## **WORKERS' COMPENSATION WORKS FOR**

YOU

Your <u>employer's workers' compensation insurance</u> pays your medical bills and other expenses & replaces part of your salary if you have an accidental personal injury or disease caused by your job. You should expect if you are disabled & unable to work for more than three (3) days to be compensated for your loss of earnings at a rate up to two-thirds of your salary, limited to the maximum as set by law.

## If injured on the job, you should:

1. Notify your employer or supervisor at once. You can't receive full benefits unless your employer knows you're injured.

2. Tell the doctor who treats you that you were hurt on the job.

3. Complete an Employee's Claim Form C-1 and send it to us as soon as possible. You can obtain the form from the Commission by calling (410) 864-5100 (Baltimore) or 1 (800) 492-0479

or by email: info@wcc.state.md.us

PLACE EMPLOYER/INSURER INFORMATION STICKER HERE STICKER MUST INCLUDE EMPLOYER'S BUSINES NAME AND ADDRESS, CITY, STATE, ZIP CODE AND PHO NUMBER, EMPLOYER'S FEDERAL I.D. NUMBER (FEIN) INSURANCE COMPANY NAME, AND INSURANCE COMPA

This Notice of Compliance must be posted by the employer and maintained conspicuously in and about the employer's place or places of business.