a work-related injury or illness must be approved by your treating doctor except in an emergency. If your work-related injury or illness poses a risk to your life and your doctor is unavailable to treat you, you may seek the help of another doctor. Your treating doctor may refer you for medical treatment to another doctor, without permission or approval from the Division or the insurance carrier.

A doctor may not bill you for treatment of a work-related injury or illness. The doctor may send you a copy of the bill marked as "information only" upon your request.

The doctor cannot try to contact you for payment using any of the following methods:

- send you a bill when you did not request an information copy;
- have a collection agency send you a letter or contact you;
- file a lawsuit in court against you; or
- collect, charge or require you to pay a co-payment when filing a claim with private health insurance.

A doctor may only request payment from you when the work-related injury or illness has been reviewed through dispute resolution hearings before the Division or the Courts and has been finally determined to be an injury or illness that is not work-related.

It is beneficial to all parties involved that you return to work as quickly as possible. Injured workers that continue to work as part of their recovery/treatment plan, in medically appropriate productive work, heal faster, and may retain their job skills.

Return to Work

Injured workers who remain off work longer than is medically necessary are more likely to:

- develop complications that will lengthen their recovery;
- become depressed;
- lose physical conditioning; and/or
- focus on their pain and injury.

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Many employers offer Return to Work opportunities. Return to work is set up by an employer to help injured workers go back to work more quickly and safely while they heal. This can be done by either making changes to their regular job or placing them in a temporary or alternate work assignment that fits the restrictions as determined by their treating doctor. You should contact your employer to check on the availability of return to work opportunities.

Income Benefits

[Sections 413.041-408.047, Rules 128.1-128.7]

Income benefits replace a portion of wages you lose because of a work-related injury or illness. There are four types of income benefits:

- temporary income benefits (TIBs);
- impairment income benefits (IIBs);
- supplemental income benefits (SIBs); and
- lifetime income benefits (LIBs).

Income benefits may not exceed the maximum weekly amount set by state law. Temporary income benefits, impairment income benefits, and lifetime income benefits are also subject to a minimum amount set by state law. Maximum and minimum benefit amounts are based on the state average weekly wage.

You must report any income (other than income benefits you may be receiving) to the Division and the insurance carrier so an adjustment can be made to your income benefit payments. You may be fined and/or charged with fraud if you receive temporary income benefits while also receiving wages from an employer without informing the Division and the insurance carrier.

Income benefits are no longer payable following the death of an injured worker receiving income benefits. The injured worker's beneficiaries may be eligible to apply and receive death benefits if the injured worker's death was due to the work-related injury or illness.

Calculation of Average Weekly Wage (AWW)

Your income benefits are determined based on the calculation of your average weekly wage (AWW). A full-time employee is one who regularly works at least 30 hours per week. To calculate your average weekly wage, (**Note:** calculation is different for school district employees), add

your earnings for the 13 weeks prior to the injury including any overtime or other special pay and any non-pecuniary wages the employer does not continue after your injury and divide by 13. If you did not work for your employer for 13 weeks before the work-related injury or illness occurred, your average weekly wage may be calculated using the earnings of an employee with the same or similar job.

AWW Calculation – Full time employee

13 weeks wage at \$824.23 = \$10,714.99

Health Insurance Premium
(discontinued \$82 per week x 13) = \$ 1,066.00

Average weekly wage = \$11,780.99 ÷ 13 = \$906.23

Death and Burial Benefits

[Sections 408.181-408.187, Rules 132.1-132.17]

Death benefits can replace a portion of lost family income for the eligible family members of a worker killed on the job. **Burial benefits** pay for some of the deceased worker's funeral expenses.

When Death Benefits Begin and End

A beneficiary becomes eligible for death benefits the day after the worker's death. Death benefits end depending on the beneficiary's qualifications.

Death benefits are paid if there is a:

- surviving spouse;
- dependent child;
- dependent grandchild; or
- other eligible dependent family member

of an employee killed on the job. Except for the spouse and minor children, other family members must have been at least 20 percent dependent on the deceased worker's income to receive death benefits.

For more information on Workers' Compensation Benefits see the following fact sheets:

- Temporary Income Benefits (TIBs)
- Impairments Income Benefits (IIBs)
- Supplemental Income Benefits (SIBs)
- Lifetime Income Benefits (LIBs)
- Death and Burial Benefits
- Average Weekly Wage Calculations