

# Workers' Compensation Glossary Of Terms



## **ACCIDENT REPORT**

Workers' Compensation Commission form entitled "EMPLOYER'S FIRST REPORT OF OCCUPATIONAL INJURY OR ILLNESS" (for non-State employees) or individual State Form (for State employees) required to be filed by an employer in cases of an employee's occupational injury or disease that results in incapacity from work of one day or more.

## **ADMINISTRATIVE REGULATIONS**

Regulations adopted in accordance with statutory authority to prescribe procedures and requirements within the workers' compensation system.

## **AGREEMENT**

Written agreement between an employer's workers' compensation insurance carrier or a self-insured employer and an employee with a compensable work-related injury or occupational disease specifying the type and amount of workers' compensation benefit paid to the employee. An agreement must be made using the Workers' Compensation Commission's "Voluntary Agreement", Form WCC-1.

## **APPEAL**

Request by one of the parties in a workers' compensation case to have the Workers' Compensation Commission's Compensation Review Board (CRB) hear the case, which has already been heard in some lower level Informal or Formal Hearing(s). The appealing party requests an overturning of some earlier decision(s) by the Workers' Compensation Commissioner(s) who heard the case at the earlier hearing(s).

## **APPROVED LIST OF MEDICAL PRACTITIONERS**

The Workers' Compensation Commission Chairman (in consultation with the Workers' Compensation Advisory Board) may establish a list of approved physicians and other practitioners who may render medical services to employees with compensable work-related injuries or occupational diseases. Administrative Regulation 31-280-1 specifies standards for approval of medical practitioners to treat employees in workers' compensation cases, as well as criteria for removal

of practitioners from the list.

#### **ARISING OUT OF AND IN THE COURSE OF EMPLOYMENT**

An employee's accidental injury or occupational disease originating while he or she was engaged in the line of duty in the business or affairs of the employer, upon the employer's premises or elsewhere by the direction, express or implied, of the employer.

#### **ATTENDING PHYSICIAN**

Medical practitioner who is the primary medical caregiver of an employee with a compensable work-related injury or occupational disease. An attending physician must be on the Workers' Compensation Commission Chairman's "Approved List of Medical Practitioners" to treat employees in workers' compensation cases.

#### **ATTENDING PHYSICIAN'S FIRST REPORT OF INJURY**

Workers' Compensation Commission Form 48 used by an attending physician to report initial medical findings related to an employee's compensable work-related injury or occupational disease or the State Form used by an attending physician to report initial medical findings for State employees with compensable work-related injuries or occupational diseases.

#### **ATTENDING PHYSICIAN'S SUPPLEMENTAL REPORT**

Workers' Compensation Commission Form used by an attending physician to report medical findings related to an employee's compensable work-related injury or occupational disease during the course of treatment.

#### **ATTORNEY FEE SCHEDULE**

The Workers' Compensation Act requires the Workers' Compensation Commission Chairman to annually publish the maximum fees claimants are required to pay attorneys for legal services rendered in workers' compensation cases.

#### **AVERAGE WEEKLY WAGE**

Average weekly earnings of an employee with a compensable work-related injury or occupational disease, used to determine the employee's weekly workers' compensation benefit rate.

**Award** Grant of workers' compensation benefits or other fees in a workers' compensation case.

**AWW** Average Weekly Wage

#### **BASIC COMPENSATION RATE**

Weekly workers' compensation benefit rate of an employee with a compensable workrelated injury or occupational disease, without cost-of-living adjustments or dependency allowances. \* For injuries/illnesses before October 1, 1991, the basic rate is two-thirds (2/3) of an employee's gross average weekly wage. \* For injuries/illnesses from October 1, 1991 through June 30, 1993, the basic rate is 80% of an employee's average weekly wage, after federal income taxes and FICA deductions. \* For injuries/illnesses on or after July 1, 1993, the basic rate is

75% of an employee's average weekly wage, after federal and state income taxes and FICA deductions.

#### **BENEFIT RATE TABLE**

The Workers' Compensation Commission Chairman (in consultation with the Workers' Compensation Advisory Board) is required to annually publish tables which specify weekly workers' compensation benefit rates, based upon the gross average weekly wage, the federal tax filing status, and the number of claimed exemptions of an employee with a compensable work-related injury or occupational disease. These tables must be consulted for the determination of weekly benefit rates ONLY for compensable work-related injuries and occupational diseases on or after October 1, 1991.

#### **BENEFITS**

Workers' compensation benefits or other payments mandated by the Workers' Compensation Act including, but not limited to, indemnity; medical and surgical aid or hospital and nursing service under Section 31-294d of the Act; and any type of payment for disability, whether for total or partial disability of a permanent or temporary nature, death benefit, funeral expense, payments made under Sections 31-284b, 31-293a, or 31-310 of the Act, or any adjustment in benefits or payments required by the Act.

#### **CERTIFICATE OF SELF INSURANCE**

Workers' Compensation Commission Form 27-62 used by the Workers' Compensation Commission Chairman authorizing an employer to self-insure its workers' compensation insurance coverage liability.

#### **CERTIFICATE OF SELF INSURANCE APPLICATION**

Workers' Compensation Commission Form WC18-76 used by an employer to apply for a Certificate of Self Insurance.

