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# Investigation Solutions

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## IN THIS ISSUE:

- Dedicated Reporting Procedure – 2
- Notification – 3
- Third Party Liabilities – 4
- Obtain A Statement - 5
- The Aduster Determines Eligibility - 7
- Well-Maintained Employee File - 8
- Guide To Investigations - 9



## CLAIMS INVESTIGATIONS PROCEDURES

Daniel J. Fleming , Business Owner

The purpose of any investigation is to gather information which is either:

1. Relative to the claim
2. Potentially relative to the claim

Good results depend on good case preparation.

Know the history of the case and the issues to be resolved.

Most importantly, know as much as possible about your employee before you begin the investigation.





# MANAGING WORKPLACE INJURY

## A DEDICATED REPORTING PROCEDURE

Even before an incident occurs, you can do a great deal to prepare by having a dedicated procedure for a workplace injury in place. Is there a reporting procedure?

Who is the first report? There needs to be an assigned point person for injury situations and standardized plan of action. Once a dedicated procedure is implemented and the employees are notified

of these best practices, managing a workplace accident or injury has significant clarity. With a set procedure, the air of suspicion or potential for an adversarial relationship between the worker and your company diminishes.



The importance of a well-documented employee file cannot be minimized from an investigation's perspective. Important documentation should be gleaned as it is critical in assisting your insurance carrier in managing a claim effectively. A current employee photograph, vehicle information, current address/residence, family members or room-mates that will be useful should a claim progress into further investigation.



### First Notification



# MANAGING WORKPLACE INJURY

## NOTIFICATION

A true worksite accident, a motor vehicle accident, a repetitive use injury or an environmental event resulting in an employee injury requiring either time loss, medical treatment or both. Once an event occurs and

notice is made to the employer there are some basic events that follow. An incident, injury, or occupational disease the most critical of information must be obtained as soon as possible to manage the

best possible claim outcome. Camera/surveillance and any machinery or tools involved must be immediately secured and maintained as evidence should there be the possibility of a third-party.



Within the "first reporting procedure", perhaps securing evidence and tools can be added to your company's protocols. If this information is well-known to the employees, the inference that a work-place injury becomes a suspicious event is alleviated when photographs are taken.

### First Reporting Procedure



# MANAGING WORKPLACE INJURY

## THIRD-PARTY / ESSENTIAL COMPONENT IN A WORKERS' COMPENSATION CLAIM

The necessity to make that determination, or even the potential for that responsibility shift can often be lost if an initial comprehensive assessment is missed until days or even weeks after the incident.

And the HR department holds the key to the entire part of the claims process. Never delay in obtaining medical treatment for your employee, but the benefits of calling in an investigator to collect the

appropriate information on the date of loss cannot be undervalued.



Is there any possibility to transfer liability, even in part from the workplace to another entity?

From an investigations perspective this is the optimal time to obtain statements and investigate, without jeopardizing or delaying medical treatment.



### Third Party Liabilities



# MANAGING WORKPLACE INJURY

## OBTAIN A STATEMENT

Witness information is fresh. The worker's recall is far more accurate. Employment related issues, should there be any, have hopefully all been appropriately documented in the employees file and that

can all be reviewed as the claim progresses. You may have protocols in place to conduct a comprehensive investigation immediately, but objective eyes and ears will best represent your company and the

worker through the duration of the claim. There are times when an accident is just that—a true accident. Does this mean an investigation is not necessary? Not necessarily.

Often times an investigation at the time of an accident can provide the employer with information to better secure the workplace and create a safer environment. So, while an investigation routinely used for compensability issues, it can also be used to mitigate future accidents when the appropriate information is obtained by a knowledgeable investigator.

An investigation always needs to be done, even if the facts are straightforward. This can help down the road in dealing with a development of new symptoms or exaggerated medical issues. Timing is everything and gathering all information available at the onset may save you a lot of time, money, and stress.

But what if there was an incident and your worker either didn't want to file a claim or refused medical treatment? Get a statement! That is quite possibly the most important time to get a statement. Remember, the worker has 30 days in which to file a claim after an incident occurs. 30 days is a long time to remember the details of an event.



### Get A Statement

# MANAGING WORKPLACE INJURY

## NOTIFICATION IS MADE TO YOUR CARRIER

With notification, to be able to provide your carrier with a comprehensive AOE/COE investigation will save them time and you money! A picture is worth 1000 words and with a good statement of the

worker and witnesses, you are providing your carrier with a clear picture even before they contact the worker. Photographs of the accident scene/location, photographs of machines or tools and even video

documentation of the workings of those objects are essential for an adjuster to accurately manage a claim. Stories can change, documentation can be lost or even distorted.



To provide your carrier with a complete picture at the time of the incident will give credibility to the claim's decision process.

The further away from an event, the less accurate the recall. That is a huge frustration should a claim malinger.

### **Notification Is Made To Your Carrier**

# WORK INJURY





# MANAGING WORKPLACE INJURY

## THE ADJUSTER DETERMINES ELIGIBILITY



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The adjuster determines eligibility of benefits based on the causation and the claim foundation; did this event occur arising out of or in the course and scope of employment? Are there mitigating factors?

Were there rumors of other issues circulating around the worker prior to the reported accident? Determination can be done quickly, when the circumstances are straightforward and you have a worker either

motivated to return to work, or clear injuries that are well documented as a result of the accident. Once determination is made during the evaluation process, the claim is either assumed or denied.



The adjuster is wearing all the hats in managing a claim; medical, time loss, compensability investigation.

But you, as the HR department can and should direct components of that process.

### The Adjuster Determines Eligibility

