



**THE GEORGE
WASHINGTON
UNIVERSITY**
WASHINGTON, DC

Responsible University Official:
Assistant Vice President, Office of Risk
Management and Insurance
Responsible Office: Office of Risk
Management and Insurance
Last Revised Date: June 24, 2014

WORKERS' COMPENSATION

Policy Statement

The university provides workers' compensation insurance under its Workers' Compensation Program to all full-time, part-time and wage account employees for work-related injuries and illnesses that arise from, and occur in the course of, employment. Employees who believe they have suffered a work-related injury should follow the guidelines and procedures in the university's [Workers' Compensation Program](#).

Reason for Policy

To provide employees with information concerning workers' compensation insurance coverage as an exclusive remedy for accidental injury, occupational illness or disease, or death arising out of and in the course of employment.

Who is Governed by this Policy

Faculty and staff

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Policy

The Office of Risk Management administers the university's Workers' Compensation Program, and may utilize the services of a Third Party Administrator for claims processing.

Work-related injuries or illnesses may be covered under the university's Workers' Compensation Program. To be considered work-related, the injury or illness must arise out of and occur in the course of employment. The Workers' Compensation Program covers authorized , medical expenses related to the treatment of a work-related injury or illness are covered by the university's Workers' Compensation Program in response to properly submitted claims under the university's Workers' Compensation Program.

The university's Workers' Compensation Program may also pay for lost income as a result of an employee's total inability to work due to a compensable work-related injury or illness.

Complete information about the university's Workers' Compensation Program, including eligibility, procedures for reporting work-related injuries or illnesses, and employees' rights and responsibilities, is contained on the [Risk Management website](#).

Forms

[Accident Reporting Kit](#)

[Authorization for Medical Treatment Form](#)

[DCWC Form 7: Employee's Notice of Accidental Injury or Occupational Disease](#)

[DCWC Form 7A: Employee Claim Application](#)

[VWC Form #5: Claim for Benefits](#)

[MDWCC Form C-1: Employee Claim Form \(online form\)](#)

Related Information

[Workers' Compensation Program](#)

[Employee Handbook](#)

[D.C. Department of Employment Services: Workers' Compensation](#)

[D.C. Code § 32-1501 et seq.](#)

[D.C. Mun. Regs. tit. 7, ch. 2 et seq.](#)

[Virginia Workers' Compensation Commission](#)

[Virginia Code § 65.2 et seq.](#)

[16 Virginia Administrative Code § 30-50-10 et seq.](#)

[Maryland Workers' Compensation Commission](#)

[Maryland Code, Lab. & Empl., Title 9 et seq.](#)

[Maryland Administrative Code, § 14-09 et seq.](#)

Contacts

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Document History

- **Last Reviewed Date:** April 20, 2017
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 - **Policy Origination Date:** October 1, 1998
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Who Approved This Policy

Louis H. Katz, Executive Vice President and Treasurer
Beth Nolan, Senior Vice President and General Counsel

This policy, as well as all [university policies](#), are located on the [Office of Compliance and Privacy's](#) home page.