NORTH CAROLINA DEPARTMENT OF AGRICULTURE
AND CONSUMER SERVICES
MEAT AND POULTRY INSPECTION DIVISION
Raleigh, North Carolina

Steve Troxler, Commissioner

MPID NOTICE	**9-25**	**5-22-2025**

Instructions for Handling Workers' Compensation Claims

I. PURPOSE

This document is issued to provide instructions for all MPID employees to follow in the event of an on-the-job injury that requires medical care. It is vital to submit the appropriate paperwork and follow this policy in order to ensure that a claim is processed promptly and that the employee does not incur personal expenditures for his/her injury.

II. REFERENCES

NCDA&CS Safety and Health Policy and Reference Manual

III. CANCELLATION

MPID Notice 13-24 dated 9-30-2024

IV. PROCEDURE

1. Report the incident

In the event of an on-the-job injury requiring medical attention, the employee must notify their supervisor immediately unless their injury renders them incapable of doing so. In turn, the supervisor should phone the Raleigh office and report the injury to respective TA Coordinator for Inspectors and Veterinarians and Administrative Services Manager for Office staff, Compliance Officers and Training staff. The TA Coordinator or Administrative Services Manager will also be responsible for informing the Safety Officer of the on-the-job injury.

2. Create Claim in CorVel Care

The TA Coordinators or Administrative Services Manager log in to CorVel Care at www.caremc.com to create a claim as soon as possible. If you have any problems accessing the system, call 855-691-9367 for assistance. This will create a case number needed for the CorVel Initial Treatment Guide that the employee will take to a medical care facility on CorVel's network.

3. Seek medical care Emergencies:

For life or limb threatening emergencies, seek medical attention first and report the incident later. For emergency medical care, employees injured on the job may seek treatment at any medical care facility.

Non-emergencies:

For non-emergency medical care, employees are required to use a medical care provider on CorVel's network by looking up providers at corvel.com. If none of their providers are convenient, go to the nearest urgent care facility. Going to a hospital emergency room is an option only if other options are exhausted.

Note: Employees must have the CorVel Initial Treatment Guide with claim number from TA Coordinator or Administrative Services Manager when seeking care from a medical care provider on CorVel's network.

4. CorVel Initial Treatment Guide/Physician and Pharmacy Information

Take the CorVel Initial Treatment Guide/Physician and Pharmacy Information form referenced below with you to your medical provider. This form serves two purposes:

- Authorization for medical care

  Employees may sign the authorization when their supervisor is not on site.

- Attending Physician's Report

  Your medical care provider completes this section.

Be sure to tell the medical provider you were injured on the job and your health care should be covered by workers' compensation. Do not give them your health insurance information. If needed, give them your supervisor's phone number so he or she can verify it is a worker's compensation claim.

The employee must take the Physician and Pharmacy Information to the pharmacy. (This form has a partial list of participating pharmacies). Giving this form to the pharmacist when filling prescriptions should ensure that CorVel is billed for the prescription and no charges are sent to the employee's private insurance company.

5. CorVel Medical Records and Health Information Authorization

This form should be completed as soon as possible by the employee and submitted to the Raleigh Office to the attention of the Administrative Services Manager. Our office will forward the form to the NCDA&CS Safety Director.

6. Other Paperwork

Supervisor's Incident Report

Supervisors should complete this form in its entirety as promptly as possible. This form should be submitted to the Raleigh Office to the attention of the Administrative Services Manager. This form should then be forwarded to the Safety Officer within 7 days of the incident.

Investigation Statement Form, Employee Incident Form, and MPID OSHA 300 Information Form

The injured employee should complete the forms in their entirety as promptly as possible. If the employee is unable to complete the form due to their injuries, their supervisor should complete the form. These forms should be submitted to the Raleigh Office to the attention of the Administrative Services Manager. Employee Incident Form and MPID OSHA 300 Information Form should be forwarded to the Safety Officer by the Administrative Services Manager within 7 days of the incident.

