SAW + Match Program



Program Information

Details

- GRIP has an incentive that matches the L&I modified-duty reimbursement (SAW).
- GRIP can reimburse eligible employers up to 50% of the base wages for modified-duty workers paired with the 50% the state already offers through the SAW program.
- Employers participating in RETRO can now get reimbursed up to 100% of the base wages for 66 days or \$20,000 per claim.

Timing

• Any light duty worked is reimbursable in all active plan years.

GRIP Match Requirements

Both SAW and GRIP programs have requirements.

- SAW Requirements
 - APF
 - RTWF or MDJD
 - Payroll records (reimbursement coordinator responsibility)
- GRIP Requirements Compliance with KOS Policy No time loss for the first 30 workdays of disability, mitigated by KOS or RTW.
 - MUST be a reasonably continuous job offer

Reimbursement Help

• ERNwest Reimbursement staff (Annett Brown) will fill out both the L&I reimbursement form and GRIP portion *at no charge*.

Work Status and Process Information

Off Work

Use for claims when the employee is currently off work (time loss or KOS)

- Ensure restricted days are entered.
- Use as a tool to get the employer agreement on modified duty.
- Save forms in designated ERNIE location.
- Email Reimbursement staff once RTW has been completed.

Reasonably Continuous (RC)

Use for claims where the employee has returned to work on a RC job.

- Ensure restricted days are entered which will trigger the reimbursement specialist.
- Save forms in designated ERNIE location.
- Email Reimbursement staff once RTW has been completed.

Helpful Resources

Stay at Work Reimbursement Assistance

- BEST Call and/or email Reimbursement Specialist once RTW has been completed.
- They will fill out both the L&I reimbursement form and GRIP portion at no charge.
- Annette Brown | 253-372-2357 | abrown@ernwest.com

Helpful Resources

Visit the GRIP RTW page for more information.

- <u>GRIP Return to Work ERNwest</u>
- Password: WorkSafe

Marketing Assets



Automated Email Overview

New Claim: A new claim is entered into ERNIE.

□ \$ + New Western Comp (Americal Market - Manage) (MG) P al U X Ha Maximum Ha X Accurate T Accurate Accurat Acurat Acurate	This triggers an automatic New Claim email.	
$\begin{array}{c c c c c c c c c c c c c c c c c c c $	Sent to:	The employer contact listed in ERNIE
New Workers Comp Claim - \$8H78297\$		
Allie Brocks Image: Construction of the second	Sent by:	The association claims manager
Your company part coacies in the COIP retro (andwor' comparisation) program, and we have been alerted that a workers' companisation chain has been final with the Department of Labor and Inductions (ABI) for your company.		
Colm 1: 5-78297 Location T-Beet Refs Covert LLC High There Info 75027	BCC:	N/A
Invi Romet Insi Inst Romet Ve	Documented to:	The claims file
If you have not yet sent me this claim's madent report, please send one over as soon as possible,	Documented to.	
Risse read the "Program Reminder" section below and contact me immediately if: 1. The empiyees is not acts to perform their regular (ab. 1. The empiyees was a ball blen of any with its more than 5 days	Weekly Summary list	N/A
 You have any concerns regarding this detry. You beneve you need to discipline or terminate this amployee anythme soon. 		
Nothing cise is needed in	emailed to:	
 Your employee continues to perform their regular job Your company has no question ant/or issue with this claim. 		
 The company neuroperation processing with the company associated with this dam. We have already characterized return to work and any other routes associated with this dam. 		
List like in correct if any additional information is needed - please call or email me directly if you have any additional questions or tomerna.		
Elinceroly,		
India Sensita		
Ennix@enneet.com		
181-183-0015		
Program Reminster		
Upon employees in the program as a company committed to: 1. Wantam a two-Dridalary (KDS) Polocy, which shall keep each maned worker on full valary (100% waters) for at two, then y (10)		
weekdays (an weaks), manadately following the first date of written certification by the medical provider that the worker is unable to		
perform the normal job duties. 3. Provide light/modified outy work in all caves where an argued worker is unable to perform their normal job duties.		
Please familiaria: yoursalf with some of the holidul resources that are available at environment or (assword – Workiafe).		

Time Loss: Work status type in *Restricted Days* is set to "Off Work" (ws type 11).

□ 9 名・* GM25WW Loft Inne \$3656484 - Managa (1194) 2 dJ U X	This triggers an automatic <i>Time Loss</i> email.	
He Message He's Archat		
■ ■ ■ Solution Sol	Sent to:	The employer contact listed in ERNIE
GRIP SAW Lost Time \$BK649895		
Address Day Cl (≤) <	Sent by:	The association group manager Ashlee Day
We have been alwrited that your amployee (Mos ¹¹¹¹ / SKH300) has possibly masked work as a result of an industrial righty claim.		
The crival is to room divise that the participants in GRP years concerny is REQUIRED to any injunction projects south to a modified, so write recording monitoring they, and it unable to provide immediate modified ands to pay the employer's regular waters (<u>constitutes</u>) recorded to as 1000 for the KPV concerning a constant (and use on a single).	BCC:	N/A
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employee. It your employee is not returned to work, and 605 has not been ptick. USI will likely start agving time loss bandits to your smaltwee.	Weekly Summary list	Group Manager
The loss can be very damaging to your future. (All premium rates and your pretential SBIS returns).	• •	1 0
baries for being part of the GDP retro program and please let me brow if you have any quastions.	emailed to:	Reimbursement Coordinator
Sinceroly,		Management Team
Adhice Day		5
Group Manager adaptive moved com		
542-532-5466		
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SAW Mod Duty: Work status type in Restricted Days is set to "RC Mod Regular Pattern" (ws type 9).

This triggers an automat	tic Modified Duty email.
Sent to:	The employer contact listed in ERNIE
Sent by:	The Reimbursement Coordinator Annette Brown
BCC:	N/A
Documented to:	The claims file
Weekly Summary list emailed to:	Group Manager Reimbursement Coordinator Management Team
	Sent to: Sent by: BCC: Documented to: Weekly Summary list

SAW KOS: Work status in restricted days is set to "KOS" (WS type 1).

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Bit The set of the set o	Sent to:	The employer contact listed in ERNIE
GRIP SAW KOS \$8K538665		
Achies Day 25 43 testy 43 testynt 35 tennem 100	Sent by:	The association group manager
Ell (1697-Shreeb, a Breach-of-act)		Ashlee Day
Hi Sarah Ann.		
Goosting to our records your company has recently contained on injures worker's wages (KOS) despite he/size being att work (Sea ^{man} / Distincts)	BCC:	N/A
I wanted to them you for aphebring your part of the GRP memoer agreement requiring the KOS payment and elert you to a program that can significantly indice your KOS expense in the future. If you are able to return your injured employee back to work GRP can		
 remainse you company for up to 00% of the copies you pay the employee'. Is riging an injured employee back to work is also the back way for you to memory control over a claim and what you pay L&L. 	Documented to:	N/A
I've attached a document to take email that explains GRIP's relative reservent program. To take advantage of this program you are responsible for a few documents, but it should be well worth your time.		
 Writish discription of modified up (nature to work form or set discription) approved by the extent's medical provider: A responsibly continuous job offer lotter. 	Weekly Summary list	N/A
3. Paped verification of vages part.	• •	,
Heade see the attached document which explains the program and how you can submit for reimbursement, please also use the GRIP <u>ETW resource weeksite</u> , the password to access the site is WorkSare.	emailed to:	N/A
Beauelet me know if you have any questions or need help identifying when forms you need to belie advantage of this great program.		
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Author Day		
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adangsenwest.com 258-237-0809		
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