

# The Employee's Guide To UMass Boston's Workers' Compensation Procedure

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**If you are injured, become ill, or have an accident while on the job, "hereafter referred to as incident" the following steps must be taken:**

**NOTIFY YOUR SUPERVISOR AS SOON AS POSSIBLE**

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**• GO DIRECTLY TO EMERGENCY ROOM IF NECESSARY**

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- Call 911 (from UMB phone) if Emergency

**OR**

- Call 7-7799 (Public Safety Dispatch) if Non-Emergency

**AND**

- Go to [umb.edu/hr](http://umb.edu/hr) to obtain the Employee Forms

**AND**

- Call 7-4000 (Customer Service) to record incident and inform Facilities, Environmental Health & Safety, HR

**Return Forms To:**

Department of Human Resources  
100 Morrissey Blvd. Boston, MA 02125  
Victoria Monzon ([victoria.monzon@umb.edu](mailto:victoria.monzon@umb.edu))

(617) 287-5176

Susan D'Amato ([Susan.damato@umb.edu](mailto:Susan.damato@umb.edu))

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Fax: (617) 287-5179

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## Employee's Checklist

**In the event you the employee are injured, have an accident on the job, or contracts a work-related illness the following steps must be taken by you:**

- 1. Immediately report** any work-related incident to your supervisor.
  - In case of an emergency, go directly to the Emergency Room**

**2. Go to [umb.edu/hr](http://umb.edu/hr)** to complete all forms *with 24 hours of incident* (or call HR at (617) 287-5150 to obtain a copy of these forms) and return completed forms to HR:

- *Employee Incident Report(HRS-01)*
- *Physician's Report (HRD)* (if sought medical treatment)
  - Your treating health care provider may fax this directly to HR at (617) 287-5179

**If you are out more than 5 days, you will also need to complete and return to HR:**

- *Authorization for Release of Medical Information (HRS-02)*
- *Concurrent Employment Review Form (HRD)*
- *Employee Timesheet Authorization Form (HRS-04)*
- *Medical Release/Return to Work Form (HRS-03)*
  - Please be advised that Family and Medical Leave Act (FMLA) leave will run concurrent with any workers' compensation leave.
  - The first five (5) days of disability are not compensated by worker's compensation unless you are disabled for twenty-one (21) days or more.

**3. Within 24 hours following emergency medical treatment or before seeking future medical treatment** you or your medical provider must call the state insurer's Utilization Review Agent for approval **each time treatment is sought**: **(800) 266-7991**

- First visit/immediate treatment is always covered by Workers' Compensation. However, each and every follow up treatment or visit must receive prior approval to ensure proper payment.
- Following this procedure will ensure that all related medical bills will be paid in a timely manner.

**4. Contact your supervisor/department as per your normal departmental policy** by calling in sick each day until you:

- Return to work based on fulfilling #6 below, or
- Provide medical documentation to HR of the probable timeframe of your absence, or
- Are approved for Workers' Compensation leave of absence.

**5. Keep your supervisor/department updated** as your Workers' Compensation process evolves and re-evaluations occur.

**6. Prior to returning to work, you must submit to HR a health care provider's note** indicating you are able to return to work and perform the essential duties of your job with or without reasonable accommodation.

- HR may contact your health care provider asking for verification that you are able to perform all essential job duties with or without reasonable accommodation as required by your job description.
- If you need an accommodation due to restrictions, contact HR which will discuss with your department and the Office of Diversity and Inclusion whether these restriction(s) can be reasonably accommodated.

**7. Inform your supervisor** of your expected return date.

- Please note that you cannot return to work until notified by HR that the University has all of the necessary documentation and has cleared you to return to work.