NC Industrial Commission Form 18 "Notice of Accident to Employer" (Optional)

Form 18 will be sent to the employee by CorVel. This is an optional form. If the employee chooses to fill out a Form 18, it must be submitted directly to CorVel by the employee and a copy mailed to the Raleigh Office to the attention of the Administrative Services Manager.

North Carolina State Government Worker's Compensation Program Employee Statement

Supervisors should provide all injured employees with this form. The employee completes the information concerning the accident/incident and use of leave options for any time lost from work which may result from injury. This form should be completed in detail adequate to give an accurate account of the incident. Once the employee completes the form, the supervisor completes the bottom portion. This form should be submitted to the Raleigh office to the attention of the Administrative Services Manager.

North Carolina State Government Worker's Compensation Program Leave Options

Supervisors should provide all injured employees with this form. The employee completes the information concerning leave options for any time lost from work which may result from injury. If option 1 is chosen in either section, the employee must circle the word sick or vacation depending upon which leave they prefer to use. Once the employee completes the form, the supervisor completes the bottom portion. This form should be submitted to the Raleigh office to the attention of the Administrative Services Manager.

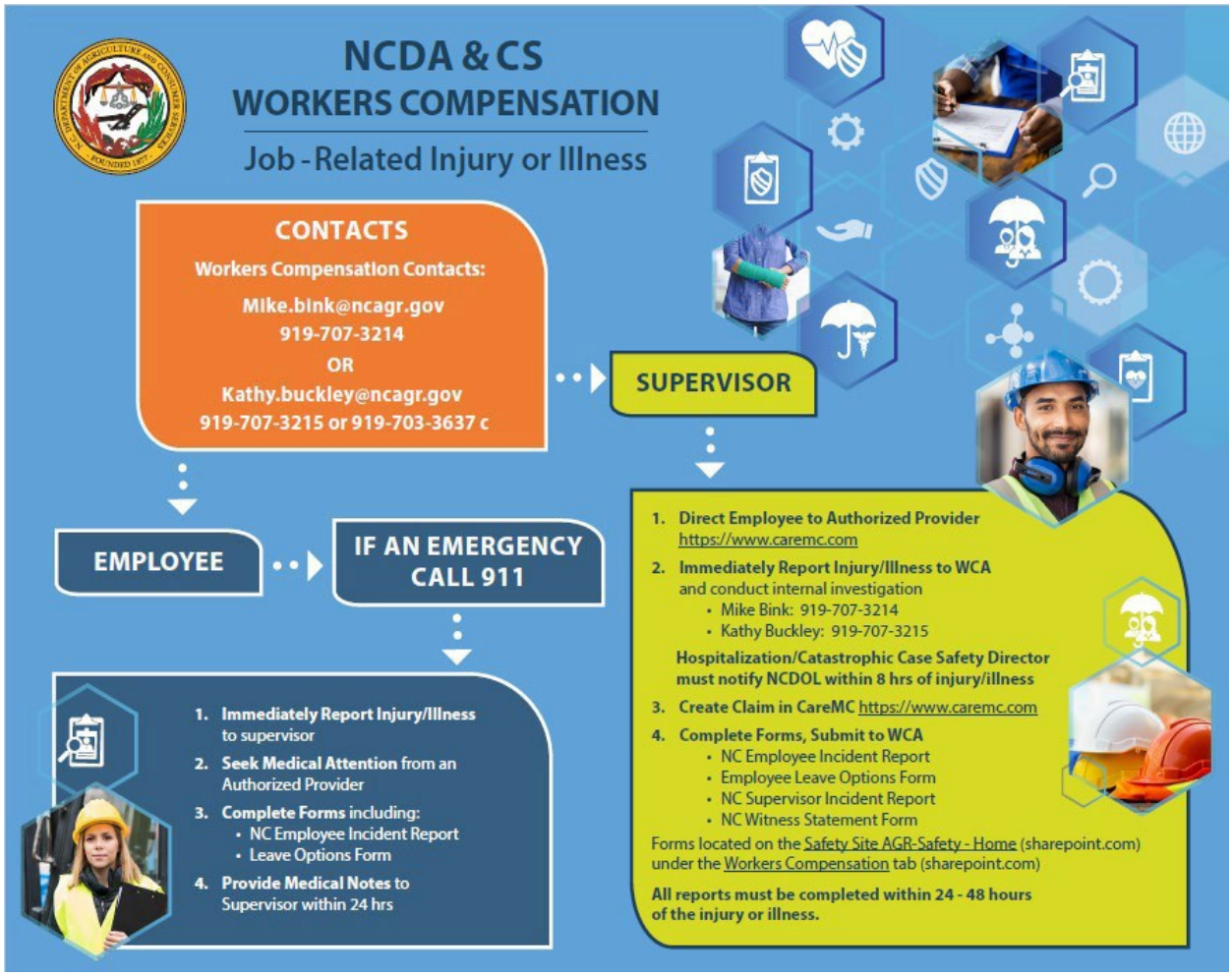
Essential Job Functions Form

Employees who are absent from work more than 3 days due to an on-the-job injury are required to have their physician complete an "Essential Job Functions" form prior to returning to work. This form describes the physical requirements of the employee's job so their physician can understand the nature of their work and outline any restrictions accordingly. Each time it is needed, this form is customized by the Raleigh Office to fit the physical labor requirement for each individual's specific job assignment. Contact the Administrative Services Manager to request a customized copy of this form.

OSHA 300 Log

