

A background image of a construction site with workers in safety gear and rebar structures.

COYE LAW FIRM

Sometimes...YOU NEED JUSTICE

**SPECIAL REPORT:
Workers' Compensation
Process in Florida
By: Wade B. Coye Attorney/Author**



A word from the author:

Thank you for your interest in my workers' compensation report. Injured employees worry about their physical, professional, and financial futures. Workers' Compensation is a form of insurance that employers purchase in order to provide medical benefits and lost wages for their injured employees. Although it is intended to be helpful, many people find Florida's workers' compensation system overwhelming. In this report, I aim to provide answers and guidance for employees who have been injured on the job. Contact my office if you feel the workers' compensation system could work harder for you and your injuries.

-Wade B. Coye

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If you are injured on the job, you may be eligible to receive compensation for your medical bills and lost wages. This is the goal of the workers' compensation system. Workers' compensation is a system of delivering medical and lost wage benefits. When an employee is injured on the job, this system is used in place of the tort system. It is suppose to deliver immediate medical care and lost wages. This report attempts to explain the intricate system in Florida and how hiring a lawyer may be your best option at getting the benefits you need. Unfortunately the high aims of the system are a failure all too often.

In Florida, the Department of Financial Services and the Office of the Judges of Compensation Claims (JCC) regulate workers' compensation. Information for employers, injured workers, and insurers is available at the [workers'](#)

[compensation section](#). To check on the status of your workers' compensation case, visit the JCC website and input your information.

Florida Law on Workers' Compensation

Chapter 440 of the Florida state statutes discusses the intent, process, requirements, and regulation of the worker's compensation system. According to statute 440.015, workers' compensation is designed to "assure the quick and efficient delivery of disability and medical benefits to an injured worker and to facilitate the worker's return to gainful reemployment at a reasonable cost to the employer."

Basically, the system wants to take the burden of medical bills off of the employee if they were hurt at work and the injury wasn't their fault.

Worker's Compensation Requirements

Workers' compensation is a form of insurance that some employers must buy. As per Florida statutes §440.02 and §440.10, employers are required to provide coverage if they are:

- in an industry, other than construction, and have four or more part- or full-time employees.
- in the construction industry and have one or more employees.
- a state or local government
- a farmer, have five or more regular employees, and/or twelve or more seasonal workers that work for 30+ days a year.

Employees also have to meet requirements.

On the job injuries can be compensated if the employee was injured:

- within the scope of their employment (routine tasks)
- at their job, not going or coming to the place of business on their own time
- traveling as a part of employment (business trip, driving a company car, etc.)
- while not deviating from employment (playing jokes, leaving on company time)



Injuries can occur when no one is at fault. For example, if an employee lifts a box at work and becomes injured, no one can be blamed for the injury. However, the employee is still entitled to benefits because they were doing routine tasks within their employment.

Benefits for Injured Workers

Injured workers may have the following benefits paid to them, if their situations warrant them:

- medical bills
- lost wages
- prescriptions
- rehabilitation
- death benefits
- ambulance/hospital services
- travel expense to doctor's appointment
- compensation for permanent impairment
- reeducation and retraining

Beginning the Process

The absolute first thing you have to do as an injured worker is fill out the [First Report of Injury or Illness](#) form with your employer. The employee must file this form or give some other form of notice (i.e. a conversation with your employer) within 30 days of the injury in order to qualify for benefits. Although verbal notification is acceptable in the Florida workers' compensation system, injured employees can better protect themselves from disputes by filing the First Report of Injury or Illness.

The insurance company gets to pick your doctor. It may not be one you like. Although you can get a second opinion, it might not be any better than the first. You should consult with an experienced workers' compensation attorney about what to do about medical care. The law is very one sided and complicated. If the workers' compensation system is working properly, you should never see a bill for treatment. The doctor bills the employer's insurance company directly.

To pursue lost wages, fill out the [Wage Statement](#) form. If you are determined as having a temporary or permanent disability, your lost wages may be paid. However, if you are able to keep working while recovering

from your injury, you won't be able to pursue this form of benefits.



More serious injuries may require long-term medical treatment and compensation for lost wages. If your doctor determines that you have a temporary or permanent total disability (such as paralysis, loss of a limb, etc) then you are eligible to receive higher wage compensation. Permanent impairment benefits are available when the injured employee reaches maximum medical improvement but requires ongoing treatment and is still unable to work. These situations require extensive communication and coordination with insurance companies, the state, and employers.