**FOR QUESTIONS OR MORE INFORMATION PLEASE CONTACT:**

**Victoria Monzon, Leave & Benefits Manager: (617) 287-5176**

[victoria.monzon@umb.edu](mailto:victoria.monzon@umb.edu)

Susan D'Amato, Senior HR Generalist

[susan.damato@umb.edu](mailto:susan.damato@umb.edu)

**Department of Human Resources  
100 Morrissey Blvd. Boston, MA 02125**

**(617) 287-5150**

**FAX: (617) 287-5179**

[www.umb.edu/hr](http://www.umb.edu/hr)

### *What is Workers' Compensation?*

Workers' Compensation is a type of insurance that is provided by state law to employees who are injured on the job or who contract a work-related illness. Workers' Compensation is a "No-Fault System," which means employees do not have to prove blame in order to collect wage and medical benefits. However, the burden is on the employee to prove that a disability is work-related. Chapter 152 of the Massachusetts General Laws establishes guidelines and provisions for the continuation of compensation coverage and payment of medical bills when employees are injured on the job and unable to work.

### *Scope of Coverage*

Anyone who is currently being paid on the University of Massachusetts Boston payroll is an employee and so is covered by Workers' Compensation Insurance regardless of whether the work location is on or off campus. Coverage applies to: benefitted and non-benefitted faculty and staff, graduate student employees, and student employees.

Worker's Compensation is not available to non-employees such as: contingent workers, independent contractors, students who are not UMass Boston student employees, and visitors to campus. If such a person is injured, becomes, ill, or has an incident while on campus, please report this to Customer Service at 617.287.4000 and contact Matt Wamback at UMass Systems Office of the Treasurer at [www.umassp.edu/massedu/treasurer/procedures](http://www.umassp.edu/massedu/treasurer/procedures).

### *How Workers' Compensation is Administered*

**HR: University of Massachusetts Boston** - The Benefits Section of Human Resources (HR) assists supervisors and injured employees with worker's compensation issues, incidents, and claims processing. HR also serves as a liaison between the state Workers' Compensation Unit (HRD/WCS), the Department of Industrial Accidents (DIA), and University employees. Human Resources is located in the Quinn Administration Building 3<sup>rd</sup> Floor, and our phone number is (617) 287-5158 or (617) 287-5168. ☎

**HRD/WCS: State Insurer** - The Commonwealth's Human Resources Division (HRD) is the University's Workers' Compensation (WCS) insurance provider. The state's WC Section is responsible for developing and administering policies and procedures for all employees or the state. It also reviews injury reports, decides which claims are compensable, and has a Utilization Review Board that reviews/authorizes medical care and treatment protocols.

**DIA: Massachusetts Department of Industrial Accidents (DIA)** - The DIA represents the interests of employees who have been injured on the job. It settles disputes between the state insurer and employees. Employees may seek recourse through a four-step process: Conciliation, Conference with DIA Board, Hearing with an Administrative Judge, and Hearing before a Reviewing Board.

## Reporting a Work-Related Injury or Illness

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If you are injured on the job or suffer a work-related illness, your *supervisor should be notified as soon as possible*. **Every work-related injury or work-related illness** must be reported, regardless of whether it might seem relatively minor or insignificant. You should report the nature of the injury and the circumstances surrounding the incident.



### *Seeking Medical Treatment*

- IN AN EMERGENCY, SEEK MEDICAL ATTENTION AT THE EMERGENCY ROOM

If you need medical attention for a work-related injury or illness, you may seek treatment from your own health care provider. The University's workers' compensation insurance carrier will pay for any initial cost(s) associated with your approved workers' compensation claim.

**You or your health care provider must call the HRD/WCS Utilization Review Agent for pre-approval of treatment or within 24 hours after seeking *emergency* treatment. The phone number is: (800) 266-7991 ☎**

**Within 24 hours following emergency medical treatment or before seeking future medical treatment** you or your health care provider must call the HRD/WCS Utilization Review Agent for approval **each time treatment is sought: (800) 266-7991**

**First visits/immediate treatment are always covered by Workers' Compensation. However, each and every follow up treatment or visit must receive prior approval to ensure proper payment.**

(Following this procedure will ensure that all related medical bills will be paid in a timely manner.)

## *Completing the Paperwork*

### *Employee Incident Report*

You must complete an Employee Incident Report ☐ within 24 hours of the time when an incident occurs to establish an official record of your injury/illness. This form must be completed by you and submitted to your supervisor who will acknowledge receipt of the form. Your supervisor will forward the original to HR and send a copy of the form to their department head.

☞ *Employee Incident Report (HRS-01)*.

