



NCAComp, Inc. Progression of a Claim

 Action for Employer

 Action for NCA Adjuster

1

Injury Occurs

-  The claim information should be entered either via the NCAComp, Inc. website, email or fax.
-  Perform the **two-point contact** by calling the employer and the claimant.
Determine **compensability** and produce a **Claim Number**.

2

Gathering Information

-  Submit the **C-240** and **C-11**.
*Utilize **NCAComp, Inc. Customer Portal** for an efficient process for submitting forms.
-  The information should be verified and entered into the system.

3

Lost Time

Day 1 through 7 - **Week Waiting period** applies, no payments are made.
Day 8 through 14 - The week waiting period applies, payments begin.
Day 15 - Ongoing; the first week waiting period is waived.

4

Payment to Injured Worker

The injured worker is entitled to either **Full Wage Continuation** or **Direct Compensation Payments**.

5

Amount of Payment

Payment to the injured worker is two thirds of their **average weekly wage (AWW)** up to a **maximum rate** set by NYS and dependant on the **degree of disability** which is opined by a Medical Doctor.

6

Return to Work

Return to work **Light Duty Release** or **Full Duty Release**

-  File a C-11 showing return to work and **Employer Reimbursement Request** showing any wages paid.

7

Reimbursement Process

Once the Employer Reimbursement Request is filed with the **Workers' Compensation Board** the reimbursement must be approved in a **decision**.

Reimbursement is made based on the benefit the injured worker would have received.

At the time of a **Schedule Loss of Use Award** employer reimbursement is made in full.

NCAComp INC.

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NCAComp, Inc. Progression of a Claim - Glossary

Glossary

- Two-point contact** Completed by the Claims Adjuster, to contact the Employer and Injured worker to investigate the accident submitted.
- Compensability** Determined by the Claims Adjuster, if the incident should be covered under Workers' Compensation.
- Claim Number** Alpha-numeric number assigned by NCA to identify the claim.
- C-240** Employer's Statement of Wages and Earnings: to assist the WCB in determining the proper rate of indemnity benefits to be paid to the injured worker.
- C-11** Employer's Report of Injured Employee's Change in Status or Return to Work: must be filed with NCA as soon as possible when a claimant goes out of or back to work.
- NCAComp, Inc. Customer Portal** NCAComp, Inc's online system offered to assist in submitting forms.
- Week waiting period** The first seven days of an accident, when the injured worker is losing time.
- Full Wage Continuation** If applicable and appropriate the employee is paid their full wages (i.e. sick time)
- Direct Compensation Payments** Payments are made to the injured worker directly from NCAComp, Inc.
- Average Weekly Wage** (AWW) An average of the 52 weeks PRIOR to the date of accident.
- Maximum Rate** Maximum allowable rate of weekly compensation (indemnity benefits), based on claimant's average weekly wage and the NYS max allowable rate.
- Degree of disability** A percentage of disability to perform their job ranging from 0% (able to perform their job) to 100% (totally disabled).
- Light Duty Release** The injured worker is released with restrictions.
- Full Duty Release** The injured worker is released without restrictions.
- Employer Reimbursement Request** Form completed by the Employer to request money for wages paid.
- Workers' Compensation Board** The regulatory agency that governs workers' compensation.
- Decision** The result of an administrative proceeding that provides regulatory direction on claim.
- Schedule Loss of Use Award (SLU)** A bulk payment of an award for the percentage loss of use of an appendage (i.e. arm, leg, finger, etc.).

