



Workers' Compensation

FREQUENTLY ASKED QUESTIONS

What is workers' compensation?

Workers' compensation is a no-fault insurance program in the State of Nevada, which provides benefits to employees who are injured on the job and protection to employers who have provided coverage at the time of injury.

Is there a waiting period for workers' compensation coverage?

No. From the moment they are hired, employees are covered by the applicable statutes and regulations of Nevada Revised Statutes and Nevada Administrative Code 616 and 617 and must be insured by their employers.

Do employees who are family members have to be insured?

Yes. See the front page article on this topic in the spring 2011 edition of the [*Workers' Compensation Chronicle*](#).

Does an out-of-state company have to provide Nevada workers' compensation insurance?

It depends on many conditions. [NRS 616B.600](#) describes in detail the exemptions and requirements of out-of-state employers with workers in Nevada.

Are sole proprietors required to have workers' compensation insurance?

Although a sole proprietor having no employees is not required to maintain workers' compensation insurance on himself/herself, the sole proprietor may elect to secure coverage for himself/herself. However, if there are any employees working for the sole proprietor, then the sole proprietor must maintain workers' compensation insurance on them. In addition, sole proprietors who are contractors as defined in [NRS 624.020](#), operating within the scope of their license, must secure coverage.

How do I report workers' comp fraud?

The Attorney General's Workers' Compensation Fraud Unit investigates allegations related to claimant, employer, and provider fraud on behalf of the state and self-insured employers. This unit is also generally responsible for the investigation of any fraud related to the administration of workers' compensation. Report suspected fraud to the AG Fraud Hotline: 1-800-266-8688. More information for detecting possible fraud is available on their Web site at: <http://ag.state.nv.us/org/bcj/spd/wcfu/wcfu.html>

How do I verify an employer's worker's comp coverage?

DIR/WCS's Coverage Verification Service (CVS) can help users verify workers' compensation coverage of employers who have policies with private carriers. CVS searches can indicate policy coverage status on current and past dates. <http://dirweb.state.nv.us/WCS/cvs.htm>

Note: CVS will not display self-insured employers. A listing of self-insured employers is available on the Division of Insurance Web site: <http://www.doi.state.nv.us/>

Where can an employer go if no insurance company will issue them a policy?

The National Council on Compensation Insurance, Inc. Web site lists residual market insurers who agree to provide coverage for difficult to insure businesses. Call 800-NCCI-123 or e-mail NCCI for more information.

Do I have the right to reopen my claim in the future?

[NRS 616C.390](#) details the requirements, procedure and limitations of claim reopening. Also, the Nevada Attorney for Injured Workers has compiled helpful suggestions for claim reopening: <http://naiw.nv.gov/Reopening/index.html>

Must an injured worker accept the offer of a light duty job?

An injured worker who rejects a light duty offer made in accordance with [NRS 616C.475](#) and [NAC 616C.583](#) risks the discontinuation of temporary total disability compensation.

How is an injured employee's average monthly wage determined?

[NACs 616C.420 – 616C.447](#), inclusive, provides details on all aspects of average monthly wage definition and calculation.

Are there maximum and minimum levels of compensation?

Maximum disability compensation in Nevada is 66-2/3 percent of the average monthly wage ([NRS 616A.065](#) and [616C.475](#)). For FY 2012 (July 1, 2011 – June 30, 2012), the maximum considered wage for this calculation is \$5,151.57, which after multiplying by 66 2/3% yields a maximum monthly disability compensation of **\$3,434.38**. There is no minimum payment for disability; however, [NRS 616A.120 – 616A.205](#), inclusive, specify deemed wages for various types of volunteers, job trainees, county board members and others.

How are dispute procedures started?

A claimant may contest an insurer's or self-insured employer's determination in accordance with the provisions of [NRS 616C.305 and 616C.315 to 616C.385](#), inclusive.

Are illegal immigrant workers covered under Nevada's workers' comp statutes?

Yes. According to [NRS 616A.105](#), "employee and workman are used interchangeably ... and mean every person in service of an employer ... whether lawfully or unlawfully employed" including "aliens."

What will happen to an employer who fails to obtain or maintain workers' compensation insurance?

The Division of Industrial Relations, Workers' Compensation Section (WCS) is responsible for ensuring that all employers are in compliance with the law. Employers who do not provide workers' compensation will be charged with an administrative fine up to \$15,000; appropriate premium penalties; may be ordered to close business until insurance has been obtained; and will be held financially responsible for all costs arising from a work-related injury. In addition, the uninsured employer may be subject to a criminal penalty for claims resulting in substantial bodily harm or death. ([NRS 616D.200](#) & [NAC 616D.345](#))

Who can provide workers' compensation coverage in Nevada?