The following employee forms must be completed and returned to HR:

- Physician's Report Form (HRD),
- Authorization of Medical Information Form (HRS-02),

- Concurrent Employment Review Form (HRD), and
- Employee Timesheet Authorization Form (HRS-04)
- Medical Release/Return to Work Form (HRS-03).

All above forms must be mailed/faxed/scanned to: Human Resources, Attn: Benefits Section, 3<sup>rd</sup> Fl. Quinn Administration Building, UMass Boston, 100 Morrissey Blvd., Boston, MA 02125. The Fax number is (617) 287-5179. You may scan and email the forms to:

[barbarajean.conneely@umb.edu](mailto:barbarajean.conneely@umb.edu).

If you have any questions concerning any of these forms, please call the Benefits Section of the HR office at (617) 287-5158 or (617) 287-5168. ☎

### *Employee Incident Report*

You, the injured employee, must complete an Employee Incident Report 📄 within 24 hours of the time when an incident occurs to establish an official record of your injury/illness.

☞ *Employee Incident Report Form (HRS-01)*.

### *Physician's Report Form*

Have your health care provider fill out this form and return it to HR *as soon as possible*. HR will forward the completed form to the state's HRD/WCS on your behalf. Since the state has a limited amount of time to reach a decision on your claim, it's important for your medical provider to complete this form as soon as possible, or your claim may be denied due to lack of information.

☞ *Physician's Report Form (HRD)*.

### *Authorization for the Release of Medical Information*

 You, the injured employee, must sign an **Authorization for Release of Medical Information** Form. This form authorizes hospitals and health care providers to release any and all information relating to your injury, to persons and/or institutions involved in the Workers' Compensation process. The state's HRD/WCS will not pay medical bills related to the injury unless it has received this authorization form.

If you are seriously injured and/or not immediately available to sign the form, your supervisor should mail the Authorization to your home.

☞ *Authorization for Release of Medical Information (HRS-02)*.

## *Concurrent Employment Review Form*

All injured workers must complete the **Concurrent Employment Review Form** . The purpose of the Concurrent Employment Review is to ensure that you receive the appropriate compensation which is based on the loss of all earnings.

- A. If you do not have another job outside of the University, write “None” on the line asking for the other employer’s name and sign the bottom of the form.
- B. If you receive wages from one or more other employers outside the University, state law requires you to report all outside earnings and to indicate whether you will continue working for the other employer(s).

 *Concurrent Employment Review Form (HRD)*.

The Reform Act Relative to Fair & Effective Compensation of Injured Workers of 1992, toughened criminal sanctions for perpetrators of insurance fraud in the Workers’ Compensation system. Section 11D of C. 152 M.G.L. “...failure to report any earnings may subject the employee to civil or criminal penalties...”

## *Timesheet Authorization Form*

You must submit the Timesheet Authorization Form to HR to ensure proper use of your accrued paid time off.

 *Employee Timesheet Authorization Form (HRS-04)*.

## *Where to Send Medical Bills*

The state Workers’ Compensation (HRD/WCS) Unit is the insurer of your workers’ compensation claim and is also the Utilization Review (UR) Agent for medical treatment related to your claim. HR will provide to you your file number to be used in filing your claim. If you seek medical attention or treatment for a work-related injury/illness, **instruct your health care provider to send bills directly to:**

**Human Resources Division/Workers’ Compensation Section  
(HRD/WCS)  
One Ashburton Place, Third Floor  
Boston, MA 02108  
(617) 727-3437 **



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## Absence from Work for 1-5 Days

Contact your supervisor/department as per your normal departmental policy by calling in sick each day until you:

- Return to work based on medical clearance and HR approval  
*(See Returning To Work, Page 26)*, or
- Provide medical documentation to HR of the probable timeframe of your absence, or
- Are approved for Workers' Compensation leave of absence.

Keep your supervisor/department updated as your Workers' Compensation process evolves and re-evaluations occur.

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## Absence from Work for 5 or More Calendar Days

If you become disabled and are unable to work for a period of five or more calendar days, notify your supervisor. Your supervisor will notify HR of your absence. You as the employee are also encouraged to notify HR to ensure proper documentation is being timely gathered.

