

maximum weekly benefits amount. Additional benefits are payable to dependents. If there are no beneficiaries, the employer will pay \$5,000 into the Special Fund.

TYPES OF DISABILITY COVERED

Temporary Total Disability (TTD): The worker is totally disabled for a certain time period, benefits are paid at 66 2/3% of the AWW.

Temporary Partial Disability (TPD): The worker is partially disabled for a certain time period, benefits are paid at 66 2/3% of the AWW.

Permanent Partial Disability (PPD): The worker has permanently lost a body member or the use of a body member, benefits are based on a scheduled award and TPD or TTD.

Permanent Total Disability (PTD): The worker is (1) disabled and cannot earn any wages in the same or other employment; or, (2) has loss of both hands, arms, feet, legs, eyes, or any two thereof. In either case, benefits may be paid at 66 2/3% of the AWW.

Disfigurement: Serious disfigurement to the face, head, neck or normally exposed bodily area(s) shall entitle the worker to a compensation award of up to \$7,500.

UNREASONABLE DELAY

In cases where OWC determines that an employer/carrier has unreasonably delayed payment of any installment of compensation in bad faith, the employer shall pay the worker their actual weekly wage in addition to any compensation due and payable during the period of delay.

HEARINGS AND APPEALS

If the claim is denied, OWC will investigate the claim and may conduct an informal conference

for dispute resolution. If all interested parties reach an agreement, OWC will issue a Final Order. If one of the parties does not agree with the Memorandum of Informal Conference, the aggrieved party has fourteen (14) working days to notify OWC, in writing, and file for a Formal Hearing within thirty-four (34) working days. After the issuance of the Memorandum of Informal Conference, either party may file for an Application for Formal Hearing (AFH) with the Administrative Hearings Division (AHD). An Administrative Law Judge will conduct a formal hearing and issue a Compensation Order. Any aggrieved party may file an Application For Review (AFR) with the Compensation Review Board (CRB). The AFR must be filed within thirty (30) calendar days. If there is still a dispute, either party may appeal the Decision and Order to the D.C. Court of Appeals within thirty (30) calendar days after the Decision and Order is issued. If a claim is disputed, no benefits may be paid until the dispute has been resolved.

An employer may not discharge or otherwise discriminate against an employee who files or attempts to file a workers' compensation claim. A worker who has testified or is about to testify in a workers' compensation proceeding is also protected. Violation will result in a penalty up to \$1,000. For such violation, an employee may be restored to employment and receive back pay. The employer alone shall pay the penalties. An employer and/or the president, secretary, and treasurer of a corporation are severally and personally liable for any fines for failure to secure compensation coverage, and for the payment of any benefits that may accrue for an injury while uninsured.

If you have any questions...

Ask your insurance agent, broker, or carrier. For additional information or assistance contact:

Department of Employment Services
Labor Standards Bureau
Office of Workers' Compensation
4058 Minnesota Avenue N.E., 3rd Floor
Washington, D.C. 20019
(202) 671-1000 (voice)
(202) 671-1929 (fax)
Website: www.does.dc.gov

Notice of Non-Discrimination

In accordance with the D.C. Human Rights Act of 1977, as amended, D.C. Official Code, Section 2-1401.01 et seq., (Act), the District of Columbia does not discriminate on the basis of actual or perceived: race, color, religion, national origin, sex, age, marital status, personal appearance, sexual orientation, gender identity or expression, familial status, family responsibilities, matriculation, political affiliation, genetic information, disability, source of income, status as a victim of an intra-family offense, and place of residence or business.

Sexual harassment is a form of sex discrimination which is prohibited by the Act. Discrimination is in violation of the Act and will not be tolerated. Violators will be subject to disciplinary action.

The Department of Employment Services is an Equal Opportunity Employer/Provider. Auxiliary aids and services are available upon request to persons with disabilities. Interpreters are available upon request.



The District of Columbia Workers' Compensation Act of 1979, D.C. Law 3-77 (as amended), is administered by the Department of Employment Services, Labor Standards Bureau, Office of Workers' Compensation (OWC).

In the District of Columbia, workers' compensation is a no fault insurance program that provides benefits to workers who are injured on the job. The employee has given up the right to sue the employer, in return for the guaranteed payment of medical treatment and indemnity benefits to replace lost wages. In turn, the employer gives up the common law defenses of contributory negligence, assumption of risk, and injuries caused by a fellow employee.

