

**FOR WORKERS' COMPENSATION  
BENEFIT QUESTIONS:**

**OFFICE OF HUMAN RESOURCES:**

Tel. (212) 217-3650

**ALL ACCIDENTS MUST BE REPORTED TO  
THE SECURITY DEPARTMENT:**

Tel. (212) 217-7777

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**PMA CUSTOMER SERVICE CENTER:**

Tel. (800) 476-2669

**PROVIDER NETWORK:**

**FIRST HEALTH NETWORK:**

While not mandated by New York State, this network is provided as a service to injured workers who wish to obtain the names of providers who can manage work-related injuries or illnesses. To access providers in your geographic region, visit [www.pmagroup.com](http://www.pmagroup.com).

**PHARMACY PROGRAM:**

**EXPRESS SCRIPTS PATIENT CARE**

Tel. (800) 945-5951

**EMAIL CORRESPONDENCE TO PMA:**

[claimsmail@pmagroup.com](mailto:claimsmail@pmagroup.com)

**SEND ALL MEDICAL  
BILLS/REPORTS/CLAIMS**

**CORRESPONDENCE TO:**

PMA Customer Service Center  
P.O. Box 5231  
Janesville, Wisconsin 53547-5231

**FIT** Fashion Institute of Technology  
State University of New York

Seventh Avenue at 27<sup>th</sup> Street  
New York City, 10001

**IF YOU ARE INVOLVED IN A WORK-  
RELATED INJURY OR ILLNESS**



**WORKERS' COMPENSATION  
BENEFIT PROGRAM**

**PROVIDES EMPLOYEE  
PROTECTION**

Work place health and safety are paramount concerns for FIT. If you sustain a job-related accident or injury, or suffer an occupational disease in the course of employment, you shall receive benefits in accordance with the New York Workers' Compensation Act.

FIT's goal is to provide employee protection and, help you return to your pre-injury status as soon as possible.

### **WORKERS' COMPENSATION COVERAGE:**

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- Is purchased by FIT and benefits are paid by the PMA Management Corp (PMA)
- Is not the same as FIT regular health insurance coverage
- Will take effect if you sustain a work-related injury or illness in the course of performing your normal work duties for FIT

### **HOW WORKERS COMP WORKS FOR EMPLOYEES**

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- To report a work-related accident, injury or illness, immediately notify your supervisor **and** the Office of Human Resources.
- All accidents must be reported to the Security Department.

- When you report your work-related accident, injury or illness, the Office of Human Resources will give you an *Employee's Injury/Illness Report Form* for you to complete.
- A PMA Claims Rep will then contact you. If you qualify for workers' compensation, PMA will pay for necessary services related to your work-related injury or illness.
- You will be assigned a workers' compensation claim number. Bring this information to all of your medical appointments.
- Keep scheduled medical appointments and follow your healthcare provider's instructions on and off work
- You are responsible for keeping your supervisor **and** the Office of Human Resources informed of your recovery and anticipated return to work.

### **RETURN TO WORK**

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**The Office of Human Resources will help you through to a quicker recovery and facilitate your safe return to regular work by working together with you and your supervisor.**

### **MANAGEMENT RESPONSIBILITIES**

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- Report injuries to the Office of Human Resources as soon as you know about them, so that eligible employees can promptly receive benefits.
- Ensure employees seek prompt first aid care irrespective of how minor the illness or injury may seem.
- Work with the Office of Human Resources in the employee's transition back to work.

### **YOUR RESPONSIBILITIES- IF A COLLEAGUE IS INJURED**

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- Remember injured employees who return to work are doing productive work of value to FIT.
- Understand that employees in the program must follow their medical provider's instructions and may need your support in order to do so.

### **SAFETY IS EVERYONE'S RESPONSIBILITY**

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**FIT is part of the New York College & University Risk Management Group which is administered by Marsh USA, Inc.**