



CDSS

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DEPARTMENT OF SOCIAL SERVICES

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February 16, 2011

ALL-COUNTY LETTER NO. 11-17

REASON FOR THIS TRANSMITTAL

- State Law Change
- Federal Law or Regulation Change
- Court Order
- Clarification Requested by One or More Counties
- Initiated by CDSS

TO: ALL COUNTY WELFARE DIRECTORS
ALL COUNTY CALFRESH COORDINATORS
ALL COUNTY WELFARE-TO-WORK COORDINATORS

SUBJECT: WORKERS' COMPENSATION INSURANCE COVERAGE FOR PARTICIPANTS IN THE CALIFORNIA WORK OPPORTUNITY AND RESPONSIBILITY TO KIDS (CalWORKs) PROGRAM AND THE CALFRESH EMPLOYMENT AND TRAINING PROGRAM

REFERENCE: ALL COUNTY LETTERS (ACL) 95-69, 96-09, 00-14 AND ALL COUNTY INFORMATION NOTICE I-10-98

The purpose of this letter is to provide counties with updated information regarding workers' compensation coverage for CalWORKs and CalFresh Employment and Training (E&T) Program participants. The California Department of Social Services (CDSS) contracts with the State Compensation Insurance Fund (SCIF) to administer the workers' compensation benefits to specified CalWORKs and CalFresh E&T Program participants. The CalFresh E&T Program is California's employment and training program for Supplemental Nutrition Assistance Program applicants and recipients. CalFresh E&T Program participants receive CalFresh benefits each month, but do not get a monthly cash grant under the CalWORKs program. The California Department of General Services, Office of Risk and Insurance Management manages the workers' compensation program for CDSS.

CalWORKs Welfare-to-Work Program

Workers' compensation is covered by the state for individuals while they participate in the following CalWORKs Welfare to Work activities including but not limited to:

- Unpaid Work Experience
- Unpaid Community Service
- Subsidized Employment

CalFresh Employment and Training Program

Workers' compensation is covered by the state when a CalFresh recipient is participating in one of the following CalFresh E&T activities:

- Workfare
- On-the-Job Training
- Work Experience

SCIF Reporting Requirements for the CalWORKs and CalFresh E&T Programs

Form SCIF e3067 - Employer's Report of Occupational Injury or Illness:
<http://www.statefundca.com/pdf/e3067.pdf>

When an employee is injured on the job, the law requires employers to file an Employer's Report of Occupational Injury or Illness (SCIF e3067) within five days after knowledge of injury (**SCIF recommends within 24 hours**). In addition, every serious injury, illness, or death must be reported immediately by telephone to the nearest office of the California Division of Occupational Safety and Health (DOSH). A list of DOSH offices can be found at the following link: <http://www.dir.ca.gov/dosh/DistrictOffices.htm>.

After filling out the required SCIF e3067 form, counties/employers shall provide this information to the Claims Reporting Center (CRC) via telephone, who then will accept the initial report of occupational injury or illness from the counties/employers. To assist the person calling in to the CRC, the reporting process is as follows:

- The counties/employers will report all applicable CalWORKs/CalFresh E&T injuries to the CRC by calling the toll free number (888) 222-3211.
- The CRC will use a specialized "intake sheet" created specifically for the CalWORKs and CalFresh E&T programs to take all pertinent claims information and complete the SCIF e3067 over the phone. For a person calling in a claim, they will need to provide the following policy number and group name:
 - For a CalWORKs claim:
 - Policy number "0000"
 - Group name "CONTRG".
 - For a CalFresh E&T claim:
 - Policy number "0000"
 - Group name "CONTFS/FSET".

- The CRC will then send a copy of the SCIF e3067 to the appropriate county for confirmation, even if the report was initiated by the county.
- After receiving confirmation, the CRC faxes and e-mails the report to SCIF within 24 hours of the initial report.

If employers and/or counties are not able to contact SCIF by phone, they are asked to fax the SCIF e3067 to (800) 371-5905 within 24 hours of injury to prevent any delay in processing potential benefits.

Form SCIF e3301, Workers' Compensation Claim Form (DWC 1):

<http://www.statefundca.com/pdf/e3301.pdf>

In addition to contacting the CRC, the SCIF e3301 and the Reporting Package (see below) must be sent to SCIF. The SCIF e3301 must be completed by the employee and the representative of the worksite where the injury occurred. Please note that the claim form must be completed within 24 hours of the occurrence or knowledge of the occurrence of the injury.

All information requested on this form is essential for the proper handling of the claim. The information must be complete, accurate, and contain the worksite supervisor's signature. The worksite supervisor's signature is not an admission of liability.

Reporting Package

Along with the SCIF e3301, the Reporting Package must contain any medical reports and bills, verification of the employment assignment (e.g., employment contract), and information regarding the client's grant amounts. Information on the client's grant amounts should cover the previous 12 months, when available, and will be used to determine the correct disability payment amounts.

Please note, since January 1, 1996, temporary workers' compensation has been treated as earned income per ACL No. 95-69, dated November 16, 1995.

SCIF Claim Adjusters

In the recent past the SCIF Claims Management Services (CMS) in Sacramento was handling the claims associated CalWORKs/CalFresh E&T but now the San Bernardino office claims adjusters will be handling those specific claims. The San Bernardino office can be reached at (800) 254-0761.

These adjusters will be contacting the CalWORKs/CalFresh E&T county workers' compensation coordinators for further information on individual cases. It is the responsibility of the coordinators to provide all necessary information. Cooperating with these adjusters and providing requested information is not considered a violation of

confidentiality, since SCIF is under contract with CDSS to administer these benefits and is acting on behalf of CDSS.

SCIF adjusters may ask questions in the following areas:

- Return to work dates
- Length of assignments
- Availability of alternative/modified work
- Background information
- Medical information
- Grant information

SCIF's organizational changes in the Clams Management Services offices means that the county must now submit a completed Reporting Package to:

**State Compensation Insurance Fund
CMS – San Bernardino
P.O. Box 65005
Pinedale, CA 93650-5005**

If a fatality or serious injury occurs, the representative at the worksite must immediately call the SCIF CMS - San Bernardino Office at (800) 254-0761. Also, if the worksite is other than the county office, the worksite representative must call the county welfare department immediately to report the incident.

If there are any questions related to the CRC, completion of reporting forms, or administration of benefits by SCIF, please contact Mark Doty, Associate Risk Analyst, State Department of General Services, Office of Risk Insurance Management, at (916) 376-5296. If you have any questions regarding the information in this letter or are unsure who is covered, you may contact your Employment Bureau county consultant at (916) 654-2137 or Kristin Brinks, Manager, CalFresh Employment and Special Projects Unit, at (916) 654-1435.

Sincerely,

Original Document Signed By:

CHARR LEE METSKER
Deputy Director
Welfare to Work Division