Most District employers secure coverage for workers' compensation by purchasing an insurance policy from an insurance company licensed in the District of Columbia. Employers may apply to OWC to be certified as self-insured whereby they retain the liability to provide statutory benefits. Applicants for self-insured status may be required to post a substantial bond. Employers must secure and maintain coverage until their self-insured status is approved. Call OWC for more information.

WHO IS COVERED

Employers with one or more employees should obtain coverage for all of their employees in the District of Columbia. Employers who have employees located outside the District are required to have a workers' compensation insurance policy for coverage under the laws of the other states. Sole proprietors,

casual workers, and unpaid volunteers are not covered. Employees of the Federal or District Government are covered by similar but different laws. An employer of a domestic worker(s) who works a combined 240 hours or more per 13-week calendar quarter (approximately 19 hours per week), must obtain coverage. If you have questions regarding coverage requirements, contact your insurance agent, broker, carrier, or OWC. **IF YOU FAIL TO OBTAIN COVERAGE, YOU CAN BE FINED UP TO \$10,000.**

WHAT IS COVERED

Any injury or illness to your employees resulting from their job is covered by workers' compensation, no matter how serious or minor the injury. Workers' compensation protection begins the first minute your employee(s) begins their job in the District of Columbia.

REPORTS NEEDED

All employers in the District of Columbia must post a *Notice of Compliance, Form 1 DCWC*, in each workplace site where it is visible to all employees. This poster describes your insurance information and the rights of employees, and can be obtained from your carrier or OWC. You are required to file an *Employer's First Report of Injury or Occupational Disease, Form 8 DCWC*, with OWC no later than ten (10) working days after the injury or death or when you have knowledge of the injury or illness. A copy of *Form 8 DCWC* should be sent to your carrier and employee. Upon submitting this form to OWC, you are also required to send your employee the Employee's Rights and Obligations statement. Other required forms may be filed through your

insurance carrier, such as:

- *Form 9 DCWC, Memo of Payment of Workers' Compensation*
- *Form 10 DCWC, Wage Schedule;*
- *Form 11 DCWC, Notice of Controversion Memo of Denial of Workers' Compensation;*
- *Form 13 DCWC, Report of Extended Disability;*
- *Form 14 DCWC, Memo of Permanent Partial Disability;*
- *Form 15 DCWC, Notice of Final Payment of Compensation Payment; and*
- *Form 20 DCWC, Application for Formal Hearing.*

All forms can be downloaded from <http://does.dc.gov/page/workers-compensation-does>.

FAILURE TO FILE ANY REQUIRED REPORT MAY RESULT IN A \$1,000 PENALTY.

TYPES OF BENEFITS PAID

You are legally responsible for paying the cost of all medical treatment, medical supplies, vocational rehabilitation benefits, and 66 2/3% of the Average Weekly Wages (AWW) lost for any employee injured on the job. Unless you controvert a claim, you must pay benefits within fourteen (14) working days of knowledge of the work-related injury/illness that prevents the employee from earning wages for more than three (3) days. If you believe the injury is not work-related, you must file *Form 11 DCWC* within the fourteen (14) day time period.

FAILURE TO FILE DCWC FORM 11, WHILE FAILING TO PAY BENEFITS, WILL RESULT IN A PENALTY.

MEDICAL BENEFITS

A worker, injured on the job or with a work-

related illness, has the right to immediate medical treatment and is free to choose any attending physician. If the employee is unable to choose a physician because of a severe injury or unconsciousness, the employer may choose a physician for immediate attention; however, the employee still has the right to choose another attending physician at a later date. Employers/ Insurance carriers must provide cost-free necessary medical care. Medical services and supplies may include medical, surgical, and hospital care, osteopathic, dental, podiatric and chiropractic treatment, prescribed medications, x-rays, braces, prosthetic devices, and wheelchairs.

LOSS OF INCOME BENEFITS

If an employee cannot work because of a job-related injury or illness that disables them for more than three (3) days, the employee is eligible for benefits to replace part of the lost wages. These benefits are determined by the employee's AWW, but cannot exceed the maximum weekly benefit amount which is calculated annually. For injuries occurring on or after March 6, 1991, the weekly benefits for lost wages will equal 66 2/3% of the AWW. If an employee cannot work for more than fourteen (14) days, the three (3) day waiting period does not apply.

FATAL INJURY BENEFITS

If your employee dies as a result of a work-related injury or occupational disease, the surviving spouse and dependents as defined by law, may be entitled to death benefits and burial expenses up to \$5,000. The amount of benefits to be paid is computed at 50% of the deceased worker's AWW, but cannot exceed the