

Customer Workers Compensation Jurisdictional Resource – New Hampshire

Issue	Mandatory	What & How	Impact	State Forms
Timely Reporting of Claims	<p>Yes</p> <p>Claimant must provide <u>New Hampshire Form 8WC - Employer's First Report of Occupational Injury or Disease</u> to employer of accident/injury within 2 years from date of injury, or 2 years from date on which claimant knew or should have known relationship of injury to employment.</p> <p><u>Rule RSA 281-A: 19 of the New Hampshire Code</u></p>	<p>Telephonically: Commercial 800.832.7839 Construction 877.828.4132</p> <p>Facsimile: 800.842.8571</p> <p>Online: www.Travelers.com</p>	<p>If employee fails to comply with statute, claim may be barred.</p>	<p><u>New Hampshire Form 8aWCA - Notice of Accidental Injury Or Occupational Disease</u></p> <p><u>New Hampshire Form 8WC - Employer's First Report of Occupational Injury or Disease</u></p>
Drug Free Workplace	<p>Employer not liable for injury to worker caused in whole or in part by intoxication unless employer knew.</p> <p><u>Rule RSA 281-A: 14 of the New Hampshire Code</u></p>	N/A	<p>If intoxication found to be proximate cause of injury, claim could be barred.</p>	N/A

Managed Care Law	See Rule RSA 281-A:23-a of the New Hampshire Code	Employer/carrier/self-insurer subject to the provisions workers' compensation law may satisfy the requirements and provisions of Rule RSA 281-A:23-a of the New Hampshire Code and the employee's rights under that section by providing a managed care program which has been approved by the commissioner.	N/A	N/A
Timely Reporting of Out of Work Status	Yes, must file: New Hampshire Form 8WC - Employer's First Report of Occupational Injury or Disease , New Hampshire Workers' Compensation Medical Form 75 WCA-1 6-94 , New Hampshire Form 13 WCA 7-89 - Employer's Supplemental Report of Injury , and New Hampshire Form 9WCA - Memo of Payment of Disability Compensation	Claimant must notify employer of out of work status and provide medical documentation showing causal relationship to work-related injury	Claimant will not be paid indemnity until proof of lost time (after 3 days), and proof of causal relationship to work-related injury	New Hampshire Form 8WC - Employer's First Report of Occupational Injury or Disease New Hampshire Workers' Compensation Medical Form 75 WCA-1 6-94 New Hampshire Form 13 WCA 7-89 - Employer's Supplemental Report of Injury New Hampshire Form 9WCA - Memo of Payment of Disability Compensation

<p>Timely Reporting of Employee Returning to Work</p>	<p>Yes</p>	<p>Employee provides notice to employer of ability to return to work, and actually returns to work.</p>	<p>If employee returns at previous average weekly pay, file MOP for termination of benefits; if returns at less than average weekly pay, then file MOP for change to temporary partial disability.</p>	<p>New Hampshire Workers' Compensation Medical Form 75 WCA-1 6-94</p> <p>New Hampshire Form 9WCA - Memo of Payment of Disability Compensation</p>
<p>Bona Fide Job Offers</p>	<p>Yes</p> <p>If five or more employees, employer must develop temporary alternative work.</p> <p>Rule RSA 281-A: 23-b of the New Hampshire Code</p> <p>An employee of an employer who employs 5 or more employees, who has sustained an injury, shall be reinstated by the employer to the employee's former position of employment upon request for such reinstatement, if the position exists and is available and the employee is not disabled from performing the duties of such position, with reasonable accommodations for the employee's limitations. Rule RSA 281-A: 25-a of the New Hampshire Code</p>	<p>If claimant returns to temporary alternative work, if same pay, carrier must file MOP indicating return to work and termination of benefits; if claimant returns at less than average weekly pay, carrier must file MOP indicating change to temporary partial disability.</p> <p>Reinstatement – within 18 months from DOI, if released to return to work, claimant entitled to reinstatement if requested, unless certain conditions met.</p> <p>New Hampshire Workers' Compensation Task Analysis may be completed and sent to treating doctor to determine claimant capacity for performing job tasks.</p>	<p>If claimant fails to accept temporary alternative duty, employer may petition the Department of Labor to reduce/terminate benefits; if claimant returns to TAD temporary alternative duty within 5 days of DOI, indemnity paid from DOI.</p>	<p>New Hampshire Workers' Compensation Task Analysis</p>

Wage Statements	<p>Claimants are entitled to highest wages calculated as average weekly pay between 26 and 52 weeks prior to the date of the injury.</p> <p>Rule RSA 281-A: 15 of the New Hampshire Code</p>	N/A	N/A	Wage Schedule (76 WCA 1-94)
Posting of Notices	<p>Yes</p> <p>Posting of Job Safety and Health by Employer Rule RSA 281-A: 4 of the New Hampshire Code.</p>	<p>Posting of Job Safety and Health must posted in a conspicuous place upon the premises a notice that the employer is working under the provisions of Rule RSA 281-A: 2 of the New Hampshire Code. If employer fails to post such notice or to keep it posted, such employer shall be guilty of a violation for each day of such failure.</p>	<p>Any covered employer failing to post the poster may be subject to citation and penalty.</p>	<p>Posting of Job Safety and Health</p>

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