The benefit delivery process is described through this [flowchart](#), which is provided by the Dept. of Financial Services. The flowchart is attached at the end of this report. As you can see, the system is not clear-cut or straightforward. Workers have

FIRST REPORT OF INJURY OR ILLNESS

FLORIDA DEPARTMENT OF FINANCIAL SERVICES DIVISION OF WORKERS' COMPENSATION

For assistance call 1-800-342-1741
or contact your local EAO Office
Report all deaths within 24 hours 1-800-219-8953 or (850) 922-8953

RECEIVED BY CLAIMS-HANDLING ENTITY	SENT TO DIVISION DATE	DIVISION RECEIVED DATE

PLEASE PRINT OR TYPE

NAME (First, Middle, Last)		EMPLOYEE INFORMATION	
HOME ADDRESS Street/Apt #: _____ City: _____ State: _____ Zip: _____		Social Security Number	Date of Accident (Month-Day-Year)
TELEPHONE _____ Area Code _____ Number _____		Time of Accident <input type="checkbox"/> AM <input type="checkbox"/> PM	
OCCUPATION		EMPLOYEE'S DESCRIPTION OF ACCIDENT (Include Cause of Injury)	
DATE OF BIRTH _____/_____/_____	SEX <input type="checkbox"/> M <input type="checkbox"/> F	INJURY/ILLNESS THAT OCCURRED	PART OF BODY AFFECTED

COMPANY NAME: _____ D. B. A.: _____ Street: _____ City: _____ State: _____ Zip: _____		FEDERAL I.D. NUMBER (FEIN)		DATE FIRST REPORTED (Month/Day/Year)	
TELEPHONE _____ Area Code _____ Number _____		NATURE OF BUSINESS		POLICY/MEMBER NUMBER	
EMPLOYER'S LOCATION ADDRESS (If different) Street: _____ City: _____ State: _____ Zip: _____		DATE EMPLOYED _____/_____/_____		PAID FOR DATE OF INJURY <input type="checkbox"/> YES <input type="checkbox"/> NO	
LOCATION # (If applicable) _____		LAST DATE EMPLOYEE WORKED _____/_____/_____		WILL YOU CONTINUE TO PAY WAGES INSTEAD OF WORKERS' COMP? <input type="checkbox"/> YES	
PLACE OF ACCIDENT (Street, City, State, Zip) Street: _____ City: _____ State: _____ Zip: _____		RETURNED TO WORK <input type="checkbox"/> YES <input type="checkbox"/> NO IF YES, GIVE DATE _____/_____/_____		LAST DAY WAGES WILL BE PAID INSTEAD OF WORKERS' COMP _____/_____/_____	
COUNTY OF ACCIDENT _____		DATE OF DEATH (If applicable) _____/_____/_____		RATE OF PAY \$ _____ PER <input type="checkbox"/> HR <input type="checkbox"/> WK <input type="checkbox"/> DAY <input type="checkbox"/> MO	
		AGREE WITH DESCRIPTION OF ACCIDENT? <input type="checkbox"/> YES <input type="checkbox"/> NO		Number of hours per day _____ Number of hours per week _____ Number of days per week _____	
Any person who, knowingly and with intent to injure, defraud, or deceive any employer or employee, insurance company, or self-insured program, files a statement of claim containing any false or misleading information commits insurance fraud, punishable as provided in s. 817.234, Section 440.105(7), F.S. I have reviewed, understand and acknowledge the above statement.				NAME, ADDRESS AND TELEPHONE OF PHYSICIAN OR HOSPITAL	
EMPLOYEE SIGNATURE (If available to sign) _____		DATE _____			
EMPLOYER SIGNATURE _____		DATE _____		AUTHORIZED BY EMPLOYER <input type="checkbox"/> YES <input type="checkbox"/> NO	

CLAIMS-HANDLING ENTITY INFORMATION					
<input type="checkbox"/> 1(a) Denied Case - DWC-12, Notice of Denial Attached <input type="checkbox"/> 1(b) Indemnity Only Denied Case - DWC-12, Notice of Denial Attached			<input type="checkbox"/> 2. Medical Only which became Lost Time Case (Complete all required information in #3) Employee's 8 TH Day of Disability _____/_____/_____ Entity's Knowledge of 8 TH Day of Disability _____/_____/_____ <input type="checkbox"/> 3. Lost Time Case - 1st day of disability _____/_____/_____ Full Salary in lieu of comp? <input type="checkbox"/> YES Full Salary End Date _____/_____/_____ Date First Payment Mailed _____/_____/_____ AWW _____ Comp Rate _____ <input type="checkbox"/> T.T. <input type="checkbox"/> T.T. - 80% <input type="checkbox"/> T.P. <input type="checkbox"/> I.B. <input type="checkbox"/> P.T. <input type="checkbox"/> DEATH <input type="checkbox"/> SETTLEMENT ONLY Penalty Amount Paid in 1 st Payment \$ _____ Interest Amount Paid in 1 st Payment \$ _____		
REMARKS:			INSURER NAME		
INSURER CODE #			EMPLOYEE'S CLASS CODE		
SERVICE CO/TPA CODE #			EMPLOYER'S NAICS CODE		
CLAIMS-HANDLING ENTITY FILE #			CLAIMS-HANDLING ENTITY NAME, ADDRESS & TELEPHONE		

Form DFS-F2-DWC-1 (03/2009) Rule 69L-3.025, F.A.C.

varying degrees of injury and recovery time.

