



**WORKERS' COMPENSATION PROGRAM
EMPLOYEE'S RESPONSIBILITIES
IN THE EVENT OF A WORK-RELATED INJURY OR ILLNESS**

- You are required to report all accidents and injuries to your supervisor immediately. If your supervisor is not available, contact the Workers' Compensation Administrator (WCA), Ms. Wilma Thorpe, at (910) 672-1825.
- If medically necessary, you will be taken or sent to the medical network provider listed below after obtaining a medical authorization form from the WCA.

**MedEx Urgent Care
504 Owen Drive
Fayetteville, NC 28304
(910) 221-3030**

- In life threatening emergencies, you will be taken to the nearest medical facility.**
- If possible, you will be given a medical authorization form to give to the medical provider to ensure that the bill for the treatment will go to the Corvel, the third party administrator, for payment.
- As soon as possible after medical treatment, you are required to complete the **Employee Statement and Leave Option Form**. The completed form must be given to your supervisor or the WCA as soon as possible after the accident or report of illness.
- If you are contacted by the CorVel Adjuster in the claim investigation or administration process, you must provide all required information in order to expedite claim processing,
- Any absences from work related to the injury must be authorized with a statement from the treating physician. You must provide any such documentation given to you by the physician to your supervisor or the WCA as soon as possible.
- You are required to provide a doctor's note to your supervisor or the WCA stating any medical restrictions placed on you as a result of the injury.
- You must adhere to the any transitional duty assigned to you as part of the FSU Return to Work Program.

CONTACTS:

Wilma Thorpe
FSU WCA
(910) 672-1825

George E. Tatum
Safety Director
(910) 672-1456

Lori McCall
CorVel Adjuster
(800) 366-5998 ext. 12845