#### **CHAIRMAN**

Workers' Compensation Commissioner appointed by the Governor to head the Workers' Compensation Commission and administer the state workers' compensation system according to the provisions of the Workers' Compensation Act.

#### **CLAIMANT**

Any person who makes a claim for workers' compensation benefits for an alleged workrelated injury or occupational disease. Claimants are either employees claiming a compensable work-related injury or occupational disease or surviving dependents of an employee killed by a compensable work-related injury or occupational disease.

#### **COLA**

Annual cost-of-living adjustment in a claimant's basic compensation rate. This adjustment applies ONLY to Temporary Total Disability and Dependent Survivors' benefits, and is paid ONLY for injuries/illnesses on or before June 30, 1993. There are NO COLAs for other types of workers' compensation benefits or for injuries/illnesses on or after July 1, 1993.

## **COMMISSION**

Workers' Compensation Commission, the State agency established by the Workers' Compensation Act to administer the state workers' compensation system.

## **COMMISSIONER**

Workers' Compensation Commissioner, an administrative official authorized by the Workers' Compensation Act to have jurisdiction in whatever matter referred to in a given section of the Act.

## **COMMUTATION**

Payment of workers' compensation benefits in a monthly, quarterly, or single lump sum payment, rather than in weekly or biweekly payments.

## **COMMUTATION AND WHAT IT MEANS**

Workers' Compensation Commission form signed by a claimant to signify understanding of an agreement to payment of workers' compensation benefits by commutation.

## **COMPENSATION**

Workers' compensation benefits or other payments mandated by the Workers' Compensation Act including, but not limited to, indemnity; medical and surgical aid or hospital and nursing service under Section 31-294d of the Act; and any type of payment for disability, whether for total or partial disability of a permanent or temporary nature, death benefit, funeral expense, payments made under Sections 31-284b, 31-293a, or 31-310 of the Act, or any adjustment in benefits or payments required by the Act.

## **COMPENSATION RATE**

Weekly workers' compensation benefit rate of an employee with a compensable workrelated injury or occupational disease.

## **COMPENSATION REVIEW BOARD**

Workers' Compensation Commission board comprised of two Workers' Compensation Commissioners and the Workers' Compensation Commission Chairman to hear appeals of decisions from lower level Informal and Formal Hearings.

## **CONCURRENT EMPLOYMENT**

Simultaneous employment by more than one employer. When an employee with a compensable work-related injury or occupational disease is concurrently employed, the basic compensation rate is based upon the average weekly wages from ALL jobs the employee is unable to work as a result of the injury or disease.

## **CONTINUANCE**

Adjournment or postponement of a hearing or other proceeding to a subsequent day or time.

## **COST-OF-LIVING ADJUSTMENT**

Annual cost-of-living adjustment in a claimant's basic compensation rate. This adjustment applies ONLY to Temporary Total Disability and Dependent Survivors' benefits and is paid

ONLY for injuries/illnesses on or before June 30, 1993. There are

NO COLAs for other types of workers' compensation benefits or for injuries/illnesses on or after July 1, 1993.

## **CRB**

The Workers' Compensation Commission's Compensation Review Board comprised of two Workers' Compensation Commissioners and the Workers' Compensation Commission Chairman to hear appeals of decisions from lower level Informal and Formal Hearings.

## **CRD**

The Workers' Compensation Commission's Compensation Review Division, now the Compensation Review Board (CRB).

## **DATE OF INJURY**

Date a work-related injury occurs or, for occupational disease, the date of total or partial incapacity to work due to the disease. (The Compensation Review Board has held the date of injury for repetitive trauma to be the last day of exposure to the incidents of repetitive trauma, i.e. the last day worked.)

## **DAY OF INJURY**

Day a work-related injury occurs. An employee with a compensable work-related injury or occupational disease is entitled to full wages for the entire day an injury occurs and, for purposes of determining workers' compensation benefits, that day is not counted as a day of incapacity from work.

## **DEPENDENCY ALLOWANCE**

Extra payment (in addition to a claimant's basic compensation rate) for each of a claimant's dependents. This allowance is paid ONLY to claimants whose compensable work-related injuries or occupational diseases occurred PRIOR to October 1, 1991.

## **DEPENDENT**

Employee's family member (for employees with compensable work-related injuries or occupational diseases) or next of kin who was wholly or partly dependent upon the employee's earnings at the time of the employee's injury or disease, including any presumptive dependent or dependent in fact.

## **DEPENDENT IN FACT**

Person determined to be an employee's dependent (for employees with compensable work-related injuries or occupational diseases) in a workers' compensation case in which there is no presumptive dependent, in accordance with the facts

existing on the date of the injury or disease.

## **DEPENDENT SURVIVOR**

Presumptive dependent or dependent in fact surviving an employee who dies from a compensable work-related injury or occupational disease.

## **DEPENDENT SURVIVORS' BENEFITS**

Burial expenses for an employee who dies from a compensable work-related injury or occupational disease and wage replacement benefits to surviving dependents of such a deceased employee. Such benefits are also known as "Death Benefits", "Fatality Benefits" or "Survivors' Benefits".

## **DISABILITY EVALUATION**

Workers' Compensation Commission Form 42 used by an attending physician to report the existence and extent of a Permanent Partial Disability of an employee with a compensable work-related injury or occupational disease.