HR will fill out a **Form 101-First Report of Injury** ☐. Form 101 must be submitted to the HRD/WCS within seven (7) business days after the 5th calendar day of disability. HR completes the University wage information, and forwards Form 101 directly to HRD/WCS. Within 14 days of receiving Form 101, the HRD/WCS must begin paying you for lost wages or send a denial letter explaining why the claim was not accepted.

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## Wages & Disability Benefits

### *Calculating Workers' Compensation*

Wages from any job you may hold outside the University will be considered by the state WC Unit Adjuster when calculating an Average Weekly Wage (AWW) and your Compensation Rate. If you continue working at your outside job following an accident, illness, or incident on the job, you would be paid Section 35 Benefits (partial incapacity) not Section 34 Benefits (total incapacity) under Massachusetts General Laws (M.G.L.) Chapter 152. The state HRD/WCS reviews concurrent employment to insure you receive the appropriate compensation based on the loss of all earnings. If you return to work at any of your jobs, adjustments must be made to the compensation rate and the payment section.

## *How Disability Income is Determined*

Most benefits are based on your average weekly wage (including overtime, tips, etc.) for the 52 weeks prior to your date of injury. If you have not been in your current job for that long, the insurer will use the actual wages of a co-worker who had been in the same job as yours for at least 52 weeks. [Source: *DIA Guide to Massachusetts Workers Compensation System*]

## *Temporary & Partial Disability Benefits*

### Temporary Total Disability Benefits

You may qualify for total temporary disability income benefits if your injury/illness leaves you unable to work, considering your age, training, and experience, for six or more calendar days. You can receive these benefits for up to 56 weeks as long as you are not earning any income. **The first five (5) days of disability are not compensated unless you are disabled for twenty-one (21) days or more.** Temporary Total Disability Benefits equal 60 percent of your average weekly wage based on gross earnings over the 52 weeks prior to the injury, up to a maximum amount.

### Partial Disability Benefits

If you are able to do some work, but have lost part of your earning capacity due to injury or illness, you may qualify for partial benefits for a maximum of 260 weeks. For certain types of severe disability, the benefits may extend to 520 weeks.

Partial disability payments equal 60 percent of the difference between your average weekly wage (AWW) prior to the injury and the weekly wages you are now capable of earning. The maximum compensation under this section of the law is limited to 75 percent of what you would receive if you were getting total temporary benefits.

## *Notification of Claim Approval or Denial*

The state's HRD/WCS will reach a decision on the compensability of your workers' compensation claim within fourteen (14) days after receiving **Form 101 - Employer's Notice of Injury Report**. The state's HRD/WCS will notify you of their decision by sending a certified letter to your home.

If the claim is *approved*, the state's HRD/WCS must begin paying you for lost wages. If the claim is *disapproved*, you will receive an explanation for the denial and information on how to appeal the decision. The Department of Industrial Accidents (DIA) is also notified whenever workers' compensation claims are denied.

HR receives a copy of the claim decision letter, and HR subsequently notifies your department as to whether the claim was approved or denied.

*Workers' Compensation Payments (Note: payments are not direct deposit)*

Workers' Compensation checks are issued on a bi-weekly basis and are sent directly from the state's HRD/WCS to your home. No state and/or federal taxes or payroll deductions of any type are withheld from disability checks.

The first two Workers' Compensation checks are sent to HR. After the checks have arrived, you will be asked to come to our office to endorse them. HR will refund the checks back into your department's account and make adjustments to your sick time balance (crediting back up to 60% of the sick time used during your absence), state retirement, and FICA deductions.

The state's HRD/WCS can pay on a claim for up to 180 calendar days without prejudice, during which time payments can be stopped or modified after giving a seven (7) business day notice to the injured employee and the DIA.