Employers may purchase insurance from a private carrier licensed in Nevada or be certified by the Division of Insurance (DOI) as a self-insured employer or a member of an association of self-insured public or private employers. Private carriers currently utilize competitive premium rates which allow them to deviate on the

expense portion of the premiums. This rate must be filed with the DOI 15 days before it is effective and can be disapproved. Contact [DOI](#) for more information: Carson City (775) 687-4270; Las Vegas (702) 486-4009.

What protection is provided for the employer?

Because Nevada has “exclusive remedy,” the injured workers’ benefits are set forth in the statutes. Employers who provide coverage for their employees at the time of injury are protected from any additional damages claimed by their employees as a result of an injury on the job. This protection is established when the injured employee opts to receive workers’ compensation benefits.

How do the Subsequent Injury Accounts benefit employers?

The Subsequent Injury Accounts encourage employers to hire workers with a permanent physical impairment. The costs of any qualified subsequent injury are paid from the appropriate subsequent injury account. ([NRS 616B.545 – 590](#)) Contact Jacque Everhart at (702) 486-9089 or everhart@business.nv.gov for more information.

Which employers are required to provide workers’ compensation insurance?

Unless excluded by statute, it is mandatory for an employer who has one or more employees to provide workers’ compensation insurance coverage. Some employees are excluded by [NRS 616A.110](#) due to unique criteria. Employment exempt from workers’ compensation insurance coverage requirements includes:

- Employment related to those interstate commerce entities that are not subject to the legislative power of the state of Nevada.
- Employment covered by private disability and death benefit plans which comprehend compensation payments of equal or greater amounts than those provided in NRS 616 and which have been in effect for one year prior to July 1, 1947;
- Employees who are brought into Nevada on a temporary basis and who are insured in another state if extraterritorial coverage provisions are in effect with the other state.

Exception: the construction trades.

- Casual employment (employment lasting not more than 20 days and having a total labor cost of less than \$500) is exempt **if employment is not in the course of trade, business, profession or occupation of the employer.**

CONSTRUCTION TRADES ARE REQUIRED TO HAVE WORKERS’ COMPENSATION INSURANCE.

What do I do if I get hurt on the job?

Tell your supervisor. Fill out the paperwork your employer provides (Form C-1/Notice of Injury or Occupational Disease (Incident Report)). Get medical care if you need it and fill out that paperwork, as well (Form C-4/ Employee's Claim for Compensation/Report of Initial Treatment).

Will I be allowed to go to any doctor, chiropractor or therapist that I choose?

No, you must go to an authorized medical provider who is a member of the [Panel of Treating Physicians and Chiropractors](#). Insurers may use a managed care organization (MCO), preferred provider organization (PPO), health maintenance organization (HMO) or the insurance company’s internal managed care unit. **In the event of a serious injury, go to your nearest emergency room and follow staff directions.**

Can managed care organizations (MCO) be used for workers’ compensation?

Yes. You should ask your employer or insurer for the list of authorized providers for the insurer they have chosen. You may also look at the workers’ compensation poster at your employer’s office. Your employer can

tell you how to contact the managed care organization in order to get the names of medical providers authorized to treat you.

What types of benefits may injured employees be entitled to?

Benefits may include:

- Medical treatment;
- Lost time compensation (TTD/TPD);
- Permanent Partial Disability (PPD);
- Permanent Total Disability (PTD);
- Vocational Rehabilitation;
- Dependent's payments in the event of death; and
- Other claims-related benefits or expenses (i.e., mileage)

Whom can injured workers ask questions about their claims?

Call your employer, insurer, or claims adjuster. Your employer can tell you how to contact the insurer or third-party claims administrator he or she has chosen to handle workers' compensation coverage. You may also look at the workers' compensation poster at your employer's office.

What should I do if I think that my claim is not being handled properly?

Begin by discussing the claim with your supervisor. If you still have questions, contact the claims adjuster for your insurer. If you continue to feel your concerns are not being addressed, contact the DIR/WCS for assistance. In addition, state law requires all insurers to provide appeal rights to the Department of Administration, Hearings Division, which was established to resolve disputes in claims. If you disagree with a claim determination, you may appeal the decision to the Hearing Officer within 70 days from the date of the insurer's determination or to the Appeals Officer within 30 days of an MCO's determination. If you still have questions, you may contact the Nevada Attorney for Injured Workers (NAIW) to help you understand the procedure.

What happens to my claim and my benefits if my employer changes insurance companies?

The date of injury determines which insurance company is responsible for your claim. Benefits continue, if appropriate. In other words, claims that were covered before the employer changes his coverage to a new or different insurer stay with the original insurer. New claims with a date of injury that takes place after the employer has selected a new insurer will be handled by the new insurance company.

What should I do if my question isn't listed here?

Use the following link to e-mail your questions to WCS: WCSHelp@business.nv.gov