Employee Incident Form, MPID OSHA 300 Information Form, and the Supervisor Incident report should all be sent to the Safety Officer within 7 days after the incident occurs. The Safety Officer will review the forms and, if needed, document on the OSHA 300 log and OSHA 301 form. The Safety Officer will, at the end of the year summarize, the OSHA 300 log and post the 300a summary form in the Raleigh office from February 1- April 30 of the year following the year covered by the form. If the 300a summary form is needed in the field at any time, contact the Safety Officer who can email the form. Refer to **Attachment 1 - MPID Employee Injury And Illness Recordkeeping Flowchart** for a quick reference regarding required paperwork to be submitted.

Note: Not all workers' compensation claims will be recordable. Only incidents involving a death, loss of consciousness, days away from work, restricted work activity or any medical treatment beyond first aid will be recorded.



Dr. Karen Beck
State Director

DISTRIBUTION: MPID Personnel; NCDA&CS Safety Director	**SUBJECT CATEGORY:**Safety

Attachment 1

Instructions:
Please refer to OSHA 1904.7 for general recording criteria and OSHA 300 log guidance information on the OSHA forms (301 report, 300 log, 300A summary).

A dotted line box refers to a WC process.

A curved box is a decision-making question.

A rectangular, gray box is an action or status.

MPID EMPLOYEE INJURY AND ILLNESS RECORDKEEPING FLOWCHART

Workers' Compensation

Please follow directions in MPID Notice 13-24 Instructions for Handling Workers' Compensation Claim

AN MPID EMPLOYEE EXPERIENCED AN INJURY OR ILLNESS.

Also

Is it work-related?

YES

NO

Event does not get recorded on an OSHA Form.

Did the following occur within 24 hours of the injury/illness:
- An inpatient hospitalization?
- Amputation?
- Loss of an eye?

OR

Did a fatality occur within 30 days of the injury/illness?

YES

NO

OSHA Reportable

Report it to OSHA, Director, Safety Director, TA Coordinator **AND** complete OSHA Forms 301 and 300.

Did it result in any of the following:
- Days away from work?
- Medical treatment beyond first aid?
- Loss of consciousness?
- Restricted work or transfer to another job?

OR
- Has a licensed health care professional diagnosed a significant injury or illness?

NO

No action is needed because it is not an OSHA recordable incident.

YES

OSHA Recordable

Send Safety Officer all relatable forms with-in 7 days to complete the OSHA 300 form.

And

And

At the end of the calendar year, Safety Officer will summarize the OSHA Form 300 using the OSHA Form 300A. The 300A from will be posted from February 1 to April 30.

1/24/2025