## **DISCLAIMER**

Workers' Compensation Commission Form 43 used by an employer or its workers' compensation insurance carrier to deny or contest liability for a claim for workers' compensation benefits.

## **DISCONTINUATION NOTICE**

Workers' Compensation Commission Form 36 used by an employer or its workers' compensation insurance carrier to discontinue or reduce a claimant's workers' compensation benefit payments.

## **DISFIGUREMENT**

Impairment of or injury to the beauty, symmetry, or appearance of a person that renders the person unsightly, misshapen, imperfect, or deforms in some manner or otherwise causes a detrimental change in the external form of the person.

## **DISFIGUREMENT AND SCARRING**

Permanent, significant disfigurement of, or permanent, significant scarring on the face, head, neck, or any other part of the body which handicaps an employee with a compensable work-related injury or occupational disease in obtaining or continuing to work.

## **DISFIGUREMENT AND SCARRING BENEFITS**

Benefits paid to an employee with a compensable work-related injury or occupational disease for a compensable disfigurement or scar.

## **DISTRICT**

Jurisdiction established by the Workers' Compensation Commission Chairman to administer matters of the workers' compensation system within a given geographical area.

## **DISTRICT OFFICE**

Workers' Compensation Commission office which administers matters of the workers' compensation system within the jurisdiction of the Workers' Compensation District in which it is located. Informal and Formal Hearings are held in District Offices, which also maintain records pertinent to their jurisdictions, such as workers' compensation case files.

## **DOI**

**Date of Injury.** The date a work-related injury occurs or, for occupational disease, the date of total or partial incapacity to work due to the disease. (The Compensation Review Board has held the date of injury for repetitive trauma to be the last day of exposure to the incidents of repetitive trauma, i.e. the last day worked.)

## **EDUCATION SERVICES**

Workers' Compensation Commission unit that provides education and information.

## **EMERGENCY HEARING**

Special type of Informal Hearing to provide for the administration of "emergency" situations which require especially quick action to provide appropriate medical treatment and workers' compensation benefits to employees with compensable work-related injuries or occupational diseases.

## **EMPLOYEE**

Any person who: (1) has entered into or works under any contract of service or apprenticeship with an employer, (2) is a sole proprietor or business partner who accepts the provisions of the Workers' Compensation Act; (3) is elected to the General Assembly; (4) is a salaried officer or paid member of any police or fire department; (5) is a volunteer police officer, whether designated as special or auxiliary; or (6) is an elected or appointed official or agent of any town, city, or borough in the state.

## **EMPLOYER**

Any person, corporation, firm, partnership, voluntary association, joint stock association, the State, or any public corporation within the state using the services of one or more employees for pay, or such an employer's legal representative.

## **EMPLOYER MUTUAL ASSOCIATION**

Employer association formed to insure the employers' liabilities pursuant to the Workers' Compensation Act. Such an association may only include employers who are in the same or similar trades or businesses and who have substantially similar degrees of hazard of injury to their employees.

## **EXCLUSION FORM**

Workers' Compensation Commission Form 6B (for corporate officers) or Form 6B-1 (for partnerships) used to elect exclusion from workers' compensation insurance coverage or to revoke a previous election of exclusion.

## **FILING STATUS AND EXEMPTION FORM**

Workers' Compensation Commission Form WCC-1A used by an employee with a compensable work-related injury or occupational disease ON OR AFTER October 1, 1991 to report federal tax filing status and number of claimed exemptions for determining workers' compensation benefits.

## **FIRST REPORT OF INJURY**

Workers' Compensation Commission Form WCC-15 (for non-State employees) or State WC form, required to be filed by an employer in cases of an employee's occupational injury or disease that results in incapacity from work of one day or more.

## **FORM 27-62**

Workers' Compensation Commission form used by the Workers' Compensation Commission Chairman authorizing an employer to self-insure its workers' compensation insurance coverage liability.

## **FORM 30C**

Workers' Compensation Commission form serving as a proper written notice of claim for workers' compensation benefits.

## **FORM 36**

Workers' Compensation Commission form used by an employer or its workers' compensation insurance carrier to discontinue or reduce a claimant's workers' compensation benefit payments.

## **FORM 42**

Workers' Compensation Commission form used by an attending physician to report the existence and extent of a Permanent Partial Disability of an employee with a compensable work-related injury or occupational disease.

## **FORM 43**

Workers' Compensation Commission form used by an employer or its workers' compensation insurance carrier to deny or contest liability for a claim for workers' compensation benefits.

## **FORM 44**

Workers' Compensation Commission form used by a Workers' Compensation Commissioner to order payment by the State's Second Injury Fund of workers' compensation benefits to a claimant or as reimbursement to an employer or its workers' compensation insurance carrier for benefits already paid to a claimant.

## **FORM 47**

Workers' Compensation Commission form used by a Workers' Compensation Commissioner to award disfigurement or scarring benefits to an employee with a compensable work-related injury or occupational disease.

**FORM 48**

Workers' Compensation Commission form used by an attending physician to report initial medical findings related to an employee's compensable work-related injury or occupational disease.

**Form 49**

Workers' Compensation Commission form used by an attending physician to report medical findings related to an employee's compensable work-related injury or occupational disease during the course of treatment.

**Form 6B-1**

Workers' Compensation Commission form used by a partnership to elect exclusion from workers' compensation insurance coverage or to revoke a previous election of exclusion.

