550 Ellinwood Way
Pleasant Hill, CA 94523
1-866-9-CCCSIG or 1-866-922-2744

Contra Costa County Schools Insurance Group was established in 1977 to provide self-insured workers' compensation coverage for the school member districts in Contra Costa County.

CCCSIG is here to service our districts' needs and coordinate for our district employees, after an injury occurs, all workers' compensation benefits. Prompt communication between the employee, their treating physician, district and CCCSIG Claims Team will assist in providing timely benefits and successful return-to-work efforts if disabled after an industrial injury.

In our commitment to promoting a safe working environment, CCCSIG has a number of safety resources available to our district members. For more information, contact your District's Health & Safety Coordinator or call CCCSIG's Health & Safety Services Department at 1-866-922-2744.



Look for this claims poster located at all school sites and departments and contact your District's Claim Coordinator for additional information or CCCSIG Claims Department at1(866) 9-CCCSIG.

This pamphlet has been approved for distribution by the Department of Industrial Relations Division of Workers' Compensation Administrative Director.

www.cccsig.org

Contra Costa County
Schools Insurance Group

Facts About Workers' Compensation Benefits for School District Employees

Revised January 2026

What is Workers' Compensation?
California's no fault compensation law was passed over 75 years ago by the State Legislature to guarantee prompt, automatic benefits to employees who sustain an injury or illness as a result of their employment.

The school districts in Contra Costa County are self-insured for workers' compensation benefits. The school districts' Joint Powers of Authority program is administered by Contra Costa County Schools Insurance Group who is responsible for all benefit coordination for district employees who sustain an injury or illness arising out of and in the course and scope of their employment.

Who is entitled to benefits?
If an injury or illness occurs as a result of your employment you are entitled to workers' compensation benefits. With few exceptions, all California employers are subject to State Workers' Compensation laws.

How are benefits claimed?
The first step is to immediately report your injury or illness to your supervisor or employer. At that time the supervisor immediately calls Company Nurse® at **1 (888) 375-9779** - give **Group Code CSIG** - to report the incident/injury and initiate the claim filing process. Company Nurse® will gather information and facts about the injury from you.

Your claim information will be sent to CCCSIG who is responsible for handling your claim and notifying you about eligibility for benefits. When a claim has been established, CCCSIG will provide you with a DWC-1 form, also known as a Workers' Compensation Claim Form, with instructions for you to complete the "Employee" section and return.

Prompt reporting of your injury is the key. Benefits begin immediately as required by State regulation, but this can not occur until you report your injury to your Supervisor and call the injury hotline. Ensure your rights to benefits by reporting every injury.

Are there time limitations for filing a claim for injury or illness?
To claim benefits for an industrial injury you should be aware that such a claim is subject to certain time limitations. Any delay in reporting may delay workers' compensation benefits and you may not be able to receive benefits if you don't file a claim within one year of the date of injury, the date you knew the injury was work related, or the date benefits were last provided. An employee also has one (1) year from the date of injury or last date benefits were provided to institute proceedings for workers' compensation benefits. The date of injury for occupational diseases or cumulative injuries is defined in the Labor Code as the date upon which the employee first suffered disability from and either knew, or in the exercise of reasonable diligence should have known, that such disability was caused by his or her present or prior employment.

Employees who are victims of crime that occur at the employee's place of employment shall be given notice of their right to receive workers' compensation benefits as a result of that crime should an injury or illness occur.

Where do I go for medical care?
Once you report your injury to your supervisor/employer, and contact Company Nurse®, care recommendations or medical treatment directions will be provided by the Nurse. In the event medical care is required, Company Nurse® will direct you to one of your district's Medical Panel of physicians who specialize in the treatment of occupational injuries, or your injury may qualify you for a Telemedicine appointment. These physicians are also aware of the workers' compensation reporting requirement for physicians. When doctors are not familiar with these requirements, it may delay benefits.

You are entitled to be treated by your own personal physician, if you have notified your employer, in writing, prior to your injury of your pre-designation selection. Your physician has to have actually served as your "personal" physician and/or surgeon and must agree to be pre-designated. If you wish to change your physician, please contact CCCSIG so that the appropriate information, as required by the State regarding a change, may occur.

WORKERS' COMPENSATION FRAUD IS A FELONY! Anyone who makes or causes to be made any knowingly false or fraudulent material statement for the purpose of obtaining or denying workers' compensation benefits or payments is guilty of a felony and may be fined and imprisoned.

What Are the Benefits? California's workers' compensation provides five different benefits to injured employees:

Medical Benefits

Medical Benefits are provided to cure **or** relieve the effects of an injury based on the guidelines adopted by the Administrative Director under the occupational medicine practice guidelines. Benefits include, physician's services, medicines, hospital costs, lab test, x-rays, crutches, even mileage expenses for required medical care. Medical benefits may also include physical therapy, occupational therapy and chiropractic care, with the number of chiropractic, occupational and physical therapy visits subject to limits set by state law. There are no deductibles or co-payments for these services. The medical provider should send all bills directly to CCCSIG. If you receive a bill, please immediately send it to CCCSIG to ensure prompt payment. Upon receipt of a signed Employee Claim Form, medical treatment up to $10,000 will be authorized in accordance with state approved evidence based medical guidelines until such time that a decision is made to accept or deny liability of your claim.

