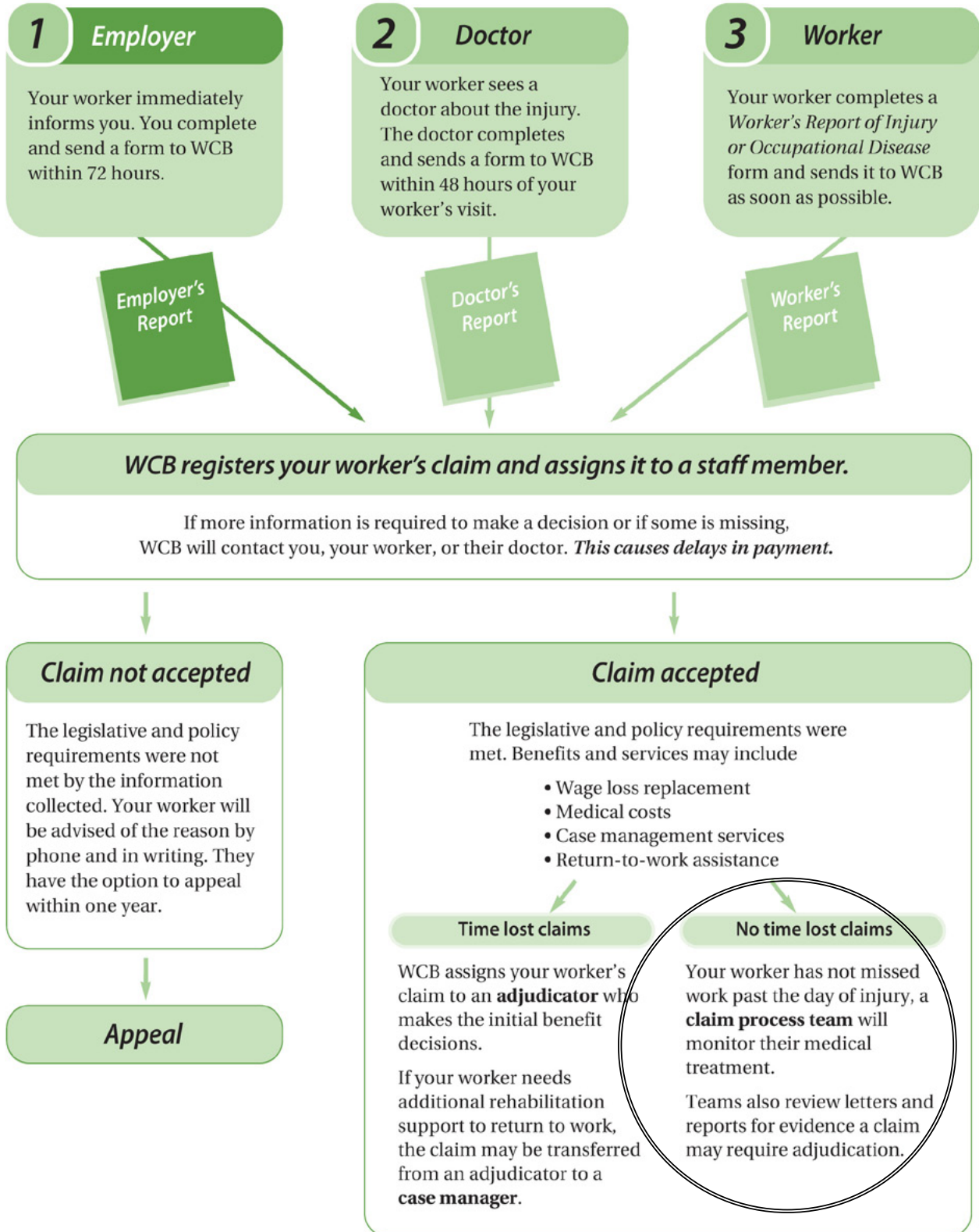


No time lost claims processing

What happens when your worker is injured at work?



No time lost claims (NTL)

Many claims processed at WCB are no time lost claims (NTL). This means your worker returns to regular duties without losing time from work beyond the day of injury, and does not have a permanent disability. WCB covers your worker's medical costs and sends you a letter informing you of the benefits your worker will receive. Your worker may be on modified work, but still not miss any time from their job. Employers are responsible to pay workers for the day the accident occurred. NTL claims are sent to the claim processing team.

NTL claims process

STEP 1 Verification

1. Verify that the worker and employer are covered under the Workers' Compensation Act. Confirm the employer has an open WCB account.
2. Confirm the accident reasonably supports a work injury, and that the accident arose out of and in the course of employment.
3. Confirm the worker has not missed time from work as reported on a worker's or employer's report.
4. Verify the appropriateness of medical costs.

STEP 2 Monitor incoming information on open and closed claims

1. Process medical costs and medical treatment. Medical treatment includes physical therapy and chiropractic treatments.
2. Review letters and reports for evidence that a claim may require more complex adjudication.

STEP 3 Transfer claims to adjudication (under these circumstances)

1. Claim could not be verified in Step 1.
2. Worker missed time from work beyond the day of the accident
 - Worker or Employers Report of Accident form indicates the worker has missed time from work.

**Often medical reports indicate time lost for the date of the accident. These claims are not always assigned for further adjudication.*

3. Employer expresses reasonable concerns
4. Modified work duty concerns
 - Worker has received a decrease in wages as a result of modified work.
 - Worker's modified duties may not be helping them get back to full duties.

5. Physical therapy & chiropractic treatment changes
 - All extension requests for physical therapy (PT) and chiropractic treatment.
6. Complex medical conditions have arisen requiring intervention
 - New documentation on the claim indicating an investigation may be required i.e. for Hernia, Carpal Tunnel Syndrome (CTS), Plantar Fasciitis, dental claims, hearing loss and stress claims.
 - New documentation indicating medical intervention is required i.e. CT scan, MRI's, EMG's, WAC and IME's.
 - Worker requires surgery.
 - Eyeglass claims where the worker has suffered severe personal injury.