**Form 6B**

Workers' Compensation Commission form used by a corporate officer to elect exclusion from workers' compensation insurance coverage or to revoke a previous election of exclusion.

**FORM 75**

Workers' Compensation Commission form used by a sole proprietor of a business to elect inclusion for workers' compensation insurance coverage or to revoke a previous election of inclusion.

**FORM WC18-76**

Workers' Compensation Commission form used by an employer to apply for a Certificate of Solvency from the Commission.

**FORM WCC-1**

Workers' Compensation Commission form serving as an agreement between an employer's workers' compensation insurance carrier or a self-insured employer and an employee with a compensable work-related injury or occupational disease specifying the type and amount of workers' compensation benefit to be paid to the employee.

**FORM WCC-1A**

Workers' Compensation Commission form used by an employee with a compensable workrelated injury or occupational disease ON OR AFTER October 1, 1991 to report federal tax filing status and number of claimed exemptions for determining workers' compensation benefits.

**FORM WCR-1**

Workers' Compensation Commission form used by an employee with a compensable workrelated injury or occupational disease to request vocational rehabilitation services from the Commission's Division of Workers' Rehabilitation or by any other party referring such an employee to the Division for such services.

**FORM: COMMUTATION AND WHAT IT MEANS**

Workers' Compensation Commission form signed by a claimant to signify understanding of an agreement to payment of workers' compensation benefits by commutation.

**FORM: INFORMAL HEARING REQUEST**

Workers' Compensation Commission form used by any party requesting an Informal Hearing before a Workers' Compensation Commissioner.

**FORM: NOTICE TO EMPLOYEES**

Workers' Compensation Commission notice required in each employer's workplace to notify its employees of its workers' compensation insurance coverage.

**FORM: PETITION FOR REVIEW**

Workers' Compensation Commission form used by any party requesting an appeal before the Commission's Compensation Review Board.

**FORM: STIPULATION AND WHAT IT MEANS**

Workers' Compensation Commission form signed by a claimant signifying understanding of an agreement to a final settlement of a workers' compensation case by stipulation.

**FORMAL HEARING**

Formal meeting between the parties in a workers' compensation case and presided over by a Workers' Compensation Commissioner for the purpose of resolving differences, disagreements, and the like to provide appropriate workers' compensation benefits to a claimant. Witnesses in Formal Hearings are sworn and testify and evidence is introduced, resulting in a binding written decision by the presiding Commissioner. Usually held in a Workers' Compensation Commission District Office, a Formal Hearing is the second level hearing available to adverse parties in a workers' compensation case and is scheduled when disputes cannot be resolved in any earlier Informal Hearing(s). There may be one or, more infrequently, two Formal Hearings in a workers' compensation case. Written decisions from Formal Hearings may be appealed to the Compensation Review Board.

**FRAUD UNIT**

The Workers' Compensation Fraud Unit within the Chief State's Attorney's Office, Division of Criminal Justice, which investigates complaints of workers' compensation fraud and takes appropriate action to enforce Connecticut law.

**HEARING**

Informal or formal meeting between the parties in a workers' compensation case presided over by one or more Workers' Compensation Commissioner(s) for the purpose of resolving differences, disagreements, and the like in order to provide appropriate workers' compensation benefits to a claimant.

**IME**

Independent Medical Examination.

#### **INCLUSION FORM**

Workers' Compensation Commission Form 75 used by a sole proprietor of a business to elect inclusion for workers' compensation insurance coverage or to revoke a previous election of inclusion.

#### **INDEPENDENT MEDICAL EXAMINATION**

Medical examination of a claimant usually requested by another party (i.e., the respondent in the case or a Workers' Compensation Commissioner) and conducted by a physician other than the claimant's attending physician.

#### **INFORMAL DISFIGUREMENT EVALUATION**

Workers' Compensation Commission Form 47 used by a Workers' Compensation Commissioner to award disfigurement or scarring benefits to an employee with a compensable work-related injury or occupational disease.

#### **INFORMAL HEARING**

Short informal meeting between the parties in a workers' compensation case and presided over by a Workers' Compensation Commissioner for the purpose of resolving differences, disagreements, and the like in order to provide appropriate workers' compensation benefits to a claimant. Held in a Workers' Compensation Commission District Office, an Informal Hearing is the first level of hearing available to adverse parties in a workers' compensation case and involves discussion of any disputed issue(s) and production of appropriate supporting documents and other evidence. A workers' compensation case may include one or more Informal Hearing(s); cases in which no resolution of disputed issues occurs are recommended for Formal Hearings. However, nearly all cases involving disputed issues are resolved in Informal Hearings.

#### **INFORMAL HEARING REQUEST**

Workers' Compensation Commission form used by any party requesting an Informal Hearing before a Workers' Compensation Commissioner.

#### **JOB SEARCH**

When an employee with a compensable work-related injury or occupational disease is not able to do regular work, but can perform light duty work (as defined by the attending physician) and no light duty work is available at the regular employer, that employee may still be eligible for Temporary Partial Disability benefits, subject to performing a job search. A job search is the process by which such an employee looks for ANY type of work which falls within the attending physician's physical restrictions and submits a weekly report of the results of the search to the employer's workers' compensation insurance carrier or selfinsured employer, taking a suitable job if it is offered, until healing from the injury or disease to the extent that the attending physician returns the employee to his or her regular job.