### *When Benefits May be Stopped or Reduced*

After the 180-calendar day pay-without-prejudice period has passed, the state's HRD/WCS can stop or reduce payment only for reasons specified by the Workers' Compensation Act and regulations. If the state's HRD/WCS contests a claim or stops or reduces payment once it's been initiated, the employee can file an Employee Claim - Form 110 to commence the dispute resolution process at the Department of Industrial Accidents (DIA) after 30 calendar days have passed from the alleged onset of disability. **If you need a copy of Form 110, please contact HR.**

Your benefits may be stopped or reduced for any of several reasons. Some of the more common reasons are:

- it is ordered by an arbitrator, administrative judge, reviewing board, or higher court;
- you returned to work (the insurer must resume benefits if within 28 calendar days you leave work again due to the same injury);
- the insurer has been given a medical report by your treating doctor or an impartial medical examiner stating that you are capable of returning to work, and your employer has reported that a suitable position is available for you;
- you are requested to attend an evaluation by a DIA vocational rehabilitation review officer and you refuse to attend, or refuse to cooperate with the provision of vocational rehabilitation services;
- you are imprisoned after conviction for either a misdemeanor or felony.

### *Accruing Sick Leave & Vacation Credits*

Benefit employees who are on leave due to an industrial accident, earn sick leave and vacation credits during their recuperation period. You may use this accrued time upon returning to work.

### *Continuation of GIC Insurances*

Benefitted employees, who are on a leave without pay for an entire calendar month or more, may continue receiving their basic health insurance, life insurance, and/or long-term disability insurance(s) coverage by paying the full cost of the premium directly to the Group Insurance Commission (GIC).

If you take a leave of absence because of a personal injury or illness, **you can apply to the GIC for a reduction in the monthly premium amount by filling out the GIC Form 11.** Your health care provider is also required to complete a portion of the form.

☞ *Application for Reduction of Monthly Premium Form 11 (GIC).*

### *Medical Reports Related to Your Injury*

If you receive further evaluation related to your injury, please submit reports to: Human Resources, Benefits Section, Quinn Administration Building, University of Massachusetts, Boston, 100 Morrissey Blvd., Boston MA 02125.

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## **Appeal Process - When a Claim is Denied**

If the state's HRD/WCS denies initial liability, you will receive a certified letter  giving the reasons why the workers' compensation claim was contested. The state's HRD/WCS must inform you of your right to challenge the decision by filing an appeal with the Department of Industrial Accidents (DIA). HRD/WCS also sends a copy of the denial letter to HR's Workers' Compensation section. We, in turn, notify your department of the state's decision.

You may wish to consult with your department head about the possibility of taking a Medical Leave without Pay or a Personal Leave without Pay (LOA).

### **Claim denials can be appealed to the DIA. The appeal process involves four steps:**

① **Conciliation** - An informal meeting between you, the insurer, and a conciliator from the DIA. This meeting, called conciliation, normally takes place within 12 business days of the DIA receiving the request. There is an attempt to reach a voluntary agreement between you and the insurer. No decision can be ordered at this proceeding. If a voluntary agreement cannot be reached, the status of your claim would remain the same as before, and your case could be referred to one of the DIA judges for a conference. Or you and the insurer could agree to voluntary arbitration.

② **Voluntary Arbitration** - Any time prior to five business days before a conference, you and the insurer can agree to refer your disputed case to an independent arbitrator. HR takes no further action on your claim. You present your case to the arbitrator, the state WC Unit does the same, and the arbitrator will then issue a

decision that is binding on both parties.

- ③ **Conference** - The conference is an informal proceeding before an administrative judge. The judge learns about the case from presentations by the parties and the submission of documents such as medical reports, wage statements and affidavits from witnesses. Witnesses are not called; you just tell the judge what the witnesses would have said. Testimony is not sworn. At the conference you would need to show that you are disabled, the disability was work-related, and that any disputed medical bills were for necessary treatment. After the conference, usually within 7 days, the judge issues an order telling the insurer to pay your benefits or ruling that they are not liable for payments to you.

The conference order can be appealed by either party. This appeal must be filed with the DIA within 14 calendar days of the issuance of the order. If either party does appeal the conference order, a formal hearing before the same judge will be scheduled.

