

Workers' Compensation Insurance Procedure

Date: [Insert Date]

To: [Employee's Name]

From: [Your Name]

Subject: Workers' Compensation Insurance Procedure

Dear [Employee's Name],

We understand that navigating the workers' compensation insurance process can be overwhelming. This letter aims to clarify the steps you need to follow in the event of a workplace injury.

1. **Report the Injury:** Immediately inform your supervisor about the injury, regardless of its severity.
2. **Seek Medical Attention:** Obtain medical care as needed. You have the right to choose your healthcare provider.
3. **Complete Incident Report:** Fill out the incident report form within 24 hours of the injury.
4. **File a Claim:** Your supervisor will provide you with the necessary claim forms to initiate the workers' compensation claim.
5. **Follow Up:** Keep records of all communications and treatments related to your injury.

If you have any questions or need assistance with the process, please do not hesitate to reach out.

Best regards,

[Your Name]

[Your Title]

[Company Name]

[Contact Information]