#### **LIGHT DUTY**

Work prescribed by an employee's attending physician to fall within certain

physical restrictions while the employee continues to heal from a compensable work-related injury or occupational disease.

### **LIST OF APPROVED MEDICAL PRACTITIONERS**

The Workers' Compensation Commission Chairman (in consultation with the Workers' Compensation Advisory Board) may establish a list of approved physicians and other practitioners who may render medical services to employees with compensable work-related injuries or occupational diseases. Administrative Regulation 31-280-1 specifies standards for approval of medical practitioners to treat employees in workers' compensation cases, as well as criteria for the removal of practitioners from the list.

### **LUMP SUM PAYMENT**

Payment of a workers' compensation award of benefits or other sum(s) as one or more partial or total payment(s), instead of the more common weekly or biweekly payments which equally distribute such sum(s). A lump sum payment may result from a Commutation or a Stipulation.

### **MAXIMUM COMPENSATION RATE**

Highest weekly workers' compensation benefit rate provided for by the Workers' Compensation Act. The maximum rate may vary from employee to employee, depending on the date of an employee's injury (and in turn the law which applies to that injury) and the type of benefit for which an employee is eligible.

### **MAXIMUM MEDICAL IMPROVEMENT**

Time at which a claimant's attending physician determines that the claimant has healed from a compensable work-related injury or occupational disease to the fullest extent he or she is expected to heal. At this time the attending physician determines whether or not the claimant has sustained a Permanent Partial Disability to any body part(s) and the degree of such impairment(s).

### **MEDICAL CARE PLAN**

An employer's plan to provide its employees with medical care for their compensable work-related injuries and occupational diseases. Such a plan is also known as a "Preferred Provider Organization", or "PPO".

### **MEDICAL FEE SCHEDULE**

The Workers' Compensation Commission Chairman (in consultation with employers, their insurance carriers, union representatives, physicians, and third-party reimbursement organizations) is required to develop and annually publish maximum fees payable to medical practitioners for medical services rendered in workers' compensation cases (except for medical treatment of employees covered by approved workers' compensation medical care plans and those employed by the State of Connecticut, who are covered by a separate Medical Fee Schedule for State Employees).

### **MEDICAL FEE SCHEDULE FOR STATE EMPLOYEES**

The State Commissioner of Administrative Services is required to set, by

regulation, maximum fees payable to medical practitioners for medical services rendered in workers' compensation cases of employees of the State (except those covered by the State's approved workers' compensation medical care plan).

#### **MEDICAL PRACTICE PROTOCOLS**

The Workers' Compensation Commission Chairman (in consultation with insurers and medical practitioners) is required to develop and annually publish medical practice protocols for the medical treatment rendered in workers' compensation cases. The protocols must be used by medical practitioners, employers, workers' compensation insurance carriers, and Workers' Compensation Commissioners in evaluating the necessity and appropriateness of medical care in workers' compensation cases.

#### **MEDICAL PRACTITIONER BILLING GUIDELINES**

The Workers' Compensation Commission Chairman (in consultation with insurers and medical practitioners) is required to develop and annually publish billing guidelines for medical services rendered in workers' compensation cases. The guidelines must be used by employers, workers' compensation insurance carriers, and medical practitioners.

#### **MINIMUM COMPENSATION RATE**

Lowest weekly workers' compensation benefit rate provided for by the Workers' Compensation Act. The minimum rate may vary from employee to employee, depending on the date of an employee's injury (and in turn the law which applies to that injury) and the type of benefit for which an employee is eligible.

#### **MMI**

Maximum Medical Improvement.

#### **MOTION TO PRECLUDE**

Motion filed to stop from consideration (or preclude) any defense to a claim's compensability other than a jurisdictional defense (e.g., whether there was an employer/employee relationship) or a defense asserted by the respondent(s) in a proper and valid notice of contest.

#### **NOTICE OF CLAIM**

Claimant's written notice alleging a compensable work-related injury or occupational disease and claiming workers' compensation benefits for such. The Workers' Compensation Commission Form 30C serves as a proper written notice of claim.

#### **NOTICE TO EMPLOYEES**

Workers' Compensation Commission notice required in each employer's workplace to notify its employees of its workers' compensation insurance coverage.

#### **OCCUPATIONAL DISEASE**

Disease peculiar to an employee's occupation and due to causes in excess of the ordinary hazards of employment as such.

## **OCCUPATIONAL DISEASE SURVEILLANCE PROGRAM**

Joint program between the State Departments of Health and Labor and the Workers' Compensation Commission designed to track and prevent occupational diseases.

## **OCCUPATIONAL HEALTH CLINICS**

Medical clinics specializing in the diagnosis and treatment of occupationally-related illnesses and diseases and the evaluation of workplaces for health-related hazards.

## **OCCUPATIONAL INJURY**

Accidental injury which may be definitely located as to the time when and the place where the accident occurred, and is causally connected with the injured person's employment, or is the direct result of repetitive trauma or repetitive acts incident to such employment, as well as occupational disease.

## **ORDER TO CUSTODIAN OF SECOND INJURY FUND**

Workers' Compensation Commission Form 44 used by a Workers' Compensation Commissioner to order payment by the State's Second Injury Fund of workers' compensation benefits to a claimant or as reimbursement to an employer or its workers' compensation insurance carrier for benefits already paid to a claimant.