- ④ **Hearing** - The hearing is a formal proceeding held before the same administrative judge who presided at the conference. Rules of evidence will apply and sworn testimony is taken. Witnesses are called and cross-examined by the opposing party. The judge may continue to gather information after the hearing. The guideline for issuance of a decision is 28 calendar days, but this is only a guideline and it may take longer to get a decision. The decision at a hearing can be appealed to the Reviewing Board by either party. The appeal to the Reviewing Board (Form 112) must be filed within 30 calendar days of the issuance of the hearing decision.

### *The Reviewing Board*

The Reviewing Board is made up of six judges, three of whom will examine the hearing transcripts. They may ask for written briefs or oral arguments from either party. This panel can reverse or uphold the decision of the administrative judge.

### *Further Appeals*

Review Board decisions can be appealed to the Massachusetts Court of Appeals.

### *DIA Locations*

The DIA has offices located in Boston, Fall River, Lawrence, Worcester and Springfield. For additional information about the Appeal Process, contact the DIA, (413) 784-1133 📞.

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## Returning to Work

The decision to return to work and the determination of how much work you can do, what limitations there are, etc., should be made in consultation with your physician. When you are ready to return to work, contact HR.

### *Notification to HR and Your Supervisor*

**Prior to returning to work, you must submit to HR the doctor's authorization** indicating you are able to return to work and perform the essential duties of your job with or without reasonable accommodation.

- HR may contact your medical provider asking for verification that you are able to perform all essential job duties with or without accommodation as required by your job description.
- If you need an accommodation due to restrictions, contact HR which will discuss the issue with the Office of Diversity and Inclusion and your department to determine whether your restrictions can be reasonably accommodated.

**Inform your supervisor** of your expected return date.

- Please note that you cannot return to work until notified by HR that the University has all of the necessary documentation and has cleared you to return to work.

Your department prepares a Personnel Action form (P.A.) ☐ to reinstate you to active status on the payroll. Human Resources will notify the state's HRD/WCS to discontinue or adjust disability checks.

### *Resumption of a Claim*

A resumption of a claim is filed if you become incapacitated from a prior work related injury and are deemed disabled by a physician. *Example:* An employee returns to work after being out on Leave Without Pay due to an industrial accident. Within a period of time, the employee discovers that s/he is physically incapable of resuming the work and re-files for workers compensation.

### Within 28 Calendar Days of Disability

If the resumption of your workers compensation claim is filed within 28 calendar days of returning to work, you must give HR and the HRD/WCS notification by certified letter ☐ within twenty-one (21) calendar days of leaving work that the disability resulting from the injury, renders you incapable of performing work. If you fail to give notice via certified

letter, within twenty-one calendar days of leaving work, the resumption of the workers' compensation claim should be filed in accordance with the procedure described on the next page.

Upon receiving the certified letter, HR and the state's HRD/WCS adjuster will verify the information contained therein. HR is required to provide the adjuster with: dates of lost time, your average weekly wage, and a copy of the latest medical report if one is available. If there were an opportunity for you to be placed on restricted or light duty during the recuperative period, this information would also be given to the state's HRD/WCS adjuster.

The Workers' Compensation adjuster reviews all documentation. If the resumption claim is filed in accordance with Massachusetts General Laws ch. 152, sec. 8 (2), the workers' compensation benefits will be re-instated. Department of Industrial Accident (DIA) Form 107 is used by the state Workers' Compensation adjuster to approve the claim for payment. If the claim is reinstated, you will receive an approval letter from the state's HRD/WCS along with a copy of Form 107.

If the claim is denied, you will receive a denial letter and a copy of Form 104. Resumption denials can be appealed to the Department of Industrial Accidents (DIA). For information about the Appeal Process, contact the DIA, (413) 784-1133 ☎.

#### After 28 Calendar Days of Disability

If the resumption of a workers' compensation claim is initiated after 28 calendar days of returning to work, you must essentially file in the same manner as if this were a new claim. Call HR at (617) 287-5158 ☎ for assistance in resuming a claim.

It will be necessary for you to sign a new *Authorization for Release of Medical Records* form and have your doctor complete a *Physician's Report*. Any other information you wish to provide in relation to the injury may also be submitted to Human Resources.

HR completes a Resumption Form and forwards all necessary forms/information to HRD/WCS within 48 hours of being notified about the claim resumption.

