

Workers' Compensation Agreement and Consent



Client agreement

Starting January 2008, your homecare worker is eligible for workers' compensation insurance coverage. The employer usually provides this insurance coverage. You are the employer of your homecare worker. However, the Home Care Commission (HCC) has arranged to obtain and pay for workers' compensation insurance for your homecare worker on your behalf. To provide this benefit to your homecare worker, the HCC and others need your authorization and consent.

You give your authorization and consent by signing below. By providing your consent, you are agreeing to let the Home Care Commission (HCC) complete the claims process for you. This may include the HCC completing forms and whatever else is needed to process a workers' compensation claim filed by your homecare worker. It also means that you agree to cooperate with the HCC or the insurance company when they process injury claims.

If your homecare worker is injured while providing services for you, contact the HCC or your case manager, to tell them about the injury, as soon as possible. You can contact the HCC at 1-888-365-0001.

Without your consent to obtain this insurance benefit for you, Seniors and People with Disabilities **cannot** pay for your homecare worker services. If you do not want to give your consent to the HCC to provide this service, your case manager will discuss different service options with you.

Please read the following agreement carefully. If you agree to receive, or continue to receive services, provided by a homecare worker that is paid for by the State, please sign the form below. If you have any questions regarding this notice, please talk with your case manager.

SDS 0354

Client

Date sent

Case number

Prime number

Date of birth

Program

Branch code

Worker

Worker phone

I understand and agree:

1. The Home Care Commission has agreed to obtain workers' compensation insurance coverage for my homecare worker. This insurance is a benefit provided to my homecare worker.
2. I give my consent to the HCC to obtain this insurance coverage for me.
3. The Home Care Commission has my permission to handle all parts of any claim for me if my homecare worker is injured while providing services to me.
4. I agree to cooperate and be interviewed about my homecare worker's injury if he or she is hurt while working for me.
5. If I do not agree, or if I change my mind, to have the HCC obtain workers' compensation insurance and/or process any worker's compensation claim on my behalf, the State will not be able to pay my homecare worker(s) to provide my in-home services.

Client signature

Date