## **OSHA**

Occupational Safety and Health Administration.

## **PAYMENTS "WITHOUT PREJUDICE"**

Payment of workers' compensation benefits to a claimant while the compensability of an alleged work-related injury or occupational disease is in question. Payments made "without prejudice" must begin on or before the 28th day after an employer receives a claimant's written notice of claim for compensation.

## **PERMANENT PARTIAL**

Permanent Partial Disability or an award of Permanent Partial Disability benefits.

## **PERMANENT PARTIAL AWARD**

Award of workers' compensation benefits paid to an employee with a compensable workrelated injury or occupational disease for a Permanent Partial Disability of one or more part(s) of the employee's body.

## **PERMANENT PARTIAL DISABILITY**

Permanent loss of, or loss of use of, one or more body part(s) of an employee with a compensable work-related injury or occupational disease. If it is determined by the attending physician at the time of the employee's maximum medical improvement that a Permanent Partial Disability exists, that employee is eligible to receive Permanent Partial Disability benefits.

## **PERMANENT PARTIAL DISABILITY BENEFITS**

Workers' compensation benefits paid to an employee with a compensable work-related injury or occupational disease for a Permanent Partial Disability of one or more part(s) of the employee's body.

## **PERSONAL INJURY**

Accidental injury which may be definitely located as to the time when and the place where the accident occurred, and is causally connected with the injured person's employment or the direct result of repetitive trauma or repetitive acts incident to such employment, as well as occupational disease.

## **PETITION FOR REVIEW**

Workers' Compensation Commission form used by any party requesting an appeal before the Commission's Compensation Review Board.

## **POSTING NOTICE**

Workers' Compensation Commission notice required in each employer's workplace to notify its employees of its workers' compensation insurance coverage.

## **PPD**

Permanent Partial Disability or Permanent Partial Disability benefits.

## **PPO**

Preferred Provider Organization.

## **PREFERRED PROVIDER ORGANIZATION**

An employer's medical care plan for the treatment of its employee's compensable workrelated injuries and occupational diseases.

## **PRESUMPTIVE DEPENDENT**

Any of the following persons, who are conclusively presumed to be wholly dependent for support upon a deceased employee: (1) a wife upon a husband with whom she lives at the time of his injury or from whom she receives support regularly; (2) a husband upon a wife with whom he lives at the time of her injury or from whom he receives support regularly; (3) any child under the age of eighteen or over the age of eighteen but who is physically or mentally incapacitated from earning, upon the parent with whom he or she is living or from whom he or she is receiving support regularly, at the time of the injury of the parent; or (4) any unmarried child who has attained the age of eighteen but has not attained the age of twenty-two and who is a full-time student, upon the parent with whom he or she is living or from whom he or she is receiving support regularly.

## **PREVIOUS DISABILITY**

An employee's preexisting condition due to the total or partial loss of, or loss of use of, one hand, arm, foot, or eye resulting from an accidental injury, a disease, or from congenital causes, or any other permanent physical impairment.

## **PRODUCT LIABILITY SUIT**

Suit brought by an employee with a compensable work-related injury or occupational disease against a party other than the employee's employer who is alleged to be responsible in some way or to some degree for the injury or disease.

## **REHABILITATION REQUEST FORM**

Workers' Compensation Commission Form WCR-1 used by an employee with a compensable work-related injury or occupational disease to request vocational rehabilitation services from the Commission's Division of Workers' Rehabilitation or by any other party referring such an employee to the Division for such services.

## **REHABILITATION SERVICES**

Workers' Compensation Commission unit that provides vocational rehabilitation services to eligible employees with compensable work-related injuries or occupational diseases who cannot return to the types of work which caused their injuries or diseases.

## **RELAPSE OR RECURRENCE**

Situation in which an employee with a compensable work-related injury or occupational disease who has improved and returned to work has a return of some medical problem(s) caused by the injury or disease, resulting in another period of incapacity from work and/or necessitating further medical treatment. An employee is eligible for wage replacement benefits for a relapse or recurrence.

## **RELAPSE OR RECURRENCE BENEFITS**

Wage replacement benefits paid to an employee with a compensable work-related injury or occupational disease during that employee's period of Relapse or Recurrence of the previous injury or disease.

Respondent Employer or its workers' compensation insurance carrier in a workers' compensation case.

## **SAFETY & HEALTH SERVICES**

Workers' Compensation Commission unit that provides information and assistance regarding employer health and safety committee requirement.

## **SCAR**

Mark left on the skin after the healing of a wound or sore, or any mark, damage, or lasting effect resulting from a past injury.

## **SCHEDULE OF INJURIES**

List in the Workers' Compensation Act providing the maximum number of weeks of Permanent Partial Disability benefits for each body part. Only injuries (body parts) in this statutory schedule are eligible for Permanent Partial Disability benefits.

**SECOND DISABILITY**

Disability arising out of a second injury.

**SECOND INJURY**

Injury (incurred by accident, repetitive trauma, repetitive acts, or disease arising out of and in the course of employment) to an employee with a previous disability.

**SECOND INJURY FUND**

State fund used to provide payment of workers' compensation benefits and/or other payments in certain workers' compensation cases. The Fund is provided by assessments on all state employers and is in the custody of the State Treasurer.

