QUICK REFERENCE GUIDE

FOR STATE INSURANCE FUND POLICYHOLDERS

My policy number:

Look above the address label of compUpdate or a previous statement for your policy number.

MY INSURANCE AGENT:	
PHONE:	If you have an agent, you should contact you agent first if you have questions. Your agent is a valuable resource.
	valuable resource.

MY SIF UNDERWRITER:

PHONE: _____ E-MAIL: ____@isif.state.id.us

You will find your underwriter's name and phone number on correspondence you receive from the Fund. You also can obtain it by calling the Fund and asking the operator. You will need to have your policy number and business name as it appears on your policy in order to assist the operator in determining who your underwriter is. Your underwriter's e-mail address consists of the first letter of the underwriter's first name followed by the first seven letters of his or her last name and @isif.state.id.us.

MY CLAIMS CONTACT:

OTHER SIF CONTACTS:



E-MAIL ADDRESSES

You can e-mail correspondence to us. We can accept attachments of Microsoft Office files, pdf files and image formats such as jpg, gif, bmp.

To file a claim: reportclaim@isif.state.id.us To request a certificate: certificate@isif.state.id.us

Web site: www2.state.id.us/isif/



PHONES NUMBERS

332-2100 in Boise calling area

(208) 332-2100 outside Boise calling area

(800)-334-2370 toll-free outside Boise area



MAILING ADDRESS

Please use the envelopes provided to return your premium payments and payroll reports. Use the following address to mail a First Report of Injury or other correspondence:

State Insurance Fund P.O. Box 83720 Boise, ID 83720-0044

FAX NUMBERS

 Underwriting
 (208) 334-3254

 Audit
 (208) 334-3254

 Risk Management
 (208) 334-3696

 Claims
 (208) 334-3253

CERTIFICATES OF INSURANCE

Toll-free request line: **1-888-253-0149** to request certificate 24 hours a day

Dial 332-2375 in the Boise area

Fax request line: (208) 334-3254

Please include your business name and policy number and the name and address of the person you want the certificate sent to. We can fax certificates if you provide a fax number

NEED TO FILE A CLAIM?

By mail: Send First Report of Injury

to State Insurance Fund P.O. Box 83720 Boise, ID 83720-0044

By fax: (208) 334-3253

By e-mail: reportclaim@isif.state.id.us (download the e-mail form from our Web site: www2.state.id.us/isif)

Call 1-800-334-2370 or (208) 332-2100 if you need a FROI form.

STATE Insurance Fund

A OUARTERLY

NEWSLETTER

FALL 2002

Keeping your policy information current

It is important that you keep us up to date with information about your business. Please notify your agent or your underwriter if:

☑ Any of the following change:

Name

Address — physical and billing

Phone number

E-mail address

Fax number

- ✓ You expect your payroll to increase or decrease significantly.

- Family members who work in your business move in or out of your home. (This applies to sole proprietors only.)
- You restructure your business entity type. For example, you incorporate, form a legal partnership or LLC.
- ✓ You add or delete corporate officers or partners.
- ☑ You restructure the stock ownership of corporate officers.
- ✓ You cannot submit your payroll report or make your payment on time.
- ✓ You implement or discontinue a drug-free workplace program.

As a State Insurance Fund policyholder, there will be a few things you will need to do in order to fulfill your policy obligations. These include:

- Complete and submit payroll reports on time, even if the payroll amount is zero. Payroll reports are due on the 21st of the month. The completed form has to be received in Boise by the due date, or procedures to cancel the policy for failure to report payroll will begin.
- Pay the premium due by the due date. The due date is printed on your statement.
- ✓ Promptly return any requests for additional information.
- Request certificates of insurance from contractors and subcontractors. This is one way you can save money. If you cannot provide certificates, you may be responsible for the contractors' and subcontractors' exposure and can be billed accordingly.
- Complete and submit a First Report of Injury if one of your employees is injured on the job.

Other valuable services offered

As a policyholder, you're likely to come into contact with our Underwriting, Audit and Claims departments. We have two other departments that can provide valuable assistance — the Client Relations and Risk Management departments.

Client Relations

The work of the Client Relations Department is focused largely on providing education and exchanging information. The department consists of nine field service representatives (FSRs) who are licensed casualty insurance agents.

Client Relations works to help you understand the provisions of your workers compensation policy and to help Fund personnel in other departments to understand the nature of your business. FSRs are available to provide you with a more "personalized" service if you have questions or concerns.

Risk Management

The best way to control your workers compensation insurance cost is to prevent accidents. The State Fund's risk management consultants are available to discuss loss prevention strategies with policyholders.

