



## COVINGTON INDEPENDENT PUBLIC SCHOOLS

25 East Seventh Street ★ Covington, Kentucky 41011 ★ 859.392.1000 ★ 859.292.5801 TTY ★ 859.292.5916 fax

Chartered 1850 ★ An Equal Opportunity Employer M/F/D

**ALVIN L. GARRISON**

Superintendent of Schools

### **PROCESS FOR FILING A WORKER'S COMPENSATION CLAIM**

- 1) If you are injured at work, you must notify your supervisor immediately. Failure to notify your supervisor could result in denial of benefits.
  
- 2) You may obtain medical care at St. Elizabeth Business Health Center – Mineola, 4123 Olympic Boulevard, Suite 150, Erlanger, Kentucky, 41018. The phone number is (859) 301-2999. The fax is (859)301-2997. Your examination will include a test for drugs and/or alcohol. You may secure medical treatment from your personal physician if your personal physician accepts Worker's Compensation claims.
  
- 3) Immediately following treatment, you must complete the **First Report of Injury or Illness Form 1A-1**. The form is located on the school district website under Staff Resources – Workman Compensation. The completed form must be submitted to **Scott Hornblower**, CIPS Central Office, 25 E. 7<sup>th</sup> Street, Covington, KY, 41011. It can be emailed to [scott.hornblower@covington.kyschools.us](mailto:scott.hornblower@covington.kyschools.us), faxed to 859-292-5827, or hand delivered. The form must be submitted before any benefits can be considered.
  
- 4) You will be contacted by a claims representative assigned to your claim once the form is received and processed by the school district designee.

If you have questions or concerns, please contact Scott Hornblower at 859-392-1004 or [scott.hornblower@covington.kyschools.us](mailto:scott.hornblower@covington.kyschools.us).