Temporary Disability (TD) Benefits

Regular school district employees may be entitled to receive **Education Code Benefits** in addition to and/or in conjunction with benefits afforded by Labor Code. The Education Code Benefits (sections: S45192; S45191; S45196; S44984; S44978 and S44977) include 60 days of Industrial Leave, then utilization of sick leave, vacation benefits and differential pay if applicable. If you are entitled to salary continuation, through Ed Code benefits, temporary disability benefits will be included in your regular paycheck, as CCCSIG will coordinate these benefits afforded by the Labor Code with your district.

If you are entitled to receive Ed Code benefits, when your physician releases you to return to work with restrictions and your district is able to accommodate the restrictions on a temporary basis, you will be brought back in a bridge assignment, which is a temporary work assignment or modified position. If you choose to not return in a bridge assignment or modified capacity, your sick leave or vacation benefits will be charged for your absence.

Returning to work as soon as medically possible affords you the opportunity to maintain your current accrued benefits.

Most injuries only keep you from working temporarily. You will be paid temporary disability benefits while you are unable to return to work in a modified or full duty capacity. Temporary disability may not be paid for the first three days of disability after the injury unless you are hospitalized or off work more than 14 days. These payments will continue until your doctor releases you to return to work or determines that your condition has reached maximum medical improvement and you are permanent and stationary (P&S). **For dates of injury 1/1/08 and after, Temporary Disability benefit payments are limited to 104 weeks within a five year period beginning with date of injury.**

Temporary disability is two-thirds of your average earnings, up to the State maximum. The current maximum weekly rate for Temporary Disability for injuries on or after January 1, 2026 is $1,764.11 and the minimum rate is $264.61 per week. These payments are issued bi-weekly and are tax free with no deductions for either State or Federal taxes. If you are still eligible for temporary disability payments two years after the injury, any TD payments made after that will be adjusted to the current rates if justified by earnings.

Permanent Disability (PD) Benefits

Permanent Disability Benefits are paid when your industrial injury results in a permanent impairment, even though you may be able to return to your regular job. Permanent disability is evaluated when you have reached maximum medical improvement and further changes in your condition are not expected. Your physician will supply you and CCCSIG with a medical report outlining any permanent disability factors you may have as a direct result of your industrial injury.

If either you or CCCSIG disagree with the physician's findings, both have the option of choosing another physician to evaluate your medical condition. Submit a request to the State, who will send a panel of three physicians to choose from.

Permanent disability is two-thirds of your average earnings, at the time of your injury, subject to state maximum and minimum rates. If it is determined that you have permanent disability, the number of permanent disability payments are based on a schedule, established by the State. The factors taken into consideration in the schedule are your age, occupation at the time of injury, and the extent of your medical findings as a result of your industrial injury.

Supplemental Job Displacement Benefits

If the claims administrator receives a doctor's report that you have recovered as much as possible from your job injury and that you have a permanent disability, within 60 days you may receive a form with an offer of regular, modified or alternative work from your employer. If 60 days after the claims administrator receives this type of doctor's report your employer has not offered you regular, modified or alternative work, your claims administrator has 20 days to offer you a Supplemental Job Displacement Benefit. This is a voucher for up to $6,000 that you can use for retraining or skill enhancement at a state accredited school, books, required tools, professional license and certification fees, or other resources that can help you find a new job. There are limits on how much you can receive for some items, but if you qualify, you will receive information on the types of expenses that are covered, the limits, documentation requirements and deadline for using the benefit.

Death Benefits

Death benefit payments to survivors who were financially dependent on a deceased worker are set by state law according to the number of dependents and the date of injury. Generally, payments are made at the same rate as temporary disability benefits, however, no payments will be less than $224 per week. Workers' compensation also pays a burial allowance of up to $10,000.

Other Benefits

If your injury is very serious and you expect to be off from work for a year or more, you may be eligible for additional benefits from Social Security. Contact the closest Social Security Administration Office, listed in the white pages of the phone book under "United States Government."

Nondiscrimination Facts

An injured employee may not be discharged, threatened with discharge or discriminated against because they file, intend to file, testify on behalf of another employee or settle a workers' compensation claim. All injured employees are protected under the California State Workers' Compensation Labor Code for such discrimination.

What if there is a problem?

Workers' compensation is a benefit system, which provides automatic benefits to an employee who is injured or has an illness as a result of their employment. Therefore most workers' compensation claims are handled routinely, but occasionally misunderstandings may occur. If you believe you have not received all benefits due to you please contact us at CCCSIG as most questions can be cleared up with a telephone call.

If you still have concerns, you may contact the nearest office of the State Division of Workers' Compensation, in Oakland at (510) 622-2861. The State employs Information and Assistance Officers to assist injured employees with problems and concerns. The Information and Assistance Officer will review your claim, advise you of your rights and the procedures for resolving disputes.

Some concerns may need to be resolved by the Workers' Compensation Appeals Board, the State agency responsible for handling disputes. The Appeals Board is a court of law where you may represent yourself or retain an attorney to represent you. If you retain an attorney, their fees will be deducted from any benefits awarded to you by the Appeals Board. Attorney fees generally are 9 to 15 percent of your final permanent disability award, plus an additional amount if you receive vocational rehabilitation benefits.

If it is necessary to go to the Appeals Board, there is a statute of limitation in which an application for adjudication of claim must be filed. You have within one year from the date of your injury, or last date you were provided benefits, to file an application with the Appeals Board.

Division of Workers' Compensation - Fact Sheets & Guides for Injured Workers