

## 2009 Handbook of Employment Regulations Affecting Florida Farm Employers and Workers: Workers' Compensation [State]<sup>1</sup>

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### Purpose

To assure quick and efficient delivery of disability and medical benefits to an injured worker and to facilitate a worker's return to gainful re-employment at a reasonable cost to the employer (the *Florida Workers' Compensation System Guide* is available online at <http://www.fldfs.com/WC/pdf/WC-System-Guide-v2.pdf>).

### Covered Employers

All agricultural employers who employ five or more regular employees and/or employ twelve or more seasonal employees for more than thirty days.

### Covered Employers Must

Purchase Workers' Compensation insurance by any one of four options:

1. Standard policy on open market.
2. Individual self insurance.
3. Group self insurance.
4. Joint underwriting plan of the Florida Department of Financial Services.

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1. This is EDIS document FE423, a publication of the Department of Food and Resource Economics, Florida Cooperative Extension Service, Institute of Food and Agricultural Sciences, University of Florida, Gainesville, FL. Published July 2003, revised December 2009. This information is included in Circular 1200, Handbook of Employment Regulations Affecting Florida Farm Employers and Workers. First published February 1992 as Circular 1043. Revised December 2002 as Circular 1200. Please visit the EDIS website at <http://edis.ifas.ufl.edu>.

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## Cost of Insurance

This varies depending on employment activity and experience rating of each employer. (Florida Department of Financial Services approves all Workers' Compensation premium rates for each employment activity and job classification.) Premium rates are defined as percentages of payroll.

## Posting Requirement

The *Broken Arm Poster* and the *Anti-Fraud Notice* should be posted in a conspicuous place and should identify the name of the insurance company providing coverage and where to call to report an accident or injury. The employer should contact the insurance company to obtain the poster and the notice. Employers who are *not* required to provide Workers' Compensation and who do not have coverage must post clearly written notice in a conspicuous location at each work site.

## Reporting Any Injury

- Employers, on receiving notice that an employee has been injured, must complete and file a *Notice of Injury or Illness Form* (Form DFS-F2-DWC-1) with the insurance carrier.
- The *Notice of Injury or Illness Form* must be in the carrier's hands within seven days from the date that the employer has actual knowledge of accident or injury. A copy of the form shall also be sent to the Florida Division of Workers' Compensation.
- The insurance carrier or self-insured employer must mail Form DFS-F2-DWC-1 to the Division of Workers' Compensation in Tallahassee within thirty days of receipt.
- If injury results in death, the employer must give a special notice within twenty-four hours by telephoning 1(800) 219-8953 or 1(850) 922-8953. this special notice is not required if the death occurs after the accident has been reported.

- For assistance, call the Workers' Compensation Helpline at 1(800) 342-1741.

## Benefits Schedule

- Total number of weeks an injured worker can receive benefits (excluding permanent total) is 401 weeks from date of accident.
- Temporary total and temporary partial disability benefits limited to 104 weeks combined.
- Impairment benefits and supplemental benefits replace wage loss benefits (for accidents after January 1, 1994).
- If a work-related death occurs within one year of the date of accident or five years of continuous disability, the following benefits may be due and payable up to a maximum total of \$150,000: funeral expenses up to \$7,500, compensation to dependents as defined by law, and educational benefits to the surviving spouse.

## Permanent Total Disability Awards

- To be defined permanent total, the injury must be catastrophic in nature.
- Employers/carriers have the right to conduct vocational evaluations or testing of workers who are permanent total once every calendar year and must give employees seven-days notice.

## Fraud Discouraged

- By more clearly defining fraudulent activities.
- By increasing penalties for illegal activities.
- By establishing the Bureau of Workers' Compensation Hotline at 1(800) 378-0445.

## Promoting Workplace Safety

The Florida Occupational Safety and Health Act contains a provision for a discount in Workers' Compensation premiums for employers who adopt and implement an approved workplace safety program.

## Elements of Acceptable Workplace Safety Program

- Management commitment and involvement
- Safety committee
- Safety and health training
- First aid procedures
- Accident investigations
- Record-keeping procedures
- Safety rules and policies

## Premium Discount for Workplace Safety Program

Employers who implement safety program approved by the Division of Safety are eligible for premium credits of up to twenty-seven percent.

## Protecting Rights of Employees to Benefits

- Employees Assistance and Ombudsman (E.A.O.) Office created to assist injured workers.
- All disputed issues must go through E.A.O. process before any formal litigation.
- E.A.O. has thirty days after receiving request for assistance to resolve disputes.
- If dispute is resolved at E.A.O. level, no claimant attorney fees are allowed by state statute.
- If dispute is not resolved, E.A.O. will assist unrepresented worker in completing the formal Petition of Benefits.

## Drug-Free Workplace Program

- The purpose of this program is to avoid work-related accidents resulting from drug abuse by employees.
- The Florida Administrative Code for Drug-Free Workplace Standards, as adopted by the Agency for Health Care Administration, shall be utilized

for all drug testing pursuant to the Florida Workers' Compensation program.

- Insurance premium discounts of up to five percent are possible for employers having acceptable drug-free workplace programs.

## Additional Information

- Chapter 440, Florida Statutes
- Division of Workers' Compensation, toll-free number at 1(800) 742-2214
- Florida Department of Financial Services, Division of Workers' Compensation
- Bureau of Compliance, Florida Department of Financial Services, Division of Workers' Compensation

## Responsible Agency

Florida Department of Financial Services

Division of Workers' Compensation

200 East Gaines Street

Tallahassee, FL 32399-4220

(850) 413-1609 or 1(800) 342-1741

<http://www.myfloridacfo.com/WC/>

[http://www.myfloridacfo.com/WC/dist\\_offices.html](http://www.myfloridacfo.com/WC/dist_offices.html)

For local offices, see the telephone directory under

- Florida, State of
- Insurance, Department of
- Workers' Compensation, Division of