**SELF-INSURANCE**

Manner in which an employer provides workers' compensation insurance coverage for its employees by insuring itself rather than by purchasing workers' compensation insurance coverage from a private insurance carrier.

**SETTLEMENT**

Term used for Permanent Partial Disability benefits or to refer to a Stipulation, which is a final close-out of a workers' compensation case.

**SIF**

Second Injury Fund.

**SPECIFIC**

Award of Permanent Partial Disability benefits for one or more of an employee's specific body part(s) due to that employee's compensable work-related injury or occupational disease.

**STATISTICAL DIVISION**

Workers' Compensation Commission division which compiles and maintains statistics on occupational injuries and diseases, voluntary agreements, claims status, and Workers' Compensation Commissioners' dockets, among others.

**STIP**

Stipulation or stipulated agreement.

**STIPULATED AGREEMENT**

Agreement to stipulate a workers' compensation case (close a case, finally, by stipulation).

**STIPULATION**

Process whereby an employee with a compensable work-related injury or occupational disease and the employer (and/or its workers' compensation insurance carrier) close a workers' compensation case finally. This happens when

an employee is paid a sum of money and/or provided certain medical treatment(s) and, in return, signs away any future right to benefits for the stipulated injury or disease. Some stipulations close out all aspects of a case (i.e., benefits AND medical treatment) while other stipulations close out portions of available benefits (i.e., benefit payments OR medical treatment), leaving the remaining benefits "open."

### **STIPULATION AND WHAT IT MEANS**

Workers' Compensation Commission form signed by a claimant signifying understanding of an agreement to a final settlement of workers' compensation case by stipulation.

### **SUBSTITUTE SYSTEM OF INSURANCE**

An employer's agreement with its employees to provide a system of compensation, benefit, and insurance in lieu of the compensation and insurance provided by the Workers' Compensation Act. Such a system must provide benefits to its employees which are at least equivalent to the benefits provided by the Act and must adhere to requirements for such systems as are prescribed in the Act.

### **SURVIVORS' BENEFITS**

Burial expenses for an employee who dies as a result of a compensable work-related injury or occupational disease and wage replacement benefits to surviving dependents of such a deceased employee. Such benefits are also known as "Death Benefits", "Dependent Survivors' Benefits", or "Fatality Benefits".

### **TEMPORARY PARTIAL**

Temporary Partial Disability or Temporary Partial Disability benefits.

### **TEMPORARY PARTIAL DISABILITY**

Temporary, but only partial, incapacity from work of an employee with a compensable work-related injury or occupational disease. During a period of partial incapacity, an employee can perform SOME types of work and may be eligible for Temporary Partial Disability benefits.

### **TEMPORARY PARTIAL DISABILITY BENEFITS**

Wage replacement benefits paid to an employee with a compensable work-related injury or occupational disease during that employee's period of Temporary Partial Disability.

### **TEMPORARY TOTAL**

Temporary Total Disability or Temporary Total Disability benefits.

### **TEMPORARY TOTAL DISABILITY**

Temporary, but total, incapacity from work of an employee with a compensable workrelated injury or occupational disease. During a period of total incapacity, an employee is unable to perform ANY type of work and is eligible for Temporary Total Disability benefits.

## **TEMPORARY TOTAL DISABILITY BENEFITS**

Wage replacement benefits paid to an employee with a compensable work-related injury or occupational disease during that employee's period of Temporary Total Disability.

## **THIRD PARTY**

Party other than an employer or employee who is or may be responsible in some way or to some degree for an employee's compensable work-related injury or occupational disease.

## **THIRD PARTY CLAIM**

Claim for workers' compensation and/or other benefits made by an employee with a compensable work-related injury or occupational disease against a third party (party other than employee or employer).

## **TP**

Temporary Partial Disability or Temporary Partial Disability benefits.

## **TT**

Temporary Total Disability or Temporary Total Disability benefits.

## **UTILIZATION REVIEW PROCEDURES**

The Workers' Compensation Commission Chairman (in consultation with insurers and medical practitioners) is required to develop and annually publish utilization review procedures for medical treatment in workers' compensation cases. The procedures must be used by medical practitioners, employers, workers' compensation insurance carriers, and Workers' Compensation Commissioners in evaluating the necessity and appropriateness of medical care in workers' compensation cases.

## **VA**

Workers' Compensation Commission "Voluntary Agreement", Form WCC-1.

## **VOCATIONAL REHABILITATION**

Services provided to an employee with a compensable work-related injury or occupational disease to return that employee to the workforce in a new occupation, the performance of which is within that employee's physical limitations resulting from the injury or disease. The Workers' Compensation Commission's Rehabilitation Services unit provides a full range of vocational rehabilitation services, without charge, to eligible employees who cannot return to their initial occupations. Employees may apply to Rehabilitation Services themselves or may be referred to Rehabilitation Services by an

employer, an insurance representative, a medical practitioner, a Workers' Compensation Commissioner, or another party.

## **VOLUNTARY AGREEMENT**

Workers' Compensation Commission Form WCC-1 serving as an agreement between an employer's workers' compensation insurance carrier or a self-insured employer and an employee with a compensable work-related injury or occupational disease specifying the type and amount of workers' compensation benefit to be paid to the employee.