Special Cases in Workers' Compensation Claims

As previously mentioned, you may be able to get workers' compensation benefits if you are injured while traveling if it is part of your job. For instance, if you are driving a company car or your own car and authorized to do so by your employer, and get into an accident while technically "on the job," you may qualify for multiple sources of benefits in addition to workers' compensation.

Unfortunately, some people take advantage of the workers' compensation system and file fraudulent claims. Insurance companies may be suspicious of claims and hire private detectives to get incriminating pictures of claimants who aren't as injured as they say they are. If you tell the truth and follow your doctor's orders, you shouldn't have to worry, even if you are under surveillance. Although the practice is legal, it can be intimidating. A judge hearing your case considers any images or video that a private detective collects. If he

or she sees a picture of you lifting groceries from your car, they may not consider it to be that important if it doesn't conflict with your recovery. Be aware that surveillance is commonly used in workers' compensation cases.



Dispute Process

Legal cases often require mediation to proceed. This meeting attempts to compromise or negotiate a settlement so the case doesn't have to go to court. Mediation can resolve a few issues or an entire claim depending on the circumstances. Workers' compensation lawyers know that these meetings can help their clients recover benefits more quickly than going through a court. The system actually requires such a meeting in order to resolve cases as soon as possible.

If one or more issues remain after mediation, then the case goes to a final hearing. A judge rules on the disputed issues of your settlement if your case makes it this far. If you disagree with the ruling, then you have the right to file an appeal.

Many injured workers are able to resolve their issues and injuries with the help of the workers' compensation system. These individuals can release the employer and their insurance company from liability by signing a release or settlement. This document is often long and confusing for people who aren't familiar with legal terminology. A release can limit your ability to pursue more benefits or sue if you're the victim of discrimination or retaliation. To protect your benefits, legal rights, and future employment, you need to speak with a lawyer before signing a release.

Denied Claims

If you receive [this form](#), your workers' compensation claim has been denied. If you qualify for treatment and are denied for unfounded reasons, contact an experienced workers compensation attorney to appeal the process.