The State Fund's loss prevention services include:

- Assisting policyholders in designing loss prevention programs that emphasize training and the integration of safe work methods into every job.
- Conducting loss prevention surveys and work observations to identify administrative procedures and work practices that need modification to reduce injuries.
- ✓ Industrial hygiene services focused on occupational health concerns. Chemical, physical, biological and ergonomic stresses in the work place are evaluated and recommendations made to reduce and control potential risks.
- Supervisor training courses in effective loss prevention activities and how to reduce losses.

When an employee is injured . . .

Your "Six-Step Response"

1. Inquire

If you see, hear about or suspect a work injury, don't ignore it. Get to the bottom of it. Ask questions and find out the "where, when and how." This is particularly important when either you or the

employee is not sure whether the injury is work related.

Document your conversation. If the employee is not injured, or it is clear the injury is not work-related, it is likely no further action will be needed. However, if the employee believes he or she was injured at work, go to the next step.

2. Direct the proper care

For an emergency, provide prompt medical attention, including transportation if necessary. In a non-emergency situation, if you have selected a company physician, it is reasonable to send the injured worker to that physician for care as the initial medical attendant. If no designated physician is available, the employee may select the physician of his or her choice.

3. Gather information

Obtain the information necessary to report the injury accurately and completely. Talk to the injured employee. You need specifics on how, when and where the accident took place. Be objective, not accusatory.

Find out whether anyone witnessed the injury. This can be a valuable source of details about the accident. Talk to the injured employee. You'll also need to get the injured employee's personnel file to obtain information needed to complete the First Report of Injury.

If the injury is serious, call the

Fund immediately. A nurse consultant may be assigned, and a claims investigation may be instigated, especially in the event the accident involved a third party or faulty equipment. Preserve evidence. If you suspect an accident occurred because of faulty equipment, secure

the equipment immediately. If you can, takes photos of the scene as soon as possible.

4. Fill out the First Report of Injury (FROI)

Be as accurate and complete as possible when you fill out the First Report of Injury. The form should be completed by the employer, not the employee or medical provider. If you question whether an injury is work-related, have additional information, or want the Fund to consider an investigation, attach a note to the form.

Essential information for filing a claim:

When reporting an injury, it is important to fill out the form as completely as possible. The following information is necessary to get the claim registered.

- ✓ Injured worker's first and last name.
- ☑ Injured worker's Social Security number.
- ☑ Date of the injury.
- ☑ Policy number and/or policyholder's business name.
- ☑ Time loss information as indicated in No. 15 on the FROI.
- How the injury occurred and type of injury and body part affected.
- ✓ Injured worker's address

File a claim when:

- A work-related injury results in the need for medical treatment by a licensed medical provider.
- ☑ A worker has missed more than one day of work as the result of a work-related injury.
- An injured worker requests to file a claim under workers compensation regardless of the circumstances.

5. Send the First Report of Injury to the Fund

A First Report of Injury must be completed within 10 days from the date of knowledge of an injury. It is the employer's responsibility to secure the information from the injured worker after receiving notification that an injury has occurred. Although it is desirable, it is not necessary to obtain the employee's signature on the form, if obtaining that signature delays the filing of the claim. A claim cannot be opened and a claim number assigned by the Fund until the FROI is received.

6. Follow the process

Remain aware of the employee's claim and its status. Read any notices or correspondence you receive from the Fund about the claim.

Show concern for the injured worker. Workers who are injured on the job often experience anxiety about the injury and their treatment, and its adverse impact

on their job, economic status and family. Through early and frequent contact with the injured worker, the employer and Fund can calm those fears. This is often a significant factor in promoting prompt recovery, early return to work and a reduction in total claims costs.

State Insurance Fund 1215 West State Street P.O. Box 83720 Boise, ID 83720-0044 (208) 332-2100 (800) 334-2370

E-mail addresses:

Underwriting: Underwriting@isif.state.id.us

Audit: Audit@isif.state.id.us Claims: Claims@isif.state.id.us

Risk Management: RiskManage@isif.state.id.us

Client Relations: Client@isif.state.id.us

Manager's Office: Administration@isif.state.id.us

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www2.state.id.us/isif/

ANTI-FRAUD HOTLINE 1-800-448-ISIF (4743)

Go online for information about the Fund

Our Web site is a valuable source of information about the Fund and workers compensation. Go to our home page:



- ☑ To download forms such as the First Report of Injury, Supplemental form, and Policy Application.
- ☑ To get information about each of our departments and their services.
- ☑ To learn more about the claims process and for information you can share with your injured employees.
- To contact the Fund and its employees via mail, phone, fax, and e-mail.
- ☑ To get the Fund's premium rates.
- ✓ To learn about the drug-free workplace premium discount.
- ☑ To find links to sites with safety-related information.
- To learn how to request certificates of insurance.
- ☑ To find back issues of compUpdate newsletter.

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