The state WC adjuster reviews the documentation and determines whether the claim should be approved or denied. DIA Form 107 is used by the adjuster to approve the claim for payment. If the resumption of your workers' compensation claim is approved, the state WC Unit will send you an approval letter and a copy of Form 107.

If the claim is denied, you will receive a denial letter and a copy of DIA Form 104. Resumption denials can be appealed to the Department of Industrial Accidents (DIA). For information about the Appeal Process, contact the DIA, (413) 784-1133 ☎.

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## Other Disability Benefits

### *Permanent and Total Disability Benefits*

Employees who are totally and permanently incapable of doing any kind of work as a result of a work-related injury or illness, and who have exhausted the appropriate temporary disability benefits, qualify for permanent disability benefits. The amount of the benefit is equal to two-thirds (2/3) of the average weekly wage (or a minimum of 20% of the state average weekly wage) based on the 52 weeks prior to the employee's injury, up to a maximum of the state average weekly wage.

### *Permanent Loss of Function and Disfigurement Benefits*

Under Chapter 152, section 36 of the Massachusetts General Laws, employees who sustain a permanent loss of certain specific bodily functions or surgical scars on the face, neck, or hands, may be eligible to receive a one-time lump sum payment. This benefit is in addition to other payments for lost wages, medical bills, etc. Employees who are seeking this type of benefit should contact the Department of Industrial Accidents (DIA) at the Springfield office (413) 784-1133 ☎ for more information and to request an application form. The DIA can also be reached at the Boston office by calling (617) 727-4994. ☎

### *Lump Sum Settlements*

A lump sum settlement is a one-time payment made to a disabled employee in place of weekly compensation checks and certain other benefits. Please visit [www.mass.gov/dia](http://www.mass.gov/dia) for more information.

After a lump settlement has been negotiated between the employee and the insurer, Human Resources takes the employee off **Paid Leave of Absence Due to Industrial Accident**. The former employee may request return of his or her retirement contributions to the Massachusetts State Employees' Retirement System upon his or her resignation from the University if it coincides with a lump sum settlement.

### *Death Benefits*

Reasonable burial expenses up to \$4000 will be paid in cases where the injury results in death. Surviving spouses can receive weekly benefits equal to two-thirds of the deceased worker's average weekly wage up to a maximum of the state average weekly wage. Surviving spouses become eligible for yearly cost of living increases two years after the date of the injury. If the spouse remarries, \$60 a week is paid to each eligible child. The total weekly amount paid to dependent children cannot exceed the amount the spouse had been receiving.

**University of Massachusetts Human Resources (HR)**

(provides forms and guidance)

Benefits Section - Human Resources  
Quinn Administrative Bldg. 3<sup>rd</sup> Floor,  
100 Morrissey Blvd. Boston, MA 02125  
Telephone: (617) 287-5150  
Facsimile: (617) 287-5179  
[Victoria.monzon@umb.edu](mailto:Victoria.monzon@umb.edu) (617) 287-5176  
[susan.damato@umb.edu](mailto:susan.damato@umb.edu)  
Website: umb.edu/hr

**State Workers' Compensation Utilization Review Agent (URA)**

(pre-approves medical treatment)

Human Resources Division  
One Ashburton Place, 3<sup>rd</sup> Floor  
Boston, MA 02108  
Telephone: (800) 266-7991  
Facsimile: (617) 727-7816  
Website: mass.gov/lwd

**State Human Resources Division/Workers' Compensation Section (HRD/WCS)**

(reviews injury reports and decides which claims are compensable)

Human Resources Division  
One Ashburton Place, 3<sup>rd</sup> Floor  
Boston, MA 02108  
Telephone: (617) 727-3437  
Website: mass.gov/hrd

**Massachusetts Department of Industrial Accidents (DIA)**

(resolves disputes over claims)

600 Washington Street, 7th Floor  
Boston, MA 02111  
Telephone: (617) 727-4900  
Web Site: state.ma.us/dia/

**Massachusetts State Board of Retirement**

(provides information on types of retirement options)

One Winter Street  
Boston, MA 02108  
Telephone: (800) 392-6014, (617) 367-7770  
Website: state.ma.us/treasury/srb.htm