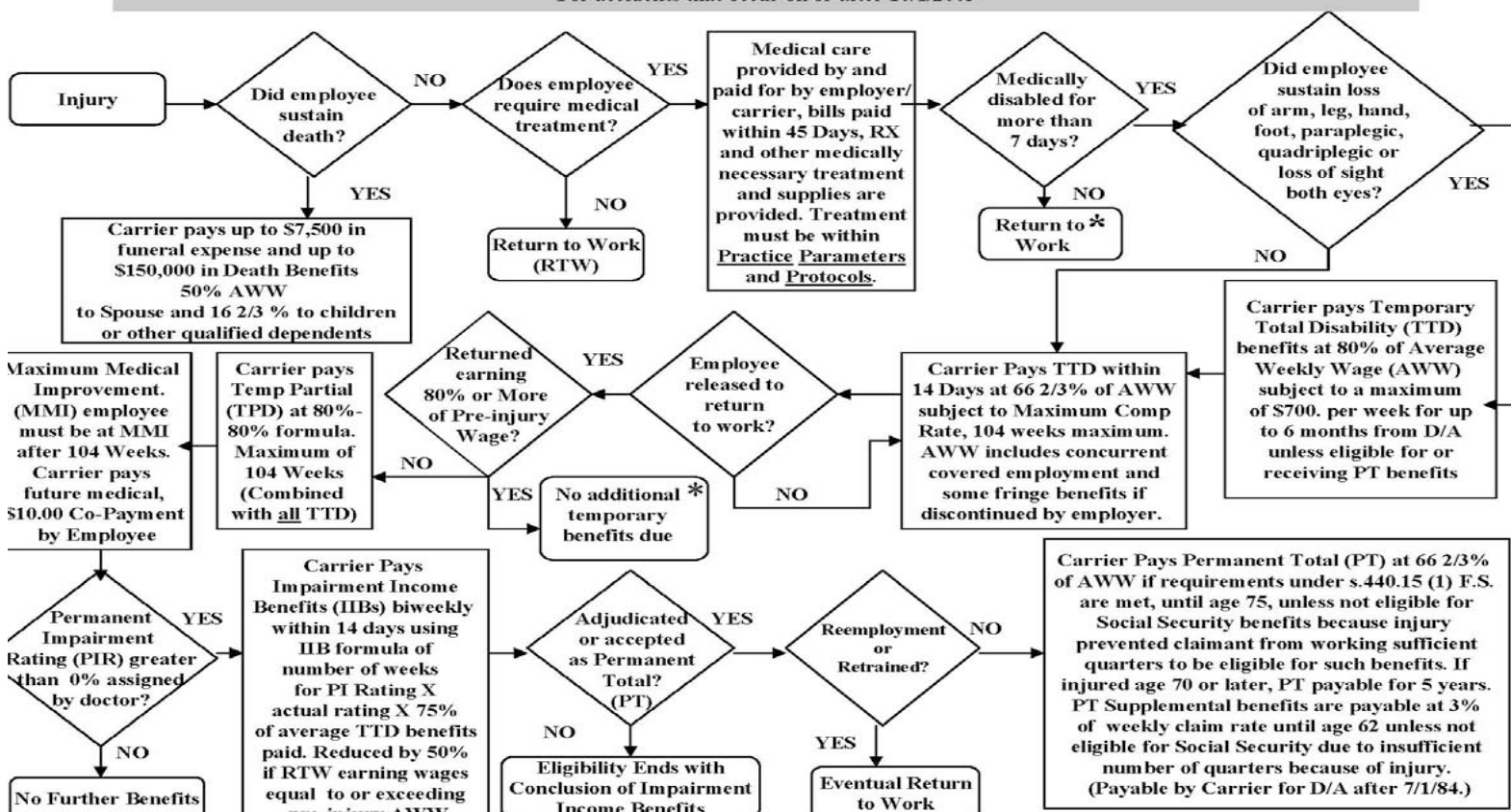
NOTICE OF DENIAL			SENT TO DIVISION DATE	DIVISION RECEIVED DATE
FLORIDA DEPARTMENT OF FINANCIAL SERVICES DIVISION OF WORKERS' COMPENSATION 200 East Gaines Street Tallahassee, Florida 32399-4226 COMPLETE ALL APPLICABLE SECTIONS BEFORE FILING WITH THE DIVISION				
PLEASE PRINT OR TYPE				
SOCIAL SECURITY NUMBER	EMPLOYEE NAME (First, Middle, Last)	DATE OF ACCIDENT: (Month-Day-Year)		
EMPLOYEE ADDRESS	EMPLOYER NAME			
ATTACH ADDITIONAL PAGE(S) IF NECESSARY				
DENIED BENEFITS (List below)				
REASON FOR DENIAL OF BENEFITS (Provide detailed information to support reason(s) for denial)				
DATE DENIAL RESCINDED: ____/____/____ Description of benefits reinstated or started:				
CC: (Name and Address)				
ADJUSTER NAME		ADJUSTER TELEPHONE () _____ Ext. _____		
INSURER CODE	DATE PREPARED	INSURER NAME		
SVC. COTPA CODE	CLAIMS-HANDLING ENTITY FILE #	CLAIMS-HANDLING ENTITY NAME AND ADDRESS		
<small>Any person who, knowingly and with intent to injure, defraud, or deceive any employer or employee, insurance company, or self-insured program, files a statement of claim containing any false or misleading information commits insurance fraud, punishable as provided in s. 617.224, Section 440.105(7), F.S. Form DFS-F2-DWC-12 (03/2009) RULE 69L-3.025, F.A.C.</small>				

Appeals

Appealing a judgment of a compensation claim involves paying to have the record transcribed and paying a filing fee to the appellate court. Then preparing a brief and other technical requirements. This is a complicated process to understand and it is very time consuming. If you are planning on filing an appeal you should contact an experienced workers' compensation lawyer to help you complete the process.

BENEFIT DELIVERY PROCESS

For accidents that occur on or after 10/1/2003



L.Harger 4//2006 * If at Maximum Medical Improvement (MMI) with a Permanent Impairment Rating (PIR), see Impairment Income Benefits (IIB) block in chart

Provided by the Florida Department of Financial Services

About the Author:

Wade B. Coye is an attorney in Orlando, Florida where he has practiced law for over 25 years. He grew up on a dairy farm in upstate New York and has had a variety of life experiences, ranging from serving members of Congress in Washington D.C. to serving in the United States Army. He is a graduate of the University of Buffalo Law School. Mr. Coye is married to Joan Coye and has five children. He is an instrument rated private pilot and certified scuba diver. Coye Law Firm handles personal injury, worker's compensation, Social Security disability, Veterans disability, divorce, and probate claims. The lawyers and staff of Coye Law Firm are proud of their work to help others.

