

Workers' Compensation Guidance & Forms

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Ensure you review the correct information for your state.

Direct any questions to hr@wellhaven.com. Examples of completed forms are available below.

For WA State Only

When a workplace injury occurs, a health care provider will determine and certify whether the injury is work-related, and help initiate any processes. Learn more: [WA State Workers' Comp Claim Information](#).

NOTE: Complete the OSHA Module in Paycom for all reportable injuries

[PAYCOM WORKPLACE INJURY MODULE INSTRUCTION GUIDE.pdf](#) 

[Review L&I FAQs - What to expect](#)

[L&I - What to expect](#) 

[WA State – L&I – Contact Information](#)

Phone: 360-902-5800

For ALL other states: Follow the steps below

Step 1

[Review the PM/PD Checklist](#)

[HANOVER Work Comp - PM Checklist.pdf](#) 

Step 2

[Complete the Injury Claim Form](#)

- [Arizona First Report of Injury Form](#) 
- [Colorado First Report of Injury Form](#)
- [Minnesota First Report of Injury Form](#)
- [Montana First Report of Injury Form](#)
- [Nevada First Report of Injury Form](#) 
- [Oregon Report of Injury Form](#)

Step 3

[Print/provide to injured employee:](#)

- [Injured Employee & Return to Work Form](#)

[Workers' Comp Resource Guide](#)

[Work Comp - Injured Employee Worksheet & RTW Form - Fillable](#) 

[Hanover Resource Guide.pdf](#) 

Step 4	<p>Print/provide to injured employee:</p> <ul style="list-style-type: none"> • Employee's job description to bring when seeking medical attention 	WellHaven Job Descriptions
Step 5	<p>Print/provide to injured employee:</p> <ul style="list-style-type: none"> • Employee's state statutes information <ul style="list-style-type: none"> • Arizona Workers' Compensation Statutes  • Colorado Workers' Compensation Statutes  • Minnesota Workers' Compensation Statutes  • Montana Workers' Compensation Statutes  • Nevada Workers' Compensation Statutes  • Oregon Workers' Compensation Statutes  	
Step 6	<p>Have witness complete the Witness Statement Form</p>	Witness Statement- Fillable.pdf 
Step 7	<p>Supervisor to complete the Incident Investigation Report</p>	Work Comp Supervisor Investigation Report.pdf 
Step 8	<p>Submit all completed documentation to Hanover.</p>	<p>Hanover – Contact Information</p> <p>Phone: 800-628-0250</p> <p>Fax: 800-762-7788</p> <p>Email: WCNewLosses@Hanover.com</p> <p>WellHaven Policy # WZ2M13758900</p>
Step 9	<p>Complete the OSHA Module in Paycom for <u>ALL</u> reportable injuries</p>	PAYCOM WORKPLACE INJURY MODULE INSTRUCTION GUIDE.pdf 

Examples

For additional help:

- Review examples of completed documents or contact HR@wellhaven.com

Work Comp - Examples of Completed Documents.pdf 