#### **WAITING PERIOD**

The first three calendar days of a work-related incapacity from work, during which an employee with a compensable work-related injury or occupational disease is ineligible to receive workers' compensation benefits, other than appropriate and necessary medical care. For employees incapacitated from work for seven or more calendar days due to the injury or disease, the waiting period is waived and they are eligible to receive workers' compensation wage replacement benefits for the entire period of incapacity from work.

#### **WEEKLY WAGE DIFFERENTIAL**

Weekly difference between the earnings of an employee with a compensable work-related injury or occupational disease before the occurrence of the injury or disease and the earnings of that same employee after the occurrence of the injury or disease. If the employee is no longer able to work in the job, this is the weekly difference between the earnings of the employee before the occurrence of the injury or disease and the earnings presently being paid in the job in which the employee worked at the time of the occurrence of the injury or disease.

#### **WORKERS' COMPENSATION ACT**

State statutes which establish liability of employers for injuries to workers while on the job or illnesses due to the employment, and requiring insurance to protect the workers. Workers' compensation is not based on negligence of the employer, but is absolute liability for medical coverage, a percentage of lost wages or salary, costs of rehabilitation and retraining, and payment for any permanent injury (usually based on an evaluation of limitation). Workers' Compensation Acts provide for a system of hearings and quasi-judicial determinations by administrative law judges and appeal boards. However, if workers' compensation is granted, it becomes the only remedy against an employer and does not include general damages for pain and suffering. Thus, an injured worker may waive workers' compensation and sue the employer for damages caused by the employer's negligence. If a third party contributed to the damages, the injured worker may sue that party for damages even though he/she receives workers' compensation, but the workers' compensation insurance company may demand some of the funds recovered.

#### **WORKERS' COMPENSATION ADMINISTRATIVE REGULATIONS**

Regulations adopted in accordance with statutory authority to prescribe procedures and requirements regarding activities within the workers' compensation system.

#### **WORKERS' COMPENSATION ADVISORY BOARD**

Board provided for by the Workers' Compensation Act to assist the Workers' Compensation Commission Chairman in the performance of his duties. The Board is

comprised of four individuals representing employee organizations, four individuals representing employer organizations, and a ninth individual who is selected by the Board to serve as an impartial chairman of the Board.

#### **WORKERS' COMPENSATION BENEFITS**

Compensation benefits or other payments mandated by the provisions of the Workers' Compensation Act including, but not limited to, indemnity; medical and surgical aid or hospital and nursing service under Section 31-294d of the Act; and any type of payment for disability, whether for total or partial disability of a permanent or temporary nature, death benefit, funeral expense, payments made under Sections 31-284b, 31-293a, or 31-310 of the Act, or any adjustment in benefits or payments required by the Act.

#### **WORKERS' COMPENSATION COMMISSION**

State agency established by the Workers' Compensation Act to administer the Connecticut workers' compensation system.

#### **WORKERS' COMPENSATION COMMISSION CHAIRMAN**

Workers' Compensation Commissioner appointed by the Governor to head the Workers' Compensation Commission and administer the state workers' compensation system according to the provisions of the Workers' Compensation Act.

#### **WORKERS' COMPENSATION COMMISSIONER**

Administrative official authorized by the Workers' Compensation Act to have jurisdiction in whatever matter referred to in a given section of the Act.

#### **WORKERS' COMPENSATION DISTRICT**

Jurisdiction established by the Workers' Compensation Commission Chairman to administer matters of the workers' compensation system within a given geographical area.

#### **WORKERS' COMPENSATION DISTRICT OFFICE**

Workers' Compensation Commission office which administers matters of the workers' compensation system within the jurisdiction of the Workers' Compensation District in which it is located. Informal and Formal Hearings are held in District Offices, which also maintain certain records pertinent to their jurisdictions, such as workers' compensation case files.

#### **WORKERS' COMPENSATION FRAUD UNIT**

Unit within the Office of the Chief State's Attorney, Division of Criminal Justice, which investigates complaints of workers' compensation fraud and takes appropriate action to enforce Connecticut law.

#### **WORKERS' COMPENSATION JURISDICTION**

Workers' compensation system by which an employee with a work-related injury or occupational disease is provided medical treatment for the injury or disease and wage replacement benefits while incapacitated from regular work. The workers' compensation system covers most private and public sector employees in the

state. However, some employees may be eligible to receive workers' compensation benefits from the state system and another system simultaneously or, in some cases, eligible only to receive workers' compensation benefits from another system. Other systems include the Jones Act, the Longshore and Harbor Workers' Compensation Act, and the Federal Employees' Workers' Compensation System.

#### **WORKERS' COMPENSATION LEGAL ADVISORY PANEL**

Panel provided for by the Workers' Compensation Act to assist the Workers' Compensation Commission Chairman in the performance of his duties by providing him with guidance in legal matters pertaining to the workers' compensation system.

#### **WORKERS' COMPENSATION MEDICAL ADVISORY PANEL**

Panel provided for by the Workers' Compensation Act to assist the Workers' Compensation Commission Chairman in the performance of his duties by providing him with guidance in medical matters pertaining to the workers' compensation system.

#### **WRITTEN NOTICE OF CLAIM**

Claimant's written notice alleging a compensable work-related injury or occupational disease and claiming workers' compensation benefits for such. The Workers' Compensation Commission Form 30C